House Bill 2552

Sponsored by Representative RESCHKE (Presession filed.)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced.

Increases amount of income tax credit allowed to rural medical providers. Removes eligibility limitation based on adjusted gross income of medical provider.

Applies to tax years beginning on or after January 1, 2023.

Takes effect on 91st day following adjournment sine die.

A BILL FOR AN ACT

Relating to tax credits for rural medical providers; creating new provisions; amending ORS 315.613; and prescribing an effective date.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 315.613 is amended to read:

315.613. (1) An annual credit against the taxes otherwise due under ORS chapter 316 shall be allowed to a resident or nonresident individual who is:
(a) Certified as eligible under ORS 442.563;
(b) Licensed under ORS chapter 677; and
(c) Engaged in the practice of medicine, and engaged for at least 20 hours per week, averaged over the month, during the tax year in a rural practice; and
(d) Has adjusted gross income not in excess of $300,000 for the tax year. The limitation in this paragraph does not apply to a physician who practices as a general surgeon, specializes in obstetrics, specializes in family or general practice and provides obstetrical services or practices emergency medicine in a county that is a frontier rural practice county under rules adopted by the Office of Rural Health.

(2) The amount of credit allowed shall be based on the distance from a major population center in a qualified metropolitan statistical area at which the taxpayer maintains a practice or hospital membership:
(a) If at least 10 miles but fewer than 20 miles, [$3,000] $6,000.
(b) If at least 20 miles but fewer than 50 miles, [$4,000] $8,000.
(c) If 50 or more miles, [$5,000] $10,000.

(3) The credit shall be allowed during the time in which the individual retains such practice and membership if the individual is actively practicing in and is a member of the medical staff of one of the following hospitals:
(a) A type A hospital designated as such by the Office of Rural Health;
(b) A type B hospital designated as such by the Office of Rural Health if the hospital is:
(A) Not within the boundaries of a metropolitan statistical area;
(B) Located 30 or more miles from the closest hospital within the major population center in a metropolitan statistical area; or

NOTE: Matter in boldfaced type in an amended section is new; matter [italic and bracketed] is existing law to be omitted.
New sections are in boldfaced type.

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(C) Located in a county with a population of less than 75,000;
(c) A type C rural hospital, if the Office of Rural Health makes the findings required by ORS 315.619;
(d) A rural critical access hospital; or
(e) A hospital:
(A) Classified by the Centers for Medicare and Medicaid Services as a rural referral center in accordance with 42 U.S.C. 1395ww(d)(5)(C)(i); and
(B) Classified by the Centers for Medicare and Medicaid Services as a sole community hospital in accordance with 42 U.S.C. 1395ww(d)(5)(D)(iii).
(4) In order to claim the credit allowed under this section, the individual must remain willing during the tax year to serve patients with Medicare coverage and patients receiving medical assistance in at least the same proportion to the individual’s total number of patients as the Medicare and medical assistance populations represent of the total number of persons determined by the Office of Rural Health to be in need of care in the county served by the practice, not to exceed 20 percent Medicare patients or 15 percent medical assistance patients.
(5) A nonresident individual shall be allowed the credit under this section in the proportion provided in ORS 316.117. If a change in the status of a taxpayer from resident to nonresident or from nonresident to resident occurs, the credit allowed by this section shall be determined in a manner consistent with ORS 316.117.
(6) For purposes of this section, an “individual’s practice” shall be determined on the basis of actual time spent in practice each week in hours or days, whichever is considered by the Office of Rural Health to be more appropriate. In the case of a shareholder of a corporation or a member of a partnership, only the time of the individual shareholder or partner shall be considered and the full amount of the credit shall be allowed to each shareholder or partner who qualifies in an individual capacity.
(7) As used in this section:
(a) “Qualified metropolitan statistical area” means only those counties of a metropolitan statistical area that are located in Oregon if the largest city within the metropolitan statistical area is located in Oregon.
(b) “Rural critical access hospital” means a facility that meets the criteria set forth in 42 U.S.C. 1395i-4 (c)(2)(B) and that has been designated a critical access hospital by the Office of Rural Health and the Oregon Health Authority.
(c) “Type A hospital,” “type B hospital” and “type C hospital” have the meaning for those terms provided in ORS 442.470.
SECTION 2. The amendments to ORS 315.613 by section 1 of this 2023 Act apply to tax years beginning on or after January 1, 2023.
SECTION 3. This 2023 Act takes effect on the 91st day after the date on which the 2023 regular session of the Eighty-second Legislative Assembly adjourns sine die.