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HOUSE COMMITTEE ON BEHAVIORAL HEALTH AND HEALTH CARE

Oregon State Capitol
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AGENDA

Posted: MAR 19 02:35 PM

TUESDAY

Date: April 1, 2025
Time: 3:00 PM
Room: HR C

Please note: This meeting is scheduled from 3:00-6:30 pm

Work Session

HB 3324

Provides that a health care facility is not a manufacturer, distributor, seller or lessor of a product for purposes of a product liability civil action if the health care facility was not involved in the design or manufacture of the product.

HB 2149

Requires pharmacy services administrative organizations operating in this state to be licensed by the Department of Consumer and Business Services and creates rules for licensing requirements.

HB 3212

Creates additional rules and requirements for pharmacy benefit managers and a policy or certificate of health insurance or other contract providing for the reimbursement of the cost of a prescription drug.

HB 3226

Includes pharmacy services administrative organizations within the definition of pharmacies for the purpose of ensuring that pharmacy benefit managers are subject to laws regulating their activities even if their contracts are with pharmacy services administrative organizations.

HB 2365 **

**Subsequent Referral(s) to Revenue

Adds mental health professionals, naturopathic physicians, pharmacists, medical laboratory scientists and medical laboratory technicians to the types of providers eligible for the tax credit allowed to rural medical care providers.

HB 2357

Enacts the interstate Occupational Therapy Licensure Compact.

HB 2554 **

**Subsequent Referral(s) to Ways and Means

Enacts the interstate Social Work Licensure Compact.

HB 2676 **

**Subsequent Referral(s) to Ways and Means

Enacts the interstate Dentist and Dental Hygienist Compact.

AGENDA (cont.)

April 1, 2025

- HB 3060
Enacts the PA Licensure Compact.
- HB 3339
Enacts the Psychology Interjurisdictional Compact.
- HB 3351
Enacts the interstate Counseling Compact.
- HB 2013
Includes outpatient facilities that employ certified alcohol and drug counselors as providers for the purposes of mental health treatment insurance coverage.
- HB 2029
Imposes requirements and restrictions on insurer and coordinated care organization audits of claims for reimbursement submitted by behavioral health treatment providers.
- HB 2057
Prohibits insurers offering policies or certificates of health insurance and pharmacy benefit managers from requiring that a claim for reimbursement of a prescription drug include a modifier or other indicator that the drug is a 340B drug.
- HB 2143
Defines "five-needle protocol."
- HB 2147
Provides funding to the Higher Education Coordinating Commission to be distributed to Oregon Health and Science University for purposes of the Addiction Medicine Fellowship program.
- HB 2206 ** **Subsequent Referral(s) to Ways and Means
Requires the Oregon Health Authority to convene a work group to study the feasibility of and develop a plan for transferring responsibility from the authority to coordinated care organizations to administer adult residential mental health service benefits and assume the financial risk of administering those benefits.
- HB 2208
Requires a community health improvement plan to serve as the primary regional planning document for all health services and operations and incorporate various other planning documents.
- HB 2210 ** **Subsequent Referral(s) to Ways and Means
Expands a provider credentialing database maintained by the Oregon Health Authority to include audit or other compliance materials that an organizational provider must submit to a coordinated care organization.
- HB 2211
Defines a "dental subcontractor."
- HB 2214
Modifies the minimum financial requirements for coordinated care organizations.
- HB 2215 ** **Subsequent Referral(s) to Ways and Means
Establishes a process for determining global budgets for coordinated care organizations that is similar to the rate review process for insurers.
- HB 2216 ** **Subsequent Referral(s) to Ways and Means
Directs the Oregon Health Authority to assess current fee-for-service billing practices and non-fee-for-service payment pathways for community health workers serving medical assistance recipients to identify improvements for ensuring adequate and sustainable funding.

AGENDA (cont.)

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- HB 2222 ** **Subsequent Referral(s) to Ways and Means
Directs the Oregon Health Authority to create and maintain a registry of mobile integrated health care providers.
- HB 2239 ** **Subsequent Referral(s) to Ways and Means
Directs the Oregon Health Authority to adopt minimum quality and performance standards to certify recovery residences that contract with the authority, a coordinated care organization or a county behavioral health department to provide housing supports to individuals with substance use disorders.
- HB 2270 ** **Subsequent Referral(s) to Ways and Means
Directs the Oregon Health Authority to increase by 30 percent the reimbursement rates for addiction medicine services.
- HB 2292
Requires health benefit plans and medical assistance managed plans to provide coverage with no cost-sharing for additional treatment for human immunodeficiency virus and prohibits requiring prior authorization.
- HB 2385
Makes it an unlawful practice for drug manufacturers to interfere directly or indirectly with a pharmacy or drug outlet acquiring 340B drugs, delivering 340B drugs to certain health care providers or dispensing 340B drugs.
- HB 2591 ** **Subsequent Referral(s) to Revenue
Establishes an income tax credit for physicians who practice anesthesiology and for certified registered nurse anesthetists who do not qualify for rural health care provider tax credits.
- HB 2594
Requires a dental laboratory to register with the Health Licensing Office.
- HB 2597 ** **Subsequent Referral(s) to Ways and Means
Directs the Oregon Health Authority and coordinated care organizations to reimburse dental care organizations for dental services provided to medical assistance recipients at a rate no less than 59.
- HB 2685 ** **Subsequent Referral(s) to Ways and Means
Directs the Oregon Health Authority to provide information on the screening protocol for cytomegalovirus to hospitals and birthing centers.
- HB 2690 ** **Subsequent Referral(s) to Ways and Means
Establishes the Health Insurance Mandate Review Advisory Committee, staffed by the Legislative Policy and Research Director, to meet during interims between sessions of the Legislative Assembly to review a specified number of proposed measures sponsored by or submitted to the interim committees of the Legislative Assembly related to health if the measure requires health insurance policies to reimburse specified health care providers or to reimburse the cost of a specific service.
- HB 2942
Requires the Oregon Health Authority and coordinated care organizations to reimburse pharmacies and pharmacists in the same manner as other health care providers for certain services related to HIV treatment.
- HB 2943 ** **Subsequent Referral(s) to Ways and Means
Directs a hospital to conduct HIV and syphilis screening when an individual undergoes a blood test or analysis as part of medical care received within an emergency department, unless the individual declines a test.

AGENDA (cont.)

April 1, 2025

- HB 2955 ** **Subsequent Referral(s) to Ways and Means
Requires medical assistance to include continuous glucose monitors for specified recipients of medical assistance.
- HB 3046
Clarifies that a pharmacist may prescribe, dispense and administer medications for treatment of opioid use disorder.
- HB 3082
Requires prescription drug manufacturers to report to the Department of Consumer and Business Services the total number of consumers to which the manufacturer offered a patient assistance program who participated in the program, notwithstanding any increase in the price of the prescription drug for which the manufacturer offered the program.
- HB 3086
Requires the Public Employees' Benefit Board to count payments made by or on behalf of an enrollee for the cost of certain prescription drugs when calculating the enrollee's contribution to an out-of-pocket maximum, deductible, copayment, coinsurance or other required cost-sharing for the drugs.
- HB 3092
Requires the Oregon Educators' Benefit Board to count payments made by or on behalf of an enrollee for the cost of certain prescription drugs when calculating the enrollee's contribution to an out-of-pocket maximum, deductible, copayment, coinsurance or other required cost-sharing for the drugs.
- HB 3146 ** **Subsequent Referral(s) to Ways and Means
Directs the Oregon Health Authority to administer a pilot program to provide low-barrier emergency housing for houseless or unsafely housed individuals on waiting lists for residential substance use disorder treatment or withdrawal management programs.
- HB 3192 ** **Subsequent Referral(s) to Ways and Means
Appropriates moneys from the General Fund to the Oregon Health Authority for the purpose of screening newborns for five specific diseases under the Northwest Regional Newborn Bloodspot Screening Program.
- HB 3211
Requires the Oregon Health Authority to develop and make available a nonopioid directive form.
- HB 3214
Expands the definition of "debilitating medical condition" for the medical use of marijuana.
- HB 3221 ** **Subsequent Referral(s) to Ways and Means
Requires a person or government unit that is establishing or operating an urgent care center in this state to register the urgent care center with the Oregon Health Authority.
- HB 3229 ** **Subsequent Referral(s) to Ways and Means
Directs the Oregon Health Authority to expedite the process for enrolling providers in the medical assistance program and study the feasibility of developing and implementing an automated, online tool for provider enrollment applications.
- HB 3243
Prohibits balance billing for ambulance ground transportation services and creates rules for health benefit plan coverage of ambulance services.
- HB 3245
Directs the Oregon Health Authority to develop a methodology for calculating a coordinated care organization's global budget.

AGENDA (cont.)

April 1, 2025

HB 3326

Requires the Oregon Health Authority to study barriers to accessing dental care for seniors.

HB 3439

Requires individual and group health benefit plans and benefit plans offered by the Public Employees' Benefit Board and the Oregon Educators Benefit Board to reimburse services provided by naturopathic physicians within the scope of their practice if the services are reimbursed when provided by licensed physicians, physician associates or nurse practitioners.

HB 3554 **

**Subsequent Referral(s) to Ways and Means

Directs the Oregon Health Authority to establish a primary care provider loan repayment program to provide loan repayment subsidies to specified primary care providers.

HB 3650 **

**Subsequent Referral(s) to Ways and Means

Establishes the Latino Health System Task Force.

HB 3727

Allows a physician or physician associate to use telemedicine to practice medicine or provide health care services under specified circumstances to a patient located out of state.

HB 3817

Directs the Oregon Health Authority in collaboration with the Department of Veterans' Affairs to establish a process through which a certain individual may consume ibogaine for a specified purpose.

For information on how to submit written testimony or register to testify on bills scheduled for a public hearing:

https://www.oregonlegislature.gov/citizen_engagement

Written testimony may be submitted up to 48 hours after the committee meeting is scheduled to begin. Public testimony registration closes 30 minutes before the meeting is scheduled to begin.

For information on Language Access Services/Para más información sobre los Servicios de Acceso Lingüístico:

<https://www.oregonlegislature.gov/lpro/Pages/language-access.aspx>

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