

SENATE AMENDMENTS TO SENATE BILL 609

By COMMITTEE ON HEALTH CARE

April 15

1 On page 1 of the printed bill, delete lines 19 through 30 and delete pages 2 and 3 and insert:

2 **“SECTION 1. Section 2 of this 2025 Act is added to and made a part of ORS chapter 414.**

3 **“SECTION 2. (1) As used in this section:**

4 **“(a) ‘Behavioral health provider’ means a provider, other than a primary care provider,**
5 **who is licensed under ORS chapter 675 to provide behavioral health services.**

6 **“(b) ‘Behavioral health services’ means mental health or substance use disorder treat-**
7 **ment and services that are provided in a setting other than a hospital, emergency depart-**
8 **ment or urgent care center.**

9 **“(c) ‘Dental care provider’ means a provider:**

10 **“(A) Who is a:**

11 **“(i) Dentist or dental hygienist licensed by the Oregon Board of Dentistry under ORS**
12 **chapter 679 or 680; or**

13 **“(ii) Team of dentists or a dental clinic; and**

14 **“(B) Who provides dental care services.**

15 **“(d) ‘Dental care services’ means the following services that are provided in a setting**
16 **other than a hospital, emergency department or urgent care center:**

17 **“(A) Comprehensive primary dental care; or**

18 **“(B) Basic diagnostic and preventative dental services.**

19 **“(e) ‘Optometry provider’ means a provider licensed under ORS chapter 683 to provide**
20 **optometry services.**

21 **“(f) ‘Optometry services’ means medical eye and vision examination services that are**
22 **provided in a setting other than a hospital, emergency department or urgent care center.**

23 **“(g) ‘Primary care provider’ means a provider:**

24 **“(A) Who is a:**

25 **“(i) Physician licensed by the Oregon Medical Board under ORS chapter 677; or**

26 **“(ii) Nurse practitioner licensed by the Oregon State Board of Nursing under ORS 678.375**
27 **to 678.390; and**

28 **“(B) Whose clinical practice is:**

29 **“(i) Family medicine;**

30 **“(ii) General internal medicine;**

31 **“(iii) Pediatrics;**

32 **“(iv) Prenatal and postnatal obstetrics; or**

33 **“(v) General psychiatry.**

34 **“(h) ‘Primary care services’ means services provided by a primary care provider in a**
35 **setting other than a hospital, emergency department or urgent care center.**

1 “(2) The Oregon Health Authority shall reimburse a primary care provider, optometry
2 provider, dental care provider or behavioral health provider for primary care services,
3 optometry services, dental care services or behavioral health services provided to a medical
4 assistance recipient at a rate no less than the average rate, geographically adjusted, paid by
5 insurers that offer health benefit plans, as defined in ORS 743B.005, in this state.

6 “(3) A coordinated care organization shall reimburse a contracted primary care provider,
7 optometry provider, dental care provider or behavioral health provider for primary care
8 services, optometry services, dental care services or behavioral health services provided to
9 a member of the coordinated care organization at the rate specified in subsection (2) of this
10 section, excluding any bonus or quality incentive payments received by the provider. A co-
11 ordinated care organization may use alternative payment methodologies if the payments are
12 no less than the amounts specified in subsection (2) of this section.

13 “(4) The authority may not request an increase in General Fund appropriations or in
14 expenditure limitations to carry out the provisions of this section and must carry out the
15 provisions of this section within the authority’s legislatively approved budget.

16 “SECTION 3. (1) The Oregon Health Authority shall monitor and review changes in the
17 reimbursement amounts paid in accordance with section 2 of this 2025 Act over a four-year
18 period and prepare a report on whether the reimbursement amounts paid for services de-
19 scribed in section 2 of this 2025 Act:

20 “(a) Reduced wait times and increased access and provider choice for medical assistance
21 recipients;

22 “(b) Improved health outcomes and equity among medical assistance recipients; and

23 “(c) Reduced costs in the medical assistance program due to lower utilization of services
24 in higher cost categories of services such as hospital or specialty care services.

25 “(2) The authority shall submit the report prepared in accordance with subsection (1) of
26 this section to the interim committees of the Legislative Assembly related to health no later
27 than December 31, 2031.

28 “SECTION 4. No later than 60 days after the effective date of this 2025 Act, the Oregon
29 Health Authority shall seek approval from the Centers for Medicare and Medicaid Services
30 to secure federal financial participation in the reimbursement amounts paid to providers
31 under section 2 of this 2025 Act.

32 “SECTION 5. Sections 2 and 3 of this 2025 Act become operative upon the receipt of ap-
33 proval from the Centers for Medicare and Medicaid Services under section 4 of this 2025
34 Act.”.