Enrolled

House Concurrent Resolution 202

Sponsored by COMMITTEE ON RULES (at the request of John Kitzhaber for Health System Sustainability Group)

Whereas the State of Oregon has declared affordable, cost-effective and clinically appropriate health care to be a fundamental right of every resident; and

Whereas the State of Oregon has been successful in expanding health care coverage for children, individuals and families; and

Whereas the State of Oregon has among the lowest rates in the country of individuals without health care coverage; and

Whereas the State of Oregon has invested in strategies to promote high-value, high-quality care; and

Whereas the State of Oregon has prioritized initiatives to increase value-based payments and strategies to reduce health inequities; and

Whereas the State of Oregon continues to prioritize incentives for client-driven, team-based care models in primary and behavioral health care settings; and

Whereas the State of Oregon has implemented patient protection programs to reduce the conditions that cause medical debt; and

Whereas the State of Oregon has invested in cost containment strategies; and

Whereas in spite of those strategies, the cost of health care continues to rise and is becoming unaffordable for individuals, employers and government; and

Whereas Oregon is facing increased pressures to maintain affordable access to health care services; and

Whereas Oregon is projected to lose over $8 billion in federal Medicaid funds over the next three biennia; and

Whereas the intersection of rising health care costs and the loss of federal funds will put unprecedented pressure on the General Fund, which will:

(1) Compromise access to care, particularly in rural parts of this state; and

(2) Undermine the state's ability to invest in other priorities, such as education, housing and economic opportunity, many of which have a direct impact on the health of the population; and

Whereas 15 percent of Oregonians have delayed or avoided needed medical care because of cost; and

Whereas the leading cause of personal bankruptcy in Oregon is the inability to pay a medical bill; and

Whereas over half of Oregon's hospitals are operating at a loss; and

Whereas medical clinics and practices, including independent and primary care practices, are struggling to remain solvent; and

Whereas the rising cost of care is driving higher premiums, copayments and deductibles for employees, higher premiums for employers and straining budgets for both businesses and consumers; and

Whereas there are multiple factors driving the increasing cost of care, including:

(1) A payer mix with a large proportion of publicly funded health care programs such as Medicaid and Medicare;

(2) Oregon's regulatory environment;

(3) A decline in Oregon's primary care infrastructure and growing workforce needs;

(4) Inefficiencies, waste, low-value care and misaligned incentives in health care delivery systems and payment models;

(5) Other cost drivers and trends, including prescription drugs, labor and workforce costs and the significant number of Oregonians who have high acuity behavioral health needs that affect all systems;

(6) The need for greater focus on primary prevention;

(7) The disparity between unlimited demand and the reality of finite resources; and

(8) Unit price across all markets; and

Whereas all of those factors must be addressed to achieve a sustainable solution; and

Whereas the escalating cost of health care is threatening the health and well-being of Oregonians, the stability of the General Fund and the competitiveness of businesses; and

Whereas systemic issues of cost and access cannot be turned around in a single biennium; and

Whereas federal funding decisions will create an immediate budgetary cliff that will exacerbate Oregon's health care challenges; and

Whereas addressing the crisis will require a consistent set of budgetary and policy decisions over the course of three biennia, guided by a long-term policy vision; now, therefore,

Be It Resolved by the Legislative Assembly of the State of Oregon:

That we, the members of the Eighty-third Legislative Assembly, declare a state policy goal that by 2033, through the collective and collaborative efforts of elected leaders, Oregon businesses, health care providers, health insurers and labor leaders, we will live in a state where:

(1) All Oregonians have timely access to a patient-centered primary care home and to quality, affordable health care services;

(2) Health outcomes are improving;

(3) Our health care system is far less complex than it is today, is easy to access and navigate for individuals and is enjoyable to practice in for providers and other health care workers;

(4) Hospitals and medical clinics and practices, including independent practices, have pathways to sustainability;

(5) Employers can afford to offer health insurance through the workplace and employees can afford to take advantage of it;

(6) Unnecessary utilization, unit price and total cost of care trends are below the national average; and

(7) Consumer access to high-value, affordable care is above the national average.

Adopted by House February 24, 2026

Timothy G. Sekerak, Chief Clerk of House

Julie Fahey, Speaker of House

Adopted by Senate March 4, 2026

Rob Wagner, President of Senate