

February 3, 2026

TO: Members of the House Committee on Rules

FR: Ryan Tuthill, Oregon Business & Industry

RE: Oregon Business & Industry Testimony in Opposition to HB 4147

Chair Bowman, Vice Chair Elmer and members of the House Committee on Rules. For the record, I am Ryan Tuthill, Policy and Program Manager for Oregon Business & Industry.

Oregon Business & Industry (OBI) is a statewide association representing businesses from a wide variety of industries and from each of Oregon's 36 counties. In addition to being the statewide chamber of commerce, OBI is the state affiliate for the National Association of Manufacturers and the National Retail Federation. Our 1,600 member companies, more than 75% of which are small businesses, employ more than 250,000 Oregonians. Oregon's private sector businesses help drive a healthy, prosperous economy for the benefit of everyone.

Thank you for the opportunity to provide testimony in opposition to HB 4147. As drafted, this bill creates a complex, multi-agency reporting system to collect employer data annually on the number of employees receiving public medical assistance. While we have concerns about the purpose of collecting this information, we want to highlight several operational and practical issues with the proposal.

First, the purpose of collecting this data is unclear. Under federal law, employers with 50 or more full-time employees are subject to the Affordable Care Act (ACA) employer mandate to provide full-time employee health benefits or face financial penalties. Additionally, federal law prohibits employers from asking whether an employee uses Medicaid or other public assistance. This bill would require state agencies to collect data on factors that employers have no insight into or ability to verify.

Also unclear are the costs this bill imposes on state agencies. The state should provide an accurate and detailed fiscal analysis that accounts for the staff, technology, and interagency coordination required to build out and maintain accurate reporting infrastructure. Additionally, the Legislature should be cautious in creating new regulatory burdens that require additional staffing and resources in the state's current budget environment. By failing to allocate sufficient resources to produce an accurate and comprehensive analysis of the workforce, we fear that any analysis resulting from this legislation would be incomplete and highly misleading.

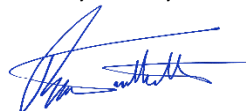
We appreciate the addition of the -1 amendment, which includes analysis of public employer data and limits agency rulemaking. Any statewide analysis should apply consistently to all employers, public and private, rather than singling out the private sector. Limiting reporting to the private sector risks an incomplete and potentially misleading narrative of medical assistance participation for policymakers. However, we remain concerned that the bill in its current form or as amended will still generate data that risks oversimplifying and mischaracterizing the factors driving medical assistance enrollment.

We recommend the following be added to the bill:

- As employees may have several options for health coverage, the report should include data on whether the employee was offered health care from their employer, and the percentage of employees that declined such coverage offered by the employer.
- In addition to the total number of employees employed by an employer in the state and the total number of medical assistance recipients who are employees of the employer, provide the percentage of medical assistance recipients to the full number of employees.
- The state should collect specific information about the type of health coverage offered by each employer and the number of days of employment required before the employee is eligible to receive furnished health insurance coverage.
- The state should identify the average starting hourly wage for each employee and incorporate analysis of the relationship between wages and health care coverage.
- The report should determine the duration of employment for each medical assistance recipient with the employer (e.g., 0 to 91 days, 92 to 181 days, 182 to 365 days, 366+ days) and compare each quarter against the prior quarter. Failure to track each individual recipient across time would likely severely bias the report against employers with large numbers of seasonal, part-time, or entry-level employees by erroneously aggregating a changing population of workers across time.
- The state should include in its report the cost of providing medical assistance to employees and dependents.
- For relevant industries, the state should quantify the number of seasonal or short-term employment of less than 180 days by employer.
- The state needs to account for individuals with multiple employers and those who qualify for Medicaid due to circumstances unrelated to employment and where Medicaid offers a continuity of care even if the employer offers coverage.
- The state must designate in statute the databases and software that will be utilized to interpret or analyze data, develop the report, and any data sharing agreements. It must also articulate a process for employers to review any conclusions and to submit data corrections for erroneous analysis before final publication of the report.

While we appreciate the direction of the -1 amendment, we remain concerned that publishing employer-specified lists built from incomplete and complicated information will create misinterpretations and imply causation where it may not exist. Medical assistance enrollment is often driven by household size, family circumstances or life events, not solely by wages or employer benefits. Publicly tying Medicaid enrollment to specific employers creates reputational risk based on factors that employers do not control. If the goal of this bill is to provide legislative insight, aggregated and contextualized analysis would be more accurate and less likely to mislead the public.

Thank you for your time.



Ryan Tuthill

Policy & Program Manager, Oregon Business & Industry