

HOUSE AMENDMENTS TO SENATE BILL 833

By COMMITTEE ON HEALTH CARE

June 9

1 Delete lines 5 through 23 of the printed bill and insert:

2 “**SECTION 1.** ORS 414.652 is amended to read:

3 “414.652. (1) A contract entered into between the Oregon Health Authority and a coordinated
4 care organization under ORS 414.625 (1):

5 “(a) Shall be for a term of five years;

6 “(b) [*Except as provided in subsection (3) of this section,*] May not be amended more than once
7 in each 12-month period; and

8 “(c) May be terminated if a coordinated care organization fails to meet outcome and quality
9 measures specified in the contract or is otherwise in breach of the contract.

10 “(2) [*This section*] **Subsection (1) of this section** does not prohibit the authority from allowing
11 a coordinated care organization a reasonable amount of time in which to cure any failure to meet
12 outcome and quality measures specified in the contract prior to the termination of the contract.

13 “[*(3) A contract entered into between the authority and a coordinated care organization may be*
14 *amended more than once in each 12-month period if:*]

15 “**(3) The authority shall submit to the appropriate federal agency for review, if federal**
16 **approval is required:**

17 “**(a) The proposed terms of a contract or proposed amendments to a term of an existing**
18 **contract with a coordinated care organization not less than 135 days prior to the expiration**
19 **of the existing contract or term in the contract with the coordinated care organization.**

20 “**(b) The proposed payment rates for a coordinated care organization not less than 90**
21 **days prior to the effective date of the proposed rates.**

22 “**(4) The authority shall allow a coordinated care organization a period of at least 60 days**
23 **in which to review changes resulting from a federal review to proposed contract terms or**
24 **to proposed payment rates before agreeing to the changes. If the coordinated care organ-**
25 **ization is provided less than 60 days to review the changes, the existing terms of the contract**
26 **and rates remain in effect until the authority provides the required period for review.**

27 “**(5) Subsections (1)(b) and (4) of this section do not apply if:**

28 “(a) The authority and the coordinated care organization mutually agree to amend the contract;
29 [*or*]

30 “(b) Amendments are necessitated by changes in federal or state law; **or**

31 “**(c) With respect to changes in contract terms or payment rates, the authority has**
32 **complied with subsection (3) of this section but has not received necessary federal**
33 **approval.”.**