

HB 2303 A STAFF MEASURE SUMMARY

Carrier: Sen. Monnes Anderson

Senate Committee On Health Care

Action Date: 05/30/17
Action: Do pass the A-Eng bill.
Vote: 3-0-2-0
Yeas: 3 - Knopp, Monnes Anderson, Steiner Hayward
Exc: 2 - Beyer, Kruse
Fiscal: Has minimal fiscal impact
Revenue: No revenue impact
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WHAT THE MEASURE DOES:

Changes coordinated care organization reporting date to Oregon Health Authority (OHA) from December 31 to October 1 each year. Deletes statutory references to a Community-based Health Care Initiative. Specifies that in addition to the OHA Director, a designee of the director can be appointed as a member to the Advisory Committee on Physician Credentialing Information. Updates statutory language, deletes references to Office for Oregon Health Policy and Research.

ISSUES DISCUSSED:

- Concerns about establishing registry program, implementation timeline, registration fees and funding for a new program of an unadopted amendment
- Scope and types of professions included in the definition of alternative behavioral health practitioner contained in an unadopted amendment

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

Senate Bill 231 (2015) and House Bill 4017 (2016) require the Oregon Health Authority (OHA) and the Department of Consumer and Business Services (DCBS) to report on the percentage of medical spending allocated to primary care each year through 2020. Each year, all 16 coordinated care organizations (CCOs) report to OHA on their percentage of medical spending on primary care. According to OHA, the report is intended to help policymakers and the public assess the resources allocated to primary care in Oregon and develop proposals for improving primary care. Oregon law requires commercial carriers and CCOs to report primary care spending data on different calendar dates: December 31 for CCOs and October for commercial carriers.

OHA's Division of Health Policy and Analytics (HPA) provides agency-wide policy development, strategic planning, clinical and Medicaid policy guidance. OHA's Office of Health Policy conducts impartial policy analysis, research and evaluation, and provides technical assistance to support health reform planning and implementation in Oregon. For over two decades, prior to creation of OHA's Division of HPA, the Office for Oregon Health Policy and Research (OHPR) (renamed in 2001 by House Bill 2101) conducted health services research, staffed legislatively-mandated committees and commissions and served as the focal point for health policy and reform in the state. OHPR has been replaced with the Office of Health Policy in OHA.

HB 2303-A changes the date CCOs are required to annually report primary care spending to OHA and removes statutory references to the Office for Oregon Health Policy and Research.