

HB 2447 STAFF MEASURE SUMMARY

House Committee On Health Care

Prepared By: Oliver Droppers, LPRO Analyst

Meeting Dates: 3/19, 4/4

WHAT THE MEASURE DOES:

Authorizes Director of the Oregon Health Authority to create a forum of nonprofit health care systems to develop a proposal for Oregon's future health care system. Specifies five principles the forum or collaboration are to adhere to in developing proposal. Exempts collaborative activities from federal antitrust law under state action doctrine.

REVENUE: Statement issued: no revenue impact.

FISCAL: Statement issued: no fiscal impact.

ISSUES DISCUSSED:

- Current state of health care access, delivery, and financing
- Oregon's transformational health care environment
- Changes in Infrastructure to deliver health services in proposed experimental model
- Inclusivity and equity in experimental model

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

States are participants in contributing to, and leading, health care reform efforts. Oregon is no exception, having been at the forefront of health care reform efforts for more than three decades, particularly in Medicaid. Oregon's Medicaid program, the Oregon Health Plan (OHP), is seen as a national leader, and continues to lead through innovation and health care reform initiatives. Community involvement in state health policy is a defining feature in Oregon, dating back to the early 1980s with Oregon Health Decisions, a nonprofit organization that was focused on utilizing citizen engagement to inform both health care related issues and the Oregon Medicaid Prioritization Project.

Over the past 25 years, Oregon has worked to improve the state's health delivery system, expand coverage through both its public and private health insurance markets, reduce cost growth, and promote public participation and engagement in the health policy decision-making process. For example, in 2012, Oregon executed a five-year extension and amendment to its section 1115 Medicaid waiver with the federal Centers for Medicare & Medicaid Services (CMS). Under the 2012-2017 waiver, Oregon committed to innovation, reducing spending growth and increasing health care access and quality by transforming health care delivery and payment for Medicaid members. Oregon worked to achieve these goals by enrolling Medicaid members in coordinated care organizations (CCOs)—a new type of managed care—allowing CCOs to experiment with new delivery and financing models.

Oregon's efforts in health reform continue today with the state's most recent health reform effort to transition to CCO 2.0, the "future of coordinated care" for the Oregon Health Plan (OHP). House Bill 2447 establishes a collaborative led by the Oregon Health Authority to envision an alternative future of Oregon's health care system.

PRELIMINARY