

## HB 2269 -1 STAFF MEASURE SUMMARY

### House Committee On Health Care

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**Meeting Dates:** 3/28, 4/4

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#### WHAT THE MEASURE DOES:

Requires Oregon Health Authority, in consultation with stakeholders, to propose to interim committees of Legislative Assembly related to health, by January 1, 2020, long term solutions to financing health care in Oregon. Declares emergency, effective on passage.

#### ISSUES DISCUSSED:

- Employees in low-wage industries without employer-sponsored health coverage
- Premium subsidies, health savings accounts, and health care access fund to support the costs of the Oregon Health Plan or pay premiums for individuals enrolled in the Health Insurance Marketplace.
- Support or opposition among businesses effected by proposal
- Proposal for agency rulemaking to establish and oversee the program
- Measure’s proposal to raise revenue to finance publicly funded health coverage
- Governor’s work group that led to the proposed measure
- Taxing businesses to raise revenue to fund public programs in Oregon

#### EFFECT OF AMENDMENT:

-1 Replaces measure. **Section 1:** Defines “covered employee” as an individual who has worked for a covered employer for 90 days or more, averaged at least eight hours of work per week in a calendar quarter, is not enrolled in TRICARE, Medicare, or is exempt through rulemaking by Department of Consumer and Business Services (DCBS). Defines “covered employer” as having at least 50 covered employees. Defines health care, health care access contribution, and health care expenditure. **Section 2:** Establishes the Employer Participation Program to collect employer contributions that do not meet a minimum threshold of spending on health care and deposit such contributions in the Health Care Access Fund. Specifies that employer contributions are to provide financial assistance for premiums or other out-of-pocket costs for a covered employee to enroll in qualified health plan and improve access to Medicaid for low-income employees. **Section 3:** Authorizes DCBS and Department of Revenue (DOR) to adopt rules to establish and manage program and enter into an interagency agreement. **Section 4:** Authorizes DOR to impose civil penalties, amount to be established by rule, on covered employers that fail to report or pay required health care contribution. **Section 5:** Specifies monies deposited in the Health Care Access Fund are to be appropriated to DCBS to provide financial assistance related to enrolling in a qualified health plan; additional available monies in Fund are to provide Medicaid coverage. **Section 6:** Requires the Health Insurance Exchange Advisory Committee to advise DCBS Director on implementation of the Employer Participation Program that impact the health insurance exchange.

**REVENUE:** *Revenue impact issued: further analysis required.*

**FISCAL:** *Fiscal impact issued: further analysis required.*

#### BACKGROUND:

The Oregon Health Insurance Survey (OHIS), which is fielded every two years, collects information about health insurance coverage, access to care, and affordability in Oregon. According to OHIS, in 2017, 93.8 percent of individuals, or approximately 3.75 million Oregonians, had health insurance coverage. The results indicate 245,000 individuals were uninsured during this time period. Among those surveyed, approximately 11 percent of individuals were uninsured or had a coverage gap in the past 12 months.

**HB 2269 -1 STAFF MEASURE SUMMARY**

House Bill 2269 seeks to increase enrollment in health insurance by creating an employer assessment to fund financial coverage assistance programs for low-income Oregonians.