

House Bill 2012

Sponsored by Representatives SALINAS, NOSSE, Senator MONNES ANDERSON; Representatives GREENLICK, MARSH, MEEK, SMITH WARNER, WILDE, WILLIAMS, Senator FAGAN

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Allows individuals who do not qualify for medical assistance or premium tax credits under Affordable Care Act to enroll in coordinated care organizations by paying premiums that cover actuarial value of health services. Requires Oregon Health Authority to administer program.

A BILL FOR AN ACT

1
2 Relating to health care; creating new provisions; and amending ORS 413.101.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1. (1) As used in this section:**

5 (a) **“Coordinated care organization” has the meaning given that term in ORS 414.025.**

6 (b) **“Health services” has the meaning given that term in ORS 414.025.**

7 (2) **A coordinated care organization shall provide health services to an individual who is**
8 **determined by the Oregon Health Authority to meet the criteria in subsection (3) of this**
9 **section.**

10 (3) **An individual is eligible to enroll in a coordinated care organization if the individual:**

11 (a) **Is not described in ORS 414.706;**

12 (b) **Has income, as determined by the authority by rule, above 138 percent of the federal**
13 **poverty guidelines and:**

14 (A) **At or below 400 percent of the federal poverty guidelines; or**

15 (B) **Above 400 percent of the federal poverty guidelines and below 600 percent of the**
16 **federal poverty guidelines and the individual is offered employer-sponsored health insurance**
17 **but is required to pay the full cost of premiums for the employer-sponsored health insurance;**

18 (c) **Is not eligible for a premium tax credit under 26 U.S.C. 36B; and**

19 (d) **Pays to the authority a premium prescribed by the authority by rule.**

20 (4) **The authority shall, in consultation with the Department of Consumer and Business**
21 **Services, adopt rules necessary to carry out the provisions of this section, including but not**
22 **limited to rules for:**

23 (a) **Establishing streamlined application procedures and processes; and**

24 (b) **Adopting a schedule of premiums for individual and family enrollment in each coor-**
25 **ordinated care organization that is intended to cover the actuarial value of the health services**
26 **and is calculated based on the costs used by the authority in establishing the global budget**
27 **for each coordinated care organization.**

28 (5) **Premiums paid under this section shall be deposited in the Oregon Health Authority**
29 **Fund established under ORS 413.101 and may be used for the purpose of reimbursing coordi-**
30 **nated care organizations for the cost of health services provided to individuals enrolled in**

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1 **coordinated care organizations under this section.**

2 **SECTION 2.** ORS 413.101 is amended to read:

3 413.101. The Oregon Health Authority Fund is established in the State Treasury, separate and
4 distinct from the General Fund. Interest earned by the Oregon Health Authority Fund shall be
5 credited to the fund. Moneys in the fund are continuously appropriated to the Oregon Health Au-
6 thority for carrying out the duties, functions and powers of the authority [*under ORS 413.032*] **as**
7 **prescribed by law.**

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