



## Oregon Academy of Family Physicians

| Bill                    | Sponsors  | Title  | Last Action  | Lists  |
|-------------------------|---|--|--|--|
| <a href="#">HB 2002</a> | <a href="#">Andrea Valderrama</a><br><a href="#">Travis Nelson</a><br><a href="#">Kate Lieber</a> | <p>Relating to health; declaring an emergency.</p> <p>Modifies provisions relating to reproductive health rights. Modifies provisions relating to access to reproductive health care and gender-affirming treatment. Modifies provisions relating to protections for providers of and individuals receiving reproductive and gender-affirming health care services. Creates crime of interfering with a health care facility. Punishes by maximum of 364 days' imprisonment, \$6,250 fine, or both. Creates right of action for person or health care provider aggrieved by interference with health care facility. Makes statutory change to achieve gender neutral language with respect to unlawful employment discrimination because of sex. Declares public policy regarding interstate actions arising out of reproductive health care and gender-affirming treatment. Prohibits public body from participating in interstate investigation or proceeding involving reproductive health care and gender-affirming treatment. Creates exceptions. Prohibits clerk of court from issuing subpoena if foreign subpoena relates to reproductive health care or gender-affirming treatment. Declares that Oregon law governs certain actions arising out of reproductive health care or gender-affirming treatment provided or received in this state. Repeals criminal provisions relating to concealing birth. Appropriates moneys from General Fund to Higher Education Coordinating Commission for allocation to Office of Rural Health, for purposes of providing grants through rural qualified ...</p> <p><b>Reproductive health care access bill</b></p> <p>Elana Lynn</p> <p><u>-5</u> Amendment Summary: Adds OHSU to definition of "public body". Clarifies rights of minors to receive reproductive health information. Protects providers from having their license revoked/suspended for providing reproductive health care. Changes responsibility to provide grants to public institutions of higher education to comply with medication abortion access requirements and report on reproductive health access and cost from HECC to OHA. Establishes standards regarding interstate actions related to reproductive health care and gender-affirming treatments.</p> <p><b>May 18, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass the B-Eng. bill.</li> </ul> <p><b>May 02, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Vote explanation(s) filed on vote to sustain the ruling of the President by Boquist, Knopp, Linthicum, Robinson, Thatcher.</li> </ul> | <p>Senate • May 18, 2023:<br/>           Recommendation:<br/>           Do pass the B-Eng. bill.</p> | <p><a href="#">Clients Oregon Academy of Family Physicians</a></p> |

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| <a href="#">HB 2045</a> | Introduced and printed pursuant to House Rule 12.00. Presession filed | <p><b>Relating to health care.</b></p> <p>Requires Oregon Health Authority to study access to health care in Oregon. Directs authority to submit findings to interim committees of Legislative Assembly related to health not later than September 15, 2024.] Requires health care providers to annually report to Oregon Health Authority providers' aggregate amount of compensation paid to frontline workers as wages, benefits, salaries, bonuses and incentive payments. Excludes increases in aggregate amount of compensation in determining whether health care provider meets cost growth target set by Health Care Cost Growth Target program.Statutes affected: A-Engrossed: 442.385, 442.386</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p>This is now the cost growth exemption bill (new vehicle is HB 2742)</p> <p><b>May 11, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Third reading. Carried by Nosse. Passed.</li> </ul> <p><b>May 09, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Second reading.</li> </ul>   | House • May 11, 2023: Third reading. Carried by Nosse. Passed.  | <p><b>Clients</b><br/> <a href="#">Oregon Academy of Family Physicians</a></p> <p><b>Subjects</b><br/> <a href="#">General Health Care</a></p> |
| <a href="#">HB 2235</a> | <a href="#">Tawna Sanchez</a><br><a href="#">Travis Nelson</a>        | <p><b>Relating to behavioral health; declaring an emergency.</b></p> <p>Requires Oregon Health Authority to convene work group to study access to behavioral health treatment in rural and medically underserved areas of this state. Directs authority to submit findings to interim committees of Legislative Assembly related to health not later than September 15, 2024.] major barriers to workforce recruitment and retention in publicly financed behavioral health system in this state and to develop recommendations on specified topics. Specifies membership. Requires authority to report work group's initial recommendations, no later than January 15, 2025, to interim subcommittee of Joint Committee on Ways and Means related to human services and report final recommendations, by December 15, 2025, to subcommittee and to interim committees of Legislative Assembly related to health care. Sunsets January 2, 2025] 2026. Declares emergency, effective on passage.</p> <p>EAP Notes</p> <p>Elana Lynn<br/>4/5<br/>-3</p> <p>Amendment Summary: Replaces the bill. Requires OHA to convene a work group on barriers to behavioral health work force and retention. Reports are due by 01/15/2025 to the legislative assembly. The background shares that Oregon is ranked among the worst states in prevalence of mental illness and access to care. It also gives a summary of investments (\$1.35B) made in 2020 (measure 110) and 2021 (improve the behavioral health crisis system, increase access to residential treatment, and support behavioral health workforce).</p> <p>Betsy: TBD - what new detail will this offer?</p> <p><b>May 18, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass the A-Eng. bill.</li> </ul> <p><b>May 08, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Work Session held.</li> </ul> | Senate • May 18, 2023: Recommendation: Do pass the A-Eng. bill. | <p><b>Clients</b><br/> <a href="#">Bridges to Change Oregon Academy of Family Physicians</a></p> <p><b>Subjects</b><br/> Behavioral Health</p> |

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| <a href="#">HB 2278</a> | Introduced and printed pursuant to House Rule 12.00. Pre-session filed                       | <p>Relating to pharmacists; prescribing an effective date.</p> <p>Authorizes pharmacists to administer influenza vaccine to persons six months of age or older. Takes effect on 91st day following adjournment sine die. Statutes affected: Introduced: 689.645</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p>See summary, accurate.</p> <p><b>May 18, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass.</li> </ul> <p><b>May 08, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Work Session held.</li> </ul>   | Senate • May 18, 2023: Recommendation: Do pass.                 | <p><b>Primary Care/Family Medicine</b></p> <p>Clients<br/>Oregon Academy of Family Physicians</p> <p>Priority<br/>Low</p>   |
| <a href="#">HB 2395</a> | <a href="#">Maxine Dexter</a><br><a href="#">Jules Walters</a><br><a href="#">James Hieb</a> | <p>Relating to substance use; declaring an emergency.</p> <p>Requires Oregon Health Authority to study substance use. Directs authority to submit findings to interim committees of Legislative Assembly related to health care not later than September 15, 2024.]</p> <p>Allows specified persons to distribute and administer short-acting opioid antagonist and distribute kits. Defines "kit" and "short-acting opioid antagonist." Allows pharmacist to prescribe kit. Allows Public Health Officer or physician employed by Oregon Health Authority to issue standing order to prescribe kit to specified persons, and allows person that obtained kit to possess, store, deliver or distribute kit and administer short-acting opioid antagonist. Provides that person is immune from criminal and civil liability when acting in good faith.</p> <p>Allows owner of building or facility to which public has legal access to store kits for use by member of public. Provides that building or facility owner and staff are immune from criminal and civil liability related to use of kit stored in building or facility.</p> <p>Directs State Board of Education to adopt rules for administration of short-acting opioid antagonist to any individual on school premises. Allows school administrator, teacher or other school employee to administer, without written permission and instruction from parent or guardian, short-acting opioid antagonist to student who experienced or is experiencing opioid overdose. Provides criminal and civil immunity for school administrator, teacher, other school employee, scho...</p> <p>EAP Notes</p> <p><b>Dexter's fentanyl bill package</b></p> <p>Elana Lynn</p> <p>4/5</p> <p><u>-6 amendment summary</u>: Former placeholder. Changes term "naloxone" to "short-acting opioid antagonist." Allows first responders, school employees to administer short acting opioid antagonist. Allows owner of public building or facility to store short-acting opioid antagonist kit in location easily accessible to members of public and requires OHA to share the locations of these buildings. Supports bulk purchasing and establishes timelines for reporting overdoses.</p> <p><b>May 18, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass the A-Eng. bill.</li> </ul> <p><b>May 08, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Work Session held.</li> </ul> | Senate • May 18, 2023: Recommendation: Do pass the A-Eng. bill. | <p><b>Primary Care/Family Medicine</b></p> <p>Clients<br/>Bridges to Change<br/>Health Justice<br/>Recovery Alliance<br/>Oregon Academy of Family Physicians</p> <p>Subjects<br/>Treatment (Substance use and other) Issues</p> |

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| <a href="#">HB 2397</a> | <a href="#">Maxine</a><br><a href="#">Dexter</a> | <p><b>Relating to opioid overdose prevention.</b></p> <p>Requires Oregon Health Authority to study opioid overdose prevention. Directs authority to submit findings to interim committees of Legislative Assembly related to health care not later than September 15, 2024.] Establishes Harm Reduction Clearinghouse Project within Oregon Health Authority for purposes of purchasing in bulk harm reduction supplies for use by entities that serve populations vulnerable to overdose, infections or injuries due to opioid use and use of other controlled substances. Defines "harm reduction supplies." Exempts from definition of "drug paraphernalia" certain items designed to prevent or reduce potential harm associated with use of opioids and other controlled substances. Statutes affected: A-Engrossed: 414.318, 475.525</p> <p>EAP Notes</p> <p><b>Establishes Harm Reduction Clearinghouse Project (Clearinghouse Project) in OHA to bulk purchase harm reduction supplies for use in the state by community organizations, first responders, and other entities that serve populations who are vulnerable to overdose, infections or injuries due to opioid use and use of other controlled substances. S</b></p> <p>Elana Lynn</p> <p><u>-2 Amendment Summary:</u> Replaces the measure. Establishes Harm Reduction Clearinghouse Project in OHA to bulk purchase harm reduction supplies for use in the state by community organizations, first responders, and other entities that serve populations who are vulnerable to overdose, infections or injuries due to opioid use and use of other controlled substances.</p> <p><b>Apr 10, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass with amendments, be printed A-Engrossed, and be referred to Ways and Means.</li> <li>• Referred to Ways and Means by order of Speaker.</li> </ul> | <p>House • Apr 10, 2023: Referred to Ways and Means by order of Speaker.</p> | <p><a href="#">Clients</a><br/> <a href="#">Bridges to Change</a><br/> <a href="#">Health Justice</a><br/> <a href="#">Recovery Alliance</a><br/> <a href="#">Oregon Academy of Family Physicians</a></p> |

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| <a href="#">HB 2455</a> | <a href="#">Rob Nosse</a><br><a href="#">Tawna Sanchez</a><br><a href="#">Lisa Reynolds</a> | <p>Relating to audits of claims for reimbursement of the costs of behavioral health treatment; prescribing an effective date.</p> <p>Imposes requirements and restrictions on insurer and coordinated care organization audits of claims for reimbursement submitted by behavioral health treatment providers.</p> <p>Directs Oregon Health Authority to collaborate with health care providers that provide care to medical assistance enrollees, coordinated care organizations, community groups that advocate for diversity and health equity and health care industry representatives to develop recommendations for processes by which payers audit health care providers' claims for reimbursement.</p> <p>Takes effect on 91st day following adjournment sine die. Statutes affected: Introduced: 414.592<br/>A-Engrossed: 414.592</p> <p>EAP Notes</p> <p>See bill summary as pertains to audits of claims for reimbursement for behavioral health services, need further information from bill sponsors on implementation.</p> <p>Elana Lynn<br/>-7 Amendment Summary: Requires insurer to provide 30 day notice to providers of audit changes. Clarifies permitting, use of sampling methods, and prohibits compensating auditors. Requires OHA to create an education unit for curriculum based federal and state statutes/rules to inform audits. Reporting due by 07/01/2024.</p> <p>Base Bill: Requires insurer and coordinated care organizations (CCO) that reimburse behavioral health treatment to submit written description of all audit requirements to be made available to all providers. Requires insurer or CCO to give 30 day notices of changes in audit requirements. Takes effect on 91st day following adjournment sine die. The background share the important of audits and the cost of overpayment.</p> <p><b>Apr 10, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass with amendments, be printed A-Engrossed, and be referred to Ways and Means.</li> <li>• Referred to Ways and Means by order of Speaker.</li> </ul> | House • Apr 10, 2023: Referred to Ways and Means by order of Speaker. | <p><a href="#">Clients Oregon Academy of Family Physicians</a></p> <p><a href="#">Subjects Behavioral Health</a></p>                                       |
| <a href="#">HB 2486</a> | <a href="#">Rob Nosse</a><br><a href="#">Cyrus Javadi</a>                                   | <p>Relating to pharmacy technicians; declaring an emergency.</p> <p>Allows certain pharmacy technicians to administer vaccines.</p> <p>Declares emergency, effective on passage. Statutes affected: Introduced: 689.645, 689.155</p> <p>EAP Notes</p> <p>Elana Lynn<br/>Bill Summary: Allows pharmacy technicians under the supervision of a pharmacist to administer vaccines. Declares emergency, effective on passage. The background explains duties of pharmacy technicians and that pharmacy technicians were allowed federally to administer covid-19 vaccines.</p> <p>See summary, accurate.</p> <p><b>May 18, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass.</li> </ul> <p><b>May 08, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Work Session held.</li> </ul>   | Senate • May 18, 2023: Recommendation: Do pass.                       | <p><a href="#">Primary Care/Family Medicine</a></p> <p><a href="#">Clients Oregon Academy of Family Physicians</a></p> <p><a href="#">Priority Low</a></p> |

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| <a href="#">HB 2513</a> | <p>Introduced and printed pursuant to House Rule 12.00. Pre-session filed</p> | <p><b>Relating to drugs.</b></p> <p>Requires Oregon Health Authority to study implementation of Ballot Measure 110 (2021). Directs authority to submit findings to interim committees of Legislative Assembly related to health not later than September 15, 2024.]</p> <p>Requires local planning committees for alcohol and drug prevention and treatment services to coordinate with local Behavioral Health Resource Networks.</p> <p>Establishes policy of state to encourage treatment and recovery for people struggling with substance use.</p> <p>Removes four percent cap on amounts from Drug Treatment and Recovery Services Fund that Oregon Health Authority may use for administrative expenses to administer provisions of Ballot Measure 110 (2020).</p> <p>Modifies appointment of members to Oversight and Accountability Council and staggers terms of members of council. Increases responsibility of authority in processing applications for grants made by council. Modifies requirements for networks to receive grants.</p> <p>Modifies requirements for Secretary of State audit of uses by grantees of moneys from fund. Requires community mental health programs to provide guidance and assistance to networks for joint development of programs and activities to increase access to treatment.</p> <p>Allows authority, with approval of council after July 1, 2025, to implement education campaign to inform public about networks, statewide hotline and other information authority believes will benefit public in accessing behavioral health services. Statutes affected:</p> <p>A-Engrossed...</p> <p><b>EAP Notes</b></p> <p>Elana Lynn</p> <p>4/5</p> <p><u>3</u> Amendment Summary: Requires local planning committee for alcohol and drug prevention and treatment services to work with BHRNs. Removes cap on Drug Treatment and Recovery Services Fund distributions for administrative costs. Clarifies OAC and OHA roles in issuing and terminating BHRN grants. Allows BHRNs to rely on statewide hotline during business hours. Clarifies minimum BHRN staffing. Transfers creation of rules for grants and funding from OAC to OHA. Requires OHA and OAC to create an advisory committee for adopting or amending rules. Allows for an education campaign led by OHA.</p> <p><b>May 18, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass the A-Eng. bill.</li> </ul> <p><b>May 08, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Work Session held.</li> </ul> | <p>Senate • May 18, 2023:<br/>Recommendation:<br/>Do pass the A-Eng. bill.</p> | <p><b>Clients</b></p> <p><b>Bridges to Change</b></p> <p><b>Health Justice</b></p> <p><b>Recovery Alliance</b></p> <p><b>Oregon Academy of Family Physicians</b></p> <p><b>Subjects</b></p> <p><b>Measure 110 Related</b></p> <p><b>Position Support</b></p> <p><b>Priority High</b></p> |

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| <a href="#">HB 2584</a> | <a href="#">Ed Diehl</a><br><a href="#">Hai Pham</a>                         | <p>Relating to physician assistants; prescribing an effective date.</p> <p>Specifies physician assistant scope of practice and duties of care when practicing medicine. Removes requirement that physician assistant collaboration agreement with employer include physician assistant performance assessment.<br/>Takes effect on 91st day following adjournment sine die. Statutes affected: A-Engrossed: 677.085, 677.095, 677.511</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p><u>-1 Amendment Summary:</u> "Replaces measure. Adds physician assistants to practice of medicine provisions, including use of title and duty of care." Background explains the requirements to be a PA in Oregon and describes the changes HB 3036 made from a supervision to collaboration model.</p> <p><b>May 17, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>Recommendation: Do pass with amendments to the A-Eng. bill. (Printed B-Eng.)</li> </ul> <p><b>May 08, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>Work Session held.</li> </ul>  | <p>Senate • May 17, 2023:<br/>Recommendation:<br/>Do pass with amendments to the A-Eng. bill. (Printed B-Eng.)</p> | <p><b>Primary Care/Family Medicine</b></p> <p><b>Clients</b><br/>Oregon Academy of Family Physicians</p> <p><b>Position</b><br/><b>Oppose</b></p>  |
| <a href="#">HB 2878</a> | <a href="#">Maxine Dexter Dick Anderson</a><br><a href="#">Lisa Reynolds</a> | <p>Relating to paying for health care.</p> <p>Establishes Aligning for Health Pilot Program, administered by Oregon Health Authority, to test alternative methods for payment for health care. Prescribes requirements for pilot and phases of implementation. Exempts participants in program from requirement to obtain authority's approval for acquisitions and mergers.</p> <p>EAP Notes</p> <p><b>This definitely needs a read from our team, bill summary is accurate could align (or conflict or muddle) efforts already underway.</b></p> <p>Elana Lynn<br/>4/6</p> <p><u>-3 Amendment Summary:</u> <b>Base bill</b> - establishes Aligning for Health Pilot Program (administered by OHA). Goals, creating a predictable and aligned payment metrics for providers regardless of payer, increasing amount of providers that receive population based payments, rewarding health systems for successes, and giving providers more flexibility on delivery of care. Eval due 09/15/2026.</p> <p>-3 - Requires OHA to work with Public Employees' Benefit Board (PEBB) and Oregon Educators Benefit Board (OEBB) on issuance of external contracts at the start of the program. Prioritizes regions of most needs. exempts payers participating in the program from Health Care Market Oversight requirements. Removes timeline for phase 3 and adjust eval due date to when phase 3 is completed. Sunsets the program 01/02/2034.</p> <p>Betsy: Likely support. Questions: Does this region so described actually exist? How does this timing align with launch of single-payer? What would the boundaries for financial risk to providers be? We generally don't like downside risk. Good: references geographic risk-stratification (not just age and gender)</p> <p><b>Apr 07, 2023, House</b></p> <ul style="list-style-type: none"> <li>Recommendation: Do pass with amendments, be printed A-Engrossed, and be referred to Ways and Means by prior reference.</li> <li>Referred to Ways and Means by prior reference.</li> </ul> | <p>House • Apr 07, 2023: Referred to Ways and Means by prior reference.</p>  | <p><b>Primary Care/Family Medicine</b></p> <p><b>Clients</b><br/>Oregon Academy of Family Physicians</p> <p><b>Position</b><br/><b>Support</b></p> |

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| <a href="#">HB 3008</a> | <a href="#">Hai Pham</a><br><a href="#">Cyrus Javadi</a><br><a href="#">Janelle Bynum</a> | <p>Relating to health insurance.</p> <p>Limits ability of carriers] insurers offering dental benefit to require reimbursement of claims by credit card or electronic funds transfer. Imposes conditions on third party contracts for leasing of dental provider panels.</p> <p><b>May 17, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass with amendments to the A-Eng. bill. (Printed B-Eng.)</li> </ul> <p><b>May 10, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Work Session held.</li> </ul>  | <p>Senate • May 17, 2023:</p> <p>Recommendation: Do pass with amendments to the A-Eng. bill. (Printed B-Eng.)</p> | <p><a href="#">Clients Oregon Academy of Family Physicians</a></p>   |
| <a href="#">HB 3157</a> | <a href="#">Rob Nosse</a><br><a href="#">Cedric Hayden</a><br><a href="#">Hai Pham</a>    | <p>Relating to health care coverage; prescribing an effective date.</p> <p>Establishes Health Insurance Mandate Review Advisory Committee to review each], at request of chair or vice chair of committee of Legislative Assembly related to health, proposed legislative measure, legislative concept or amendment that requires health insurer or health care service contractor to reimburse cost of specified procedure or provider , if measure, concept or amendment is posted to legislative committee's agenda,] and to produce report on equity and financial effects of each required coverage that is proposed and efficacy of] analyzing specified anticipated effects of coverage or lack of coverage of treatment or service proposed. Specifies membership and duties of advisory committee.</p> <p>Modifies criteria for] factors considered in review of measures that require coverage of specific procedure or provider.</p> <p>Takes effect on 91st day following adjournment sine die.Statutes affected: Introduced: 171.875, 171.880</p> <p>A-Engrossed: 171.875, 171.880</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p><u>-5</u> Amendment Summary: Replaces the measure. Establishes Health Insurance Mandate Review Advisory Committee. Requires joint appointment of Committee members by President of the Senate and Speaker of the House of Representatives and modifies Advisory Committee membership. Clarifies circumstances leading to generation of Advisory Committee report. Clarifies required components of Advisory Committee analysis.</p> <p><b>Apr 07, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass with amendments, be printed A-Engrossed, and be referred to Ways and Means by prior reference.</li> <li>• Referred to Ways and Means by prior reference.</li> </ul> | <p>House • Apr 07, 2023: Referred to Ways and Means by prior reference.</p>                                       | <p><a href="#">Primary Care/Family Medicine</a></p> <p><a href="#">Clients Oregon Academy of Family Physicians</a></p> <p><a href="#">Subjects Insurance Oversight</a></p> |



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| <a href="#">SB 192</a> | Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President. | <p><b>Relating to prescription drugs; prescribing an effective date.</b></p> <p>Requires Oregon Health Authority to study ways to lower cost of prescription drugs. Directs authority to submit findings to interim committees of Legislative Assembly related to health not later than September 15, 2024.] Sunsets January 2, 2025.] Requires pharmacy benefit managers to annually report to Department of Consumer and Business Services information about certain rebates, fees, price protection payments and other payments received from prescription drug manufacturers. Requires department to publish aggregated information received from pharmacy benefit managers on department's website. Continuously appropriates moneys in Prescription Drug Affordability Account to department. Modifies requirements for reports submitted to department by prescription drug manufacturers. Makes confidential and not subject to disclosure information reported by manufacturer that includes personally identifiable information about consumer. Expands membership of Prescription Drug Affordability Board. Modifies information that department must provide to board. Limits information that insurer must report to department regarding prescription drugs covered by insurer to coverage provided under health benefit plans. Takes effect on 91st day following adjournment sine die. Statutes affected: A-Engrossed: 735.530, 705.146, 646A.689, 646A.693, 646A.694, 646A.695, 743.025</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p><u>-2 SMS</u>: Directs PBMs to report with DCBS including aggregated dollar amounts of rebates, fees, price protection payments, and any other payments received by drug manufacturers.</p> <p><b>May 04, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass with amendments to the A-Eng. bill. (Printed B-Eng.)</li> </ul> <p><b>Apr 27, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Work Session held.</li> </ul> | Senate • May 04, 2023:<br>Recommendation: Do pass with amendments to the A-Eng. bill. (Printed B-Eng.) | <a href="#">Clients Oregon Academy of Family Physicians</a>   |
| <a href="#">SB 216</a> | Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President. | <p><b>Relating to data collected by the Oregon Health Authority; and prescribing an effective date.</b></p> <p>Prohibits disclosure of individually identifiable data collected in accordance with uniform standards adopted by Oregon Health Authority for collection of data on race, ethnicity, preferred spoken and written languages, disability status, sexual orientation and gender identity. Exempts from prohibition on public body's inquiring into or collecting information about individual's country of birth such data collected by authority or Department of Human Services in accordance with uniform standards adopted by authority for collection of data on race, ethnicity, preferred spoken and written languages, disability status, sexual orientation and gender identity. Takes effect on 91st day following adjournment sine die. Statutes affected: Introduced: 181A.823, 413.161 Enrolled: 181A.823, 413.161</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p><u>Bill Summary</u>: The bill builds off of the OHA goal of eliminating health disparities by 2030 by allowing for the collection of national origin information to identify and address health disparities in the community (exception to ORS 181A.823). All data is required to be anonymized and aggregated so it can not be related to any individual. The background gives a summary of the the OHA health disparity goal and HB 3159 which allowed for collection of disability and sexual orientation/gender identity information.</p> <p>Prohibits sharing identifiable information. Allows for country of origin to be shared.</p> <p><b>May 16, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Chapter 69, 2023 Laws.</li> <li>• Effective on the 91st day following adjournment sine die.</li> </ul>   | Senate • May 16, 2023: Effective on the 91st day following adjournment sine die.                       | <a href="#">Primary Care/Family Medicine</a><br><br><a href="#">Clients Oregon Academy of Family Physicians</a><br><br><a href="#">Position Support</a> |

| Bill                   | Sponsors  | Title  | Last Action   | Lists  |
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| <a href="#">SB 232</a> | Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President. | <p>Relating to the practice of medicine via remote means; prescribing an effective date.</p> <p>Allows out-of-state physician or physician assistant to provide specified care to patients located in Oregon. Clarifies that practice of medicine using telemedicine occurs where patient is physically located.<br/>Takes effect on 91st day following adjournment sine die. Statutes affected: Introduced: 677.137</p> <p>EAP Notes</p> <p>Elana Lynn<br/>Betsy: So long as this is established relationship (and we're clear on what it takes to establish) and doesn't allow a back-door way for large companies to provide inbound telemedicine through insurance carriers, etc., at least neutral if not support.</p> <p>Bill Summary: Allows out of state Physicians or Physicians Assistants to provide tele-medicine to patients in Oregon. The bill focuses on this being special occasions or sort-term care when a patient-provider relationship is already established.</p> <p><b>May 18, 2023, House</b></p> <ul style="list-style-type: none"> <li>Rules suspended. Carried over to May 22, 2023 Calendar.</li> </ul> <p><b>May 17, 2023, House</b></p> <ul style="list-style-type: none"> <li>Rules suspended. Carried over to May 18, 2023 Calendar.</li> </ul>   | House • May 18, 2023: Rules suspended. Carried over to May 22, 2023 Calendar. | <p><b>Primary Care/Family Medicine</b></p> <p><b>Clients</b><br/>Oregon Academy of Family Physicians</p>     |
| <a href="#">SB 376</a> | Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President. | <p>Relating to insurance; prescribing an effective date.</p> <p>Requires Department of Consumer and Business Services to study insurance. Directs department to submit findings to interim committees of Legislative Assembly related to insurance not later than September 15, 2024.]<br/>Provides authority to Director of Department of Consumer and Business Services to require health care service contractors to file annual National Association of Insurance Commissioners own risk and solvency assessment summary reports and corporate governance annual disclosure reports.<br/>Takes effect on 91st day following adjournment sine die.</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p><u>-1</u> Amendment Summary: Replaces measure. Adds accreditation standards for individual insurance companies that write more than \$500M in annual premiums and insurance company holding groups that collectively write more than \$1B in annual premiums to provisions applicable to health care service contractors in ORS 750.055.</p> <p><b>May 18, 2023, House</b></p> <ul style="list-style-type: none"> <li>Rules suspended. Carried over to May 22, 2023 Calendar.</li> </ul> <p><b>May 17, 2023, House</b></p> <ul style="list-style-type: none"> <li>Rules suspended. Carried over to May 18, 2023 Calendar.</li> </ul> | House • May 18, 2023: Rules suspended. Carried over to May 22, 2023 Calendar. | <p><b>Clients</b><br/>Oregon Academy of Family Physicians</p> <p><b>Subjects</b><br/>Insurance Oversight</p> |

| Bill                   | Sponsors                        | Title  | Last Action  | Lists   |
|------------------------|---------------------------------|--|--|---|
| <a href="#">SB 450</a> | <a href="#">Daniel Bonham</a>   | <p>Relating to opioids.</p> <p>Exempts from labeling requirements drug intended to reverse opioid overdose when drug is dispensed by [physician or physician assistant] health care provider.</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p>Bill Summary: The bill removes the requirement that physicians and physician's assistant must note on the label of the drug the name of the patient, name and address of the physician, any cautionary statements, and the expiration date of the drug when dispensing a nasal spray for reversing opioid overdose. The background discuss ORS677.089 which required the above actions be taken.</p> <p>See summary, accurate.</p> <p><b>May 18, 2023, House</b></p> <ul style="list-style-type: none"> <li>Rules suspended. Carried over to May 22, 2023 Calendar.</li> </ul> <p><b>May 17, 2023, House</b></p> <ul style="list-style-type: none"> <li>Second reading.</li> </ul> | House • May 18, 2023: Rules suspended. Carried over to May 22, 2023 Calendar.                                | <p><b>Primary Care/Family Medicine</b></p> <p><b>Clients Oregon Academy of Family Physicians</b></p> <p><b>Position Support</b></p> |
| <a href="#">SB 528</a> | <a href="#">Michael Dembrow</a> | <p>Relating to protective proceedings; declaring an emergency.</p> <p>Modifies provisions relating to protective proceedings.</p> <p>Declares emergency, effective July 1, 2023. Statutes affected: Introduced: 125.675, 125.005, 125.025, 125.060, 125.065, 125.070, 125.080, 125.082, 125.150, 125.165, 125.300, 125.305, 125.315, 125.320, 125.325, 125.430, 125.475, 125.678, 125.687, 125.225, 125.330</p> <p>A-Engrossed: 125.005, 125.035, 125.060, 125.065, 125.070, 125.075, 125.080, 125.082, 125.150</p> <p>EAP Notes</p> <p><b>POLST bill</b></p> <p><b>Apr 19, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>Referred to Ways and Means by prior reference.</li> <li>Minority Recommendation: Do pass with different amendments. (Printed A-Eng. Minority)</li> </ul>   | Senate • Apr 19, 2023: Minority Recommendation: Do pass with different amendments. (Printed A-Eng. Minority) | <p><b>Primary Care/Family Medicine</b></p> <p><b>Clients Oregon Academy of Family Physicians</b></p>                                |

| Bill                   | Sponsors  | Title   | Last Action  | Lists   |
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| <a href="#">SB 608</a> | <a href="#">Winsvey</a><br><a href="#">Campos</a><br><a href="#">Cedric</a><br><a href="#">Hayden</a> | <p><b>Relating to prescription drugs; declaring an emergency.</b></p> <p>Prohibits insurers offering policies or certificates of health insurance and pharmacy benefit managers from requiring claim for reimbursement of prescription drug to include modifier or other indicator that drug is 340B drug.] Requires Oregon Health Authority to adopt dispensing fee to be paid to pharmacies and pharmacists dispensing prescription drugs to medical assistance recipients. Sets minimum dispensing fee at \$____.] Takes effect on 91st day following adjournment sine die.] Requires Oregon Health Authority, every three years, to conduct survey of retail pharmacies enrolled as providers in state medical assistance program regarding pharmacies' dispensing costs. Requires authority, if adjustments are needed, to request state plan amendment from Centers for Medicare and Medicaid Services to change professional dispensing fee paid to pharmacies participating in state medical assistance program. Declares emergency, effective on passage.Statutes affected: Introduced: 735.530, 735.534, 743A.062, 414.325</p> <p><b>See summary, accurate. Regarding prescription drug reimbursements.</b></p> <p>Elana Lynn</p> <p><b>-1 Amendment Summary:</b> Replaces the measure. Directs OHA to conduct, every three years, a survey of retail pharmacy providers that are enrolled as Medicaid providers in the state medical assistance program. Goal - determine the costs of the providers for dispensing prescription drugs, and if a change is needed in the professional dispensing fee reimbursement, OHA shall submit to the Centers for Medicare and Medicaid Services a request for a state plan amendment to change the professional dispensing fee reimbursement.</p> <p><b>May 17, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Work Session held.</li> </ul> <p><b>May 08, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Public Hearing held.</li> </ul> | <p>House • May 17, 2023: Work Session held.</p>                                      | <p><b>Primary Care/Family Medicine</b></p> <p><b>Clients</b><br/> <b>Oregon Academy of Family Physicians</b></p> <p><b>Subjects</b><br/> <b>Prescription Drug Related</b></p> |
| <a href="#">SB 968</a> | <a href="#">Health Care</a>   | <p><b>Relating to systems of care.</b></p> <p>Requires Oregon Health Authority, in consultation with System of Care Advisory Council, to study Oregon's systems of care. Directs Oregon Health Authority to submit findings to interim committees of Legislative Assembly related to human services not later than September 15, 2024.] Modifies duties of System of Care Advisory Council.Statutes affected: A-Engrossed: 418.979</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p><b>-1 Amendment Summary:</b> Replaces the measure. Changes the release date for strategic plan update (done by System of Care Advisory Council (SOCAC)) from every two years to four years (next 2026). Also requires state agencies (OYA, DHS, OHA, DOE, and CCOs) to partner with SOCAC on joint studies.</p> <p><b>May 18, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Rules suspended. Carried over to May 22, 2023 Calendar.</li> </ul> <p><b>May 17, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Rules suspended. Carried over to May 18, 2023 Calendar.</li> </ul>  | <p>House • May 18, 2023: Rules suspended. Carried over to May 22, 2023 Calendar.</p> | <p><b>Clients</b><br/> <b>Oregon Academy of Family Physicians</b></p>   |

| Bill                    | Sponsors   | Title  | Last Action   | Lists  |
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| <a href="#">SB 1042</a> | <a href="#">Cedric Hayden</a><br><a href="#">Daniel Bonham</a><br><a href="#">David Brock</a><br><a href="#">Smith</a> | <p>Relating to the Oregon Health Policy Board.</p> <p>Requires Oregon Health Policy Board to produce and provide to interim committees of Legislative Assembly related to health by December 31, 2024, comprehensive report regarding success in achieving aims of Oregon Integrated and Coordinated Health Care Delivery System. Modifies membership of board and specifies duties of chairperson of board. Requires appointment of executive director. Increases oversight and supervision responsibilities of board over Oregon Health Authority. Requires board to submit agency request budget for board. Puts Health Evidence Review Commission under auspices of board. Statutes affected: Introduced: 413.007, 413.008, 413.011, 413.033, 414.570, 414.688</p> <p><b>Apr 17, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Public Hearing held.</li> </ul> <p><b>Apr 10, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Public Hearing Cancelled.</li> </ul>  | Senate • Apr 17, 2023: Public Hearing held.                                   | <a href="#">Clients Oregon Academy of Family Physicians</a>  |
| <a href="#">SB 1043</a> | <a href="#">Rob Wagner</a><br><a href="#">Kate Lieber</a><br><a href="#">Janeen Sollman</a>                            | <p>Relating to opioid overdose reversal medication.</p> <p>Requires providers of substance use treatment or detoxification services, hospitals, long term care facilities, residential care facilities and providers of outpatient physical or behavioral health services, upon release, discharge or transfer of patient or resident or at conclusion of patient visit, to provide two doses of overdose reversal medication and medical supplies necessary to administer medication if patient or resident has prescription for opioid medication or has history of opioid use.] Requires hospitals and other specified facilities that provide substance use disorder treatment to provide to specified patients upon discharge or release two doses of opioid overdose reversal medication and necessary medical supplies to administer medication. Creates exception. Provides immunity from civil liability for person who in good faith provides opioid overdose reversal medications and supplies] necessary medical supplies to administer medications. Provides that civil liability protection does not apply to person involved in manufacture or sale of opioid overdose reversal medication. Requires Oregon Health Authority to facilitate access to opioid overdose reversal medication for hospitals and other specified facilities.</p> <p>EAP Notes</p> <p>Elana Lynn</p> <p><u>-3</u> Amendment Summary: Replaces the measure. Requires hospitals, detoxification facilities, and residential treatment facilities to provide two doses of opioid overdose reversal medication to patients who are treated for opioid use disorder and who are discharged to an unlicensed setting (does not apply if against medical advice). Exempts providers that fail to meet requirement from liability under good faith. Directs OHA to provide medication.</p> <p><b>May 18, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Rules suspended. Carried over to May 22, 2023 Calendar.</li> </ul> <p><b>May 17, 2023, House</b></p> <ul style="list-style-type: none"> <li>• Second reading.</li> </ul> | House • May 18, 2023: Rules suspended. Carried over to May 22, 2023 Calendar. | <a href="#">Clients Oregon Academy of Family Physicians</a><br><br><a href="#">Subjects Treatment (Substance use and other) Issues</a> |

| Bill                    | Sponsors  | Title  | Last Action  | Lists  |
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| <a href="#">SB 1079</a> | <a href="#">Chris Gorsek</a>  | <p>Relating to health care; declaring an emergency.</p> <p>Requires Oregon Health Authority to study hospital licensing requirements. Directs authority to submit findings to interim committees of Legislative Assembly related to health not later than September 15, 2024.</p> <p>EAP Notes</p> <p><b>Hospital staffing crisis bill</b></p> <p><b>May 15, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass with amendments and be referred to Ways and Means. (Printed A-Eng.)</li> <li>• Referred to Ways and Means by order of the President.</li> </ul>   | Senate • May 15, 2023: Referred to Ways and Means by order of the President. | <a href="#">Clients Oregon Academy of Family Physicians</a>  |
| <a href="#">SB 1089</a> | <a href="#">James Manning Jr.</a><br><a href="#">Travis Nelson</a><br><a href="#">Deb Patterson</a> | <p>Relating to the Universal Health Plan Governance Board; declaring an emergency.</p> <p>Establishes Universal Health Plan Governance Board. Specifies membership, powers and duties. Requires board to appoint executive director. Requires board to create comprehensive plan to finance and administer Universal Health Plan that meets specified requirements and is consistent with specified values and principles. Directs board to present comprehensive plan for implementation of Universal Health Plan to interim committees of Legislative Assembly related to health and to Governor no later than September 15, 2026. Declares emergency, effective on passage.</p> <p><b>New vehicle for the universal health care/single payer work (replaces SB 704)</b></p> <p><b>May 01, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Do pass with amendments and be referred to Ways and Means. (Printed A-Eng.)</li> <li>• Referred to Ways and Means by order of the President.</li> </ul>   | Senate • May 01, 2023: Referred to Ways and Means by order of the President. | <a href="#">Clients Oregon Academy of Family Physicians</a><br><br><a href="#">Position Support</a>  |
| <a href="#">SB 5525</a> | Introduced and printed pursuant to House Concurrent Resolution 23 (2023)                            | <p>Relating to the financial administration of the Oregon Health Authority; declaring an emergency.</p> <p>Appropriates moneys from General Fund to Oregon Health Authority for certain biennial expenses. Limits biennial expenditures from fees, moneys or other revenues, including Miscellaneous Receipts, tobacco and marijuana tax receipts, beer and wine tax receipts, provider taxes and Medicare receipts, but excluding lottery funds and other federal funds, collected or received by authority for certain purposes. Limits biennial expenditures by authority from certain lottery moneys for certain purposes. Limits biennial expenditures by authority from certain federal funds for certain purposes. Authorizes specified nonlimited expenditures. Limits biennial expenditures from Public Employees' Revolving Fund and Oregon Educators Revolving Fund for benefit plan premiums and self-insurance. Declares emergency, effective July 1, 2023.</p> <p><b>OHA budget bill</b></p> <p><b>Apr 24, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Informational Meeting held.</li> </ul> <p><b>Apr 19, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Informational Meeting held.</li> </ul> | Senate • Apr 24, 2023: Informational Meeting held.                           | <a href="#">Clients Bridges to Change Health Justice Recovery Alliance Oregon Academy of Family Physicians</a><br><br><a href="#">Subjects Budget &amp; Funding: Oregon Health Authority</a> |

| Bill                   | Sponsors   | Title   | Last Action  | Lists  |
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| <a href="#">SJR 33</a> | <a href="#">Kate Lieber</a><br><a href="#">Rob Wagner</a><br><a href="#">Lew Frederick</a> | <p>Proposing amendment to Oregon Constitution relating to an enumeration of equal rights.</p> <p>Proposes amendment to Oregon Constitution to enumerate examples of rights, the denial or abridgement of which would violate existing constitutional guarantee of equality of rights. Makes conforming change to repeal constitutional policy of marriage being between one man and one woman. Refers proposed amendment to people for their approval or rejection at special election held on same date as next regular general election.</p> <p><b>May 02, 2023, Senate</b></p> <ul style="list-style-type: none"> <li>• Recommendation: Be adopted.</li> <li>• Minority Recommendation: Do adopt with amendments. (Printed A-Eng. Minority)</li> </ul> | <p>Senate • May 02, 2023: Minority Recommendation: Do adopt with amendments. (Printed A-Eng. Minority)</p> | <p><a href="#">Clients Oregon Academy of Family Physicians</a></p> |

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