



Weekly Report

Week ending February 24, 2024

Capitol Climate

Despite another deadline looming, the Building was very quiet this week. Given the number of bills left in action after the first deadline, all the action, this week, was behind the scenes in legislative counsel's offices. Legislative counsel staff worked round the clock to draft amendment after amendment for bills that need a work session finalized by the February 29th 2nd chamber deadline. As such, lobbyists and legislators occupied themselves in political negotiations to keep their bills alive while also reviewing countless versions of amendment drafts.

There did occur some unexpected, unexpected to this lobbying firm, that is, hullabaloo on the House floor this past Wednesday as a contentious debate regarding canola oil farming broke out. Apparently, farm groups have been at odds with each other for years over whether to expand canola farming in the Willamette Valley. Following up on failed legislation in 2023 the legislature is now deciding whether to allow more canola farming or keep in place a cap. Why is this interesting? Because it led to a lengthy floor debate, a filibuster attempt by Rep. Anna Scharf (lead proponent of removing the cap), and the first interesting floor vote of the short 2024 session.

All in all, this semi-quiet week in the Capitol was a nice divergence from the usual chaotic nature of a short session. We can expect that to return next week as legislation repealing Measure 110 (Oregon's drug decriminalization law) is sent through its Joint Committee and conversations regarding Ways & Means appropriations decisions become more public.

Committee Hearing Report outs

House Behavioral Health and Health Care

02/19/2024

[HB 4071](#) (licensing TF and compact) WS

[-7 SMS](#): Replaces the measure. Establishes 20-member Task Force on Health Professional Licensing. Requires task force to meet monthly from April 2024 through December 2025. Requires task force to submit reports by September 15, 2024; September 15, 2025; and December 15, 2025. Requires Legislative Policy and Research Office (LPRO) Director to provide staff support to the task force.

- The -7 amendment was unanimously adopted, without discussion.
- The bill was unanimously referred to joint ways and means without recommendation. Rep. Diehl was disappointed it was referred without recommendation.

[HB 4010](#) (omnibus) WS

[-7, -8 SMS](#)

-7 Removes prohibitions on drug manufacturers denying or restricting access by contract pharmacy to prescription drugs dispensing by contract pharmacy on behalf of a covered entity (Section 3). **Removes provisions requiring good faith negotiation in the arrangement of health care interpreter services between providers and health insurers** (Sections 6 - 7).

-8 Reinstates requirement that optometrists have hospital consulting privileges in order to qualify for rural medical tax credit. Removes the revenue impact.

- The -7 amendment was adopted on a party line vote. Rep. Nosse explained that the interpreter section was removed because the drafters could not come up with language that aligns with the ACA and ensure that interpreter services are covered.
- The -8 amendment was adopted on a party line vote. Rep. Nosse shared that there was not enough time to work this in a short session.
- The bill as amended was referred to the floor with a do pass recommendation on a party line vote. The committee shared concerns on the amendments believing the provisions removed were all good policy, but too much to work in a short session.

[HB 4011](#) (omnibus) WS

[-3, -4, -6 SMS](#)

-3 Removes requirement effort to increase recruitment and retention of behavioral health worker be focused on people or color, tribal members, or residents of rural areas.

-4 Removes requirement that OHA enter into agreement with MHACBO to recruit and retain behavioral health workforce.

-6 Clarifies the definition of "cervical cancer screening." Clarifies dental laboratory registration processes. Permits HLO to inspect copies of dental laboratory work orders.

- The -6 amendment was unanimously adopted without discussion.
- Rep. Diehl moved for the -3 and -4 to be adopted
 - The -4 amendment was not adopted
 - No: Bowman, Conrad, Dexter, Javadi, Pham, Tran, Nelson, and Nosse
 - The -3 amendment was not adopted. The Democrats shared concern that culturally specific providers are needed and removing the language from the bill might jeopardize that.
 - No: Bowman, Dexter, Javadi, Pham, Tran, Nelson, Nosse
- Moved the bill as amended to floor with a do pass recommendation and referral to ways and means. Rep. Dexter shared frustration that we keep putting insurance mandates into statute. Rep. Goodwin felt we have invested more than enough in nurse education.
 - No: Diehl, Yunker, Goodwin

[HB 4130](#) (Bowman's Bill - Corporate Practice of Medicine) WS

[-6 SMS](#): Replaces the measure. Adds definition of "professional corporation" for purposes of the measure. Clarifies prohibitions on shareholders, directors, and officers of professional corporations and establishes exceptions for professional corporations solely and exclusively engaged in specified fields or areas. Adds exception for hospital and hospital-affiliated entities that provide outpatient health under the control of a hospital. Clarifies definitions of "management services organization" and "professional medical entity" for purposes of measure. Clarifies permitted

penalties SOS may impose for violations of prohibited acts. Clarifies definitions of "holding entity," and "medical purpose."

- The -6 amendment was adopted. Though the Republicans shared support and appreciation for the bill they also shared concerns about impacts to existing practices and a preference for earlier amendments.
- No: Conrad, Diehl, Yunker, Goodwin
- The bill as amended moved to the floor with a do pass recommendation. Rep. Dexter shared that even if there are unintended consequences from the bill that they will have 7 years to fix it.
 - No: Conrad, Diehl, Yunker, Goodwin

House Rules

02/20/2024

Public hearing on [HB 4028](#) with the [-2 amendment](#) was held. The amendment replaced the measure, and prohibits a drug manufacturer, as defined in Oregon law, from denying or restricting access to 340B drugs by a pharmacy or drug outlet contracted with a covered entity. Rep. Nosse, the hospital association, and various pharmacists testified in support they focused on the fact that FQHCs rely on the savings from the 340B program and that Oregon has not had the same issues as other states with bad actors because of our robust PBM regulations and health care policies. Opposition came from the Bioscience Association and PHARMA. They shared that contract pharmacies are not included in the federal program and thus are a loophole, they also pushed that the state should not take action until the federal government has ruled on the program.

Senate Health Care

02/21/2024

[HB 4150 work session](#)

Bill: Allows OHA to electronically inform a patient's doctor when they experience an overdose. Does not allow information to be given to a professional board for disciplinary purposes.

Summary: The work session was very short and amounted to comments agreeing that the process for the bill's drafting had been very good. Hayden noted that issues could be resolved after 2028 sunset. Passed out of committee unanimously.

House Behavioral Health and Health Care

02/21/2024

Public hearing on [SB 1508](#) which bans the Health Equity Review Committee from using quality of life measures in coverage decisions and caps insulin co-pay at \$35 was held. The bill does not have any opposition, so all testimony was in support and similar to Senate Health Care. Various advocates shared support for the bill they explained that QALY is not science based or accurate and that most insulins cost less than the current \$85 cap. The republicans pushed back on QALY and was confused why it was used in the first place if it is so discriminatory. Rep. Goodwin was also not a fan of insulin being included in the bill as she feels they are very different topics. They held a work session and unanimously moved the bill to floor without discussion.

Floor Activity

Senate Floor

02/20/2024

[SB 1506](#)

[SMS](#)

Bill: Allows pharmacists to give and prescribe treatments and test for COVID.

Summary: There was minimal discussion on the bill all of which was in support. Sen Patterson noted that the bill did not change the pharmacist's scope of practice.

- Yes 26, No 4 (Boquist, Linthicum, Robinson, and Thatcher), Excused 0

House Floor

02/20/2024

[HB 4113](#): Co-pay accumulator

- The bill passed unanimously, only Rep. Levy spoke to the bill as the carrier.
- Yes 58, No 0, Excused 2

House Floor

02/22/2024

[HB 4010](#) a health care omnibus bill passed out of floor and it is on its way to Senate Health Care. Rep. Mannix shared support and asked that we continue to consider ways to increase state hospital staffing. Rep. Tran shared her disappointment the optometrist tax exemption was removed from the bill.

- Yes 36, No 19, Excused 6

[HB 4130](#) Bowman's corporate practice of medicine passed out of the floor and is on its way to Senate Health Care. Rep. Bowman gave his usual speech on the adverse patient outcomes due to the privatization of health care and that the corporate practice of medicine doctrine already includes all the provisions in the bill but had a loophole for LLC/LLPs which the bill closes. Various democrats and republicans shared support for the bill recognizing that it is necessary and has a 7 year ramp up period before enforcement. Rep. Conrad shared he would be voting no due to the complexity of the bill. Rep. Diehl and Scharf felt the bill would reduce good business in Oregon and that the bill is too complex for a short session.

- Yes 42, No 12, Excused 6

House Rules

02/22/2023

[HB 4028](#) (340B drug program)

- Public hearing: The hearing was only for testimony carried over from tuesday. All testimony was from providers in support similar to Tuesday they focused on the need for patients to have local access to 340b drugs, the funding for FQHCs, and that arguments from Pharma are invalid/inapplicable in Oregon.
- Work Session: [-2](#) amendment replaces the measure. It prohibits a drug manufacturer, as defined in Oregon law, from denying or

restricting access to 340B drugs by a pharmacy or drug outlet contracted with a covered entity. It defines 340B drug as a drug that has been subject to any offer of a reduced price by a manufacturer pursuant to 42 U.S.C 256b and is purchased by a covered entity.

- The -2 amendment was adopted on a party line vote without discussion.
 - No: Scharf, Wallen, Helfrich
- The bill moved to the floor with a do pass recommendation on a party line vote. The republicans shared concerns that the bill is too complex, that FQHCs should have a more stable funding source, and that this bill belongs in the health care committee, where it started.
 - No: Scharf, Wallan, Helfrich

Coalition Meeting Report

Allied for a Healthier Oregon

02/21/2024

Unable to attend due to a prior commitment.



The Week Ahead

Joint Ways and Means Subcommittee On Human Services

Feb 26, 2024 08:00am

H-174

<https://olis.oregonlegislature.gov/liz/2024R1/Committees/JWMHS/2024-02-26-08-00>

<p>OR 2024 HB 4081</p>	<p>Dacia Grayber Elizabeth Steiner Maxine Dexter</p>	<p>Relating to emergency medical services; prescribing an effective date.</p> <p>Elana Lynn EMS modernization bill. Establishes the Emergency Medical Services Program and Emergency Medical Services Advisory Board within the OHA. Directs the OHA to designate emergency medical services regions within the state. Requires the program to establish and maintain an emergency medical services data system. Becomes operative on January 1, 2025.</p> <p>-2, -3 SMS: -2: Clarifies advisory board membership and duties, clarifies criteria and responsibilities of the EMS data system development, requires reporting on even-numbered years. -3: Clarifies that confidentiality protections do not extend to information that is discoverable or admissible from other source.</p> <p>Work Session</p>	<p>House • Feb 26, 2024: Work Session scheduled.</p>	<p>A-Engrossed</p>	<p>General Health Care Low Oregon Academy of Family Physicians</p>
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Senate Health Care

Feb 26, 2024 01:00pm

HR E

Note Change: Public Hearing and Possible Work Session added for HB 4130 and HB 4012. For information on how to submit written testimony or register to testify on bills scheduled for a public hearing: https://www.oregonlegislature.gov/citizen_engagement For information on Language Access Services/Para m s informaci n sobre los Servicios de Acceso Ling stico: <https://www.oregonlegislature.gov/lpro/Pages/language-access.aspx> To access links to a livestream or recordings of legislative meetings: https://www.oregonlegislature.gov/citizen_engagement/Pages/Legislative-Video.aspx

<https://olis.oregonlegislature.gov/liz/2024R1/Committees/SHC/2024-02-26-13-00>

<p>OR 2024 HB 4130</p>	<p>Ben Bowman Maxine Dexter Winsvey Campos</p>	<p>Relating to the practice of health care; prescribing an effective date.</p> <p>Corporate practice of medicine bill: Public Hearing and Possible Work Session</p>	<p>Senate • Feb 26, 2024: Public Hearing and Possible Work Session scheduled.</p>	<p>A-Engrossed</p>	<p>General Health Care High Oregon Academy of Family Physicians OSPIRG Support</p>
<p>OR 2024 HB 4113</p>	<p>Emerson Levy Cyrus Javadi Sara Gelser Blouin</p>	<p>Relating to the cost of health care.</p> <p>Amendment (-3) would: Clarify application to plans offered by the Public Employees' Benefit Board (PEBB) and Oregon Educators Benefit Board (OEBB) Clarifies application of measure to high deductible health plans.</p> <p>Public Hearing and Possible Work Session</p>	<p>Senate • Feb 26, 2024: Public Hearing and Possible Work Session scheduled.</p>	<p>A-Engrossed</p>	<p>Low Oregon Academy of Family Physicians OSPIRG Prescription Drug Related</p>

House Behavioral Health and Health Care

Feb 26, 2024 03:00pm

HR F

Informational Meeting Invited Speakers Only HB 4052 (2022) Update Mika Ingram, Health Equity Lead, Oregon Advocacy Commissions Office
 Note Change: Informational Meeting added. For information on how to submit written testimony or register to testify on bills scheduled for a public hearing: https://www.oregonlegislature.gov/citizen_engagement For information on Language Access Services/Para m s informac i n sobre los Servicios de Acceso Ling stico: <https://www.oregonlegislature.gov/lpro/Pages/language-access.aspx> To access links to a livestream or recordings of legislative meetings: https://www.oregonlegislature.gov/citizen_engagement/Pages/Legislative-Video.aspx <https://olis.oregonlegislature.gov/liz/2024R1/Committees/HBHHC/2024-02-26-15-00>

<p>OR 2024 SB 1506</p>	<p>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>	<p>Relating to pharmacy; prescribing an effective date. Allows pharmacies to test and treat SARS-CoV-2 and requires OHA to reimburse the pharmacist or pharmacy for testing and treatment. -2 Amendment: Specifies that the Oregon Health Plan, health benefit plans, and Public Employee Benefit Board (PEBB) and Oregon Employee Benefit Board (OEBB) plans must reimburse pharmacists for testing and treatment for covid. Public Hearing and Possible Work Session</p>	<p>House • Feb 26, 2024: Public Hearing and Possible Work Session scheduled.</p>	<p>A-Engrossed</p>	<p>General Health Care Oregon Academy of Family Physicians</p>
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House Session

Feb 27, 2024 11:00am

House

<https://olis.oregonlegislature.gov/liz/2024R1/2024-02-27>

<p>OR 2024 HB 4028</p>	<p>Introduced and printed pursuant to House Rule 12.00. Pre-session filed</p>	<p>Relating to health care. Rules Committee/Fahey study bill on health care access. placeholder? Third Reading</p>	<p>House • Feb 24, 2024: Subsequent referral to Ways and Means rescinded by order of the Speaker.</p>	<p>A-Engrossed</p>	<p>For Review General Health Care Oregon Academy of Family Physicians</p>
<p>OR 2024 SB 1508</p>	<p>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>	<p>Relating to health care. Background: The HERC (Health Equity Review Committee) determines which health services will be covered under the Oregon Health Plan (among other duties). The HERC is charged with developing and maintaining a list of health services ranked by priority, from the most important to the least important, representing the comparative benefits of each service to the population to be served by OHP. Third Reading</p>	<p>House • Feb 23, 2024: Recommendation: Do pass.</p>	<p>A-Engrossed</p>	<p>General Health Care Low Oregon Academy of Family Physicians</p>

Senate Health Care

Feb 28, 2024 01:00pm

HR E

For information on how to submit written testimony or register to testify on bills scheduled for a public hearing: https://www.oregonlegislature.gov/citizen_engagement For information on Language Access Services/Para m s informac i n sobre los Servicios de Acceso Ling stico: <https://www.oregonlegislature.gov/lpro/Pages/language-access.aspx> To access links to a livestream or recordings of legislative meetings: https://www.oregonlegislature.gov/citizen_engagement/Pages/Legislative-Video.aspx <https://olis.oregonlegislature.gov/liz/2024R1/Committees/SHC/2024-02-28-13-00>

<p>OR 2024 HB 4010</p>	<p>Introduced and printed pursuant to House Rule 12.00. Pre-session filed</p>	<p>Relating to health care; prescribing an effective date. Amendments forthcoming, will update post work session:A bad amendment being considered, the -4, would remove the provision requiring good faith negotiation in the arrangement of health care interpreter services between providers and health insurers-2 Clarifies that health care facility is not manufacturer, distributor, seller, or lessor of product for product liability purposes.-3 Clarifies prohibitions against drug manufacturers denying or restricting access to 340B drugs by pharmacy or drug outlet contracted with covered entity (Section 3). -4 Removes provisions requiring good faith negotiation in the arrangement of health care interpreter services between providers and health insurers (Sections 6 - 7). -5 Removes provisions prohibiting drug manufacturers from denying or restricting access by contract pharmacy to prescription drugs dispensing by contract pharmacy on behalf of covered entity.</p> <p>Summary: Public Hearing and Possible Work Session</p>	<p>Senate • Feb 28, 2024: Public Hearing and Possible Work Session scheduled.</p>	<p>A-Engrossed</p>	<p>General Health Care Low Oregon Academy of Family Physicians</p>
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OAFP BillTracker

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 HB 4008	Introduced and printed pursuant to House Rule 12.00. Presession filed	<p>Relating to behavioral health.</p> <p>Digest: The Act requires the OHA to study the problems in getting mental health care and substance use care in this state. The Act requires the OHA to send a report on its findings to the legislature. The section is repealed on January 2, 2026. (Flesch Readability Score: 65).</p> <p>Requires the Oregon Health Authority to study access to behavioral health treatment in this state. Directs the authority to submit findings to the interim committees of the Legislative Assembly related to health not later than September 15, 2025.</p> <p>Sunsets January 2, 2026.</p> <p>Joint Committee on Addiction & Community Safety (M110 reforms) placeholder</p> <p>Feb 05, 2024, House</p> <ul style="list-style-type: none"> • First reading. Referred to Speaker's desk. • Referred to Addiction and Community Safety Response. 	House • Feb 05, 2024: Referred to Addiction and Community Safety Response.	Introduced
OR 2024 HB 4009	Introduced and printed pursuant to House Rule 12.00. Presession filed	<p>Relating to public safety.</p> <p>Digest: The Act directs the CJC to study ways to address the use of drugs in public places. The Act directs the CJC to provide the results of the study to the legislature by May 1, 2025. (Flesch Readability Score: 68.7).</p> <p>Directs the Oregon Criminal Justice Commission to study ways to address the use of controlled substances in public places. Requires the commission to provide the results of the study to the appropriate interim committees of the Legislative Assembly no later than May 1, 2025.</p> <p>Sunsets January 2, 2026.</p> <p>Joint Committee on Addiction & Community Safety (M110 reforms) placeholder</p> <p>Feb 05, 2024, House</p> <ul style="list-style-type: none"> • First reading. Referred to Speaker's desk. • Referred to Addiction and Community Safety Response. 	House • Feb 05, 2024: Referred to Addiction and Community Safety Response.	Introduced

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 HB 4010	Introduced and printed pursuant to House Rule 12.00. Pre-session filed	<p>Relating to health care; prescribing an effective date.</p> <p>Digest: This Act makes changes to laws about prescription drugs, health insurance and some health care providers. The Act says the Oregon State Hospital does not have to do certain things about staffing. The Act changes the term "physician assistant" to "physician associate." (Flesch Readability Score: 60.4). Specifies that flavoring of a prescription drug is not compounding. Prohibits drug manufacturers from restricting access to certain prescription drugs. Exempts the Oregon State Hospital from certain hospital staffing requirements. Removes the requirement that optometrists have hospital consulting privileges in order to qualify for tax credit. Removes requirement that an applicant for licensure as a licensed professional counselor or therapist submit a professional disclosure statement. Changes the term "physician assistant" to "physician associate." Requires health insurers to negotiate with health care interpreters and certain health care providers regarding coverage of health care interpretation services.</p> <p>Takes effect on the 91st day following adjournment sine die. Statutes affected: Introduced: 441.775, 441.776, 743B.221, 675.755, 315.616, 192.566, 3.450, 30.302, 30.800, 30.802, 31.260, 31.740, 58.376, 87.555, 87.560, 87.565, 87.575, 87.581, 109.640, 109.650, 109.675, 109.680, 109.685, 124.050, 127.663, 127.700, 135.139, 136.220, 137.076, 137.473, 137.476, 146.181, 146.750, 147.403, 169.076, 169.077, 169.750, 192.547, 192.556, 336.479, 336.490, 339.870, 343.146, 34...</p> <p>Amendments forthcoming, will update post work session: A bad amendment being considered, the -4, would remove the provision requiring good faith negotiation in the arrangement of health care interpreter services between providers and health insurers -2 Clarifies that health care facility is not manufacturer, distributor, seller, or lessor of product for product liability purposes. -3 Clarifies prohibitions against drug manufacturers denying or restricting access to 340B drugs by pharmacy or drug outlet contracted with covered entity (Section 3). -4 Removes provisions requiring good faith negotiation in the arrangement of health care interpreter services between providers and health insurers (Sections 6 - 7). -5 Removes provisions prohibiting drug manufacturers from denying or restricting access by contract pharmacy to prescription drugs dispensing by contract pharmacy on behalf of covered entity.</p> <p>Summary:</p> <ul style="list-style-type: none"> • Specifies that flavoring of a prescription drug is not compounding. Prohibits drug manufacturers from restricting access to certain prescription drugs. • Exempts the Oregon State Hospital from certain hospital staffing requirements. • Removes the requirement that optometrists have hospital consulting privileges in order to qualify for tax credit. • Removes requirement that an applicant for licensure as a licensed professional counselor or therapist submit a professional disclosure statement. • Changes the term "physician assistant" to "physician associate." • Requires health insurers to negotiate with health care interpreters and certain health care providers regarding coverage of health care interpretation services. <p>Public Hearing and Possible Work Session • Senate Health Care</p> <p>Feb 28, 2024 01:00pm</p> <p>HR E</p> <p>Feb 28, 2024, Senate</p> <ul style="list-style-type: none"> • Public Hearing and Possible Work Session scheduled. <p>Feb 22, 2024, Senate</p> <ul style="list-style-type: none"> • First reading. Referred to President's desk. • Referred to Health Care. 	Senate • Feb 28, 2024: Public Hearing and Possible Work Session scheduled.	A-Engrossed

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 HB 4011	Introduced and printed pursuant to House Rule 12.00. Pre-session filed	<p>Relating to health care; prescribing an effective date.</p> <p>Digest: The Act tells health insurance to pay for some cancer exams and devices that people with diabetes use. The Act makes the Health Licensing Office register dental laboratories. It says what "dental laboratory" means. The Act tells the Oregon Health Authority to help pay for nursing education programs and the behavioral health workforce. The Act makes a project at OHA to buy a lot of things to help with substance use in the state. The Act is effective 91 days after adjournment sine die. (Flesch Readability Score: 60.6).</p> <p>Prohibits cost-sharing on certain health insurance coverage of cervical cancer examinations. Requires medical assistance to include continuous glucose monitor for specified recipients of medical assistance. Defines "continuous glucose monitor."</p> <p>Requires a dental laboratory to register with the Health Licensing Office. Defines "dental laboratory." Requires a dental laboratory to provide a material content disclosure to a dentist who prescribes a work order for a dental prosthetic appliance or other artificial material or device. Defines "material content disclosure." Allows the office to impose discipline for certain violations. Directs the office to provide administrative and regulatory oversight to the dental laboratory program.</p> <p>Requires the Oregon Health Authority to provide grants to the Oregon Center for Nursing to work with Oregon's nursing education programs to develop programs to recruit and retain nurse educators at public and private insti...</p> <p>health care omnibus bill</p> <p>Amendments forthcoming, will update post work session. Possible amendments include:</p> <ul style="list-style-type: none"> -3 Removes requirement effort to increase recruitment and retention of behavioral health worker be focused on people or color, tribal members, or residents of rural areas. -4 Removes requirement that OHA enter into agreement with MHACBO to recruit and retain behavioral health workforce. -6 Clarifies definition of "cervical cancer screening." Clarifies dental laboratory registration processes. Permits HLO to inspect copies of dental laboratory work orders. <ul style="list-style-type: none"> • Prohibits cost-sharing on certain health insurance coverage of cervical cancer examinations. • Requires medical assistance to include continuous glucose monitor for specified recipients of medical assistance. • Requires a dental laboratory to register with the Health Licensing Office. • Requires a dental laboratory to provide a material content disclosure to a dentist who prescribes a work order for a dental prosthetic appliance or other artificial material or device. • Requires the Oregon Health Authority to provide grants to the Oregon Center for Nursing to work with Oregon's nursing education programs to develop programs to recruit and retain nurse educators at public and private institutions of higher education. • Requires the authority to enter into an agreement with the Mental Health and Addiction Certification Board of Oregon to increase the behavioral health workforce in this state. • Establishes the Harm Reduction Clearinghouse Project within the authority to make bulk purchases of harm reduction supplies. <p>Feb 22, 2024, House</p> <ul style="list-style-type: none"> • Recommendation: Do pass with amendments, be printed A-Engrossed, and be referred to Ways and Means by prior reference. • Referred to Ways and Means by prior reference. <p>Feb 19, 2024, House</p> <ul style="list-style-type: none"> • Work Session held. 	House • Feb 22, 2024: Referred to Ways and Means by prior reference.	A-Engrossed

Bill	Sponsors	Title	Last Action	Latest Version
<p>OR 2024 HB 4028</p>	<p>Introduced and printed pursuant to House Rule 12.00. Pre-session filed</p>	<p>Relating to health care.</p> <p>Digest: The Act requires the OHA to study the problems in getting health care in this state and to send a report of its findings to the legislature. The section is repealed on January 2, 2026. (Flesch Readability Score: 60.9). Requires the Oregon Health Authority to study access to health care in this state. Directs the authority to submit its findings to the interim committees of the Legislative Assembly related to health not later than September 15, 2025.</p> <p>Rules Committee/Fahey study bill on health care access. placeholder?</p> <p>Third Reading • House Session</p> <p>Feb 27, 2024 11:00am</p> <p>House</p> <p>Feb 24, 2024, House</p> <ul style="list-style-type: none"> • Recommendation: Do pass with amendments, be printed A-Engrossed, and subsequent referral to Ways and Means be rescinded. • Subsequent referral to Ways and Means rescinded by order of the Speaker. <p>Feb 22, 2024, House</p> <ul style="list-style-type: none"> • Work Session held. 	<p>House • Feb 24, 2024: Subsequent referral to Ways and Means rescinded by order of the Speaker.</p>	<p>A-Engrossed</p>
<p>OR 2024 HB 4069</p>	<p>Maxine Dexter</p>	<p>Relating to paying for health care.</p> <p>Digest: The Act creates a new pilot program to test new ways to pay for health care. The Act sets out the requirements for the program and specifies the steps that the Oregon Health Authority must take to roll out the program. (Flesch Readability Score: 70.7). Establishes the Aligning for Health Pilot Program, administered by the Oregon Health Authority, to test alternative methods for paying for health care. Prescribes the requirements for the pilot program and the steps in the implementation. Sunsets January 2, 2035.</p> <p>Bill will not be scheduled for a hearing: Establishes the Aligning for Health Pilot Program, administered by the Oregon Health Authority, to test alternative methods for paying for health care. Prescribes the requirements for the pilot program and the steps in the implementation.</p> <p>Feb 05, 2024, House</p> <ul style="list-style-type: none"> • First reading. Referred to Speaker's desk. • Referred to Behavioral Health and Health Care with subsequent referral to Ways and Means. 	<p>House • Feb 05, 2024: Referred to Behavioral Health and Health Care with subsequent referral to Ways and Means.</p>	<p>Introduced</p>

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 HB 4071	Ed Diehl Hai Pham Daniel Bonham	<p>Relating to health care licensing; prescribing an effective date.</p> <p>Digest: Tells health care boards to give short-term permission to work. Starts January 1, 2025. (Flesch Readability Score: 60.7). Requires health professional regulatory boards to issue a temporary authorization to practice a health profession to eligible applicants within 10 days of receiving an application for licensure. Defines "health profession" and "health professional regulatory board." Takes effect on the 91st day following adjournment sine die.</p> <p>Bill modified by amendment:</p> <p>-2 creates interstate compact for social workers</p> <p>-3 creates interstate compact for counselors</p> <p>-7 Replaces the measure. Establishes 20-member Task Force on Health Professional Licensing. Requires task force to meet monthly from April 2024 through December 2025. Requires task force to submit reports by September 15, 2024; September 15, 2025; and December 15, 2025. Requires Legislative Policy and Research Office (LPRO) Director to provide staff support to task force.</p> <p>Feb 22, 2024, House</p> <ul style="list-style-type: none"> • Without recommendation as to passage, with amendments, be printed A-Engrossed, and be referred to Ways and Means. • Referred to Ways and Means by order of Speaker. <p>Feb 19, 2024, House</p> <ul style="list-style-type: none"> • Work Session held. 	House • Feb 22, 2024: Referred to Ways and Means by order of Speaker.	A-Engrossed

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 HB 4081	Dacia Grayber Elizabeth Steiner Maxine Dexter	<p>Relating to emergency medical services; prescribing an effective date.</p> <p>Digest: The Act makes a program and an advisory board in the Oregon Health Authority to make it easier to get fast health care. (Flesch Readability Score: 61.4). Establishes the Emergency Medical Services Program and Emergency Medical Services Advisory Board within the Oregon Health Authority. Directs the authority to designate emergency medical services regions within the state. Directs the authority to designate emergency medical services centers for the provision of specific types of emergency care. Requires the program to establish and maintain an emergency medical services data system. Becomes operative on January 1, 2025. Takes effect on the 91st day following adjournment sine die. Statutes affected: Introduced: 682.017, 682.051, 682.056, 682.059, 682.068, 682.075, 682.079, 146.015, 181A.375, 353.450, 441.020, 442.507, 442.870</p> <p>EMS modernization bill. Establishes the Emergency Medical Services Program and Emergency Medical Services Advisory Board within the OHA. Directs the OHA to designate emergency medical services regions within the state. Requires the program to establish and maintain an emergency medical services data system. Becomes operative on January 1, 2025.</p> <p><u>-2, -3 SMS:</u> -2: Clarifies advisory board membership and duties, clarifies criteria and responsibilities of the EMS data system development, requires reporting on even-numbered years. -3: Clarifies that confidentiality protections do not extend to information that is discoverable or admissible from other source.</p> <p>Work Session • Joint Ways and Means Subcommittee On Human Services</p> <p>Feb 26, 2024 08:00am</p> <p>H-174</p> <p>Feb 26, 2024, House</p> <ul style="list-style-type: none"> • Work Session scheduled. <p>Feb 22, 2024, House</p> <ul style="list-style-type: none"> • Assigned to Subcommittee On Human Services. <p>Feb 16, 2024, House</p> <ul style="list-style-type: none"> • Referred to Ways and Means by prior reference. 	House • Feb 26, 2024: Work Session scheduled.	A-Engrossed

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 HB 4088	Travis Nelson James Manning Jr. Thuy Tran	<p>Relating to safety of persons working in hospitals; declaring an emergency.</p> <p>Digest: The Act directs hospitals to take actions with respect to the protection of hospital staff. The Act directs the OHPB to contract with the OHSU to run a pilot program. The Act directs the OHSU to report on the program by Sept. 1, 2025. (Flesch Readability Score: 65). Requires hospitals to take certain actions with respect to protecting hospital employees from workplace assaults. Directs hospitals to post signage informing employees of rights and protections regarding workplace assaults. Requires hospitals to submit an annual report to the interim committees of the Legislative Assembly and to the Director of the Department of Consumer and Business Services regarding the status of the hospital's assault prevention and protection program and the results of any root cause analyses conducted by the hospital. Expands the crime of assault in the third degree to include causing physical injury to a person working in a hospital while worker is performing official duties. Specifies when a person may not be charged with the crime. Requires the Oregon Health Policy Board to enter into an agreement with the Oregon Health and Science University to administer a pilot program for purposes of developing recommendations for establishing a statewide program to train hospital staff on procedures to prevent and respond to incidents of workplace violence. Declares an emergency, effective on passage. Statutes affected: Introduced: 654.412, 441.096, 654.182, 654.414, 163.165</p> <p>Hospital worker protections bill. The bill would make assaulting a health care worker a felony instead of misdemeanor, would require signage of the increased penalty, and would require annual reporting to the legislature on assault data.</p> <p><u>-2 SMS</u>: Replaces the measure. Reduces the scope to additional protections such as signage, makes knowingly and intentionally harming a hospital worker a class c felony, and establishes the Hospital Workplace Violence Prevention Efforts Fund.</p> <p>Feb 19, 2024, House</p> <ul style="list-style-type: none"> • Recommendation: Do pass with amendments, be printed A-Engrossed, and be referred to Ways and Means by prior reference. • Referred to Ways and Means by prior reference. <p>Feb 15, 2024, House</p> <ul style="list-style-type: none"> • Work Session held. 	House • Feb 19, 2024: Referred to Ways and Means by prior reference.	A-Engrossed

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 HB 4091	Hai Pham Cedric Hayden Cyrus Javadi	<p>Relating to health insurance mandates; prescribing an effective date.</p> <p>Digest: The Act creates a committee to review proposed measures that require a health plan to pay for a certain type of health service or a health service that is provided by a certain type of provider of health care. The committee must report the results of its review of each measure to the legislature. The LPRO director staffs the committee. (Flesch Readability Score: 66.6).</p> <p>Establishes the Health Insurance Mandate Review Advisory Committee, staffed by the Legislative Policy and Research Director, to meet during interims between sessions of the Legislative Assembly to review any proposed measure sponsored by or submitted to the interim committees of the Legislative Assembly related to health if the measure requires health insurance policies to reimburse specified health care providers or to reimburse the cost of a specific service. Specifies the membership of the committee and the type of review that the committee must undertake.</p> <p>Requires the committee to produce a report of its findings on each proposed measure no later than January 15 of the year in which the measure may be introduced or 15 days after a review is requested, whichever is later.</p> <p>Requires the director to report to the Legislative Assembly, by December 31, 2026, on the work of the committee and recommendations for legislation.</p> <p>Sunsets June 30, 2027. Takes effect on the 91st day following adjournment sine die. Statutes affected: Introduced: 171.875, 171.880</p> <ul style="list-style-type: none"> • Establishes the Health Insurance Mandate Review Advisory Committee, which would meet during the interim of legislative sessions to review any proposed measure sponsored by or submitted to the legislative assembly that relates to health if the measure requires health insurance policies to reimburse specified health care providers or to reimburse the cost of a specific service. Requires the committee to produce a report of its findings on each proposed measure no later than January 15 of the year in which the measure may be introduced or 15 days after a review is requested, whichever is later. Members include: <ul style="list-style-type: none"> • One member representing businesses that offer group health plans to employees • One member representing insurers that offer health benefit plans • One member representing health care providers who are not employed by insurers that offer health benefit plans • One member representing consumers of health insurance benefits who are not representative of businesses that offer group health insurance, insurers or health care providers • One member representing an organization or collaborative that promotes health equity policies and practices that are informed by racial justice principles • One member with expertise in the provision of health care in rural areas of this state <p>Feb 14, 2024, House</p> <ul style="list-style-type: none"> • Recommendation: Do pass and be referred to Ways and Means. • Referred to Ways and Means by order of Speaker. <p>Feb 12, 2024, House</p> <ul style="list-style-type: none"> • Work Session held. 	House • Feb 14, 2024: Referred to Ways and Means by order of Speaker.	Introduced

Bill	Sponsors	Title	Last Action	Latest Version
<p>OR 2024 HB 4105</p>	<p>Lisa Reynolds James Manning Jr. Deb Patterson</p>	<p>Relating to programs providing targeted case management nursing services to perinatal families; declaring an emergency.</p> <p>Digest: The Act gives money to OHA to pay for some of the costs of the program in which nurses visit families while a parent is pregnant and for two years after that. (Flesch Readability Score: 63.4). Appropriates moneys to the Oregon Health Authority for the costs of targeted case management services provided in the nurse home visiting services program for families during pregnancy and for two years after the pregnancy. Declares an emergency, effective on passage.</p> <p>Appropriates \$3,155,147 for OHA to expand the Nurse-Family Partnership nurse home visiting services program which assigns a nurse to an expecting family from pregnancy to two years of age.</p> <p>Feb 13, 2024, House</p> <ul style="list-style-type: none"> • Recommendation: Do pass and be referred to Ways and Means by prior reference. • Referred to Ways and Means by prior reference. <p>Feb 12, 2024, House</p> <ul style="list-style-type: none"> • Work Session held. 	<p>House • Feb 13, 2024: Referred to Ways and Means by prior reference.</p>	<p>Introduced</p>
<p>OR 2024 HB 4113</p>	<p>Emerson Levy Cyrus Javadi Sara Gelser Blouin</p>	<p>Relating to the cost of health care.</p> <p>Digest: The Act applies to insurers and other entities that pay for drugs for people who have insurance. The Act requires insurers and others to count toward any costs that an insured person must pay for their drugs, the amounts paid from coupons or by other third parties. (Flesch Readability Score: 60.5). Requires an insurer a pharmacy benefit manager, the Public Employees' Benefit Board, the Oregon Educators Benefit Board and a health care service contractor to count payments made by or on behalf of an enrollee for the costs of certain prescription drugs when calculating the enrollee's contribution to an out-of-pocket maximum, deductible, copayment, coinsurance or other required cost-sharing for the drugs.</p> <p>Amendment (-3) would:</p> <p>Clarify application to plans offered by the Public Employees' Benefit Board (PEBB) and Oregon Educators Benefit Board (OEBB) Clarifies application of measure to high deductible health plans.</p> <p>Summary : limits for co-pay assistance limits. prohibit insurers from limiting co-pay assistance when an enrollee is using the assistance for:</p> <ul style="list-style-type: none"> • a drug that has no generic equivalent, or • a drug for which the enrollee has gotten prior authorization (i.e., demonstrated medical need) <p>Public Hearing and Possible Work Session • Senate Health Care</p> <p>Feb 26, 2024 01:00pm</p> <p>HR E</p> <p>Feb 26, 2024, Senate</p> <ul style="list-style-type: none"> • Public Hearing and Possible Work Session scheduled. <p>Feb 21, 2024, Senate</p> <ul style="list-style-type: none"> • First reading. Referred to President's desk. • Referred to Health Care. 	<p>Senate • Feb 26, 2024: Public Hearing and Possible Work Session scheduled.</p>	<p>A-Engrossed</p>

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 HB 4130	Ben Bowman Maxine Dexter Winsvey Campos	<p>Relating to the practice of health care; prescribing an effective date.</p> <p>Digest: Keeps people in charge of a company of doctors from running the company if the same people also run another company that has a contract with the company of doctors. Does not allow the company to get rid of the people in charge without a vote by those who are doctors. Does not allow companies to keep their workers from working for someone else, saying that the company is bad or speaking out about the company's bad acts. Does not allow a company to punish those who speak out. (Flesch Reading Score: 60.6).</p> <p>Prohibits a shareholder, director or officer of a professional corporation organized for the purpose of practicing medicine, or a professional corporation organized for the purpose of allowing physicians, physician assistants and nurse practitioners to jointly render professional health care services, from participating in managing the professional corporation, or voting shares in the professional corporation on any issue or corporate action that bears on the ownership, management or governance of the professional corporation, if the shareholder, director or officer is simultaneously a shareholder, director, member, officer or employee of a management services organization with which the professional corporation has a contract.</p> <p>Prohibits a professional corporation from removing a director or an officer by means other than majority vote of directors or officers, as appropriate, who are licensed to practice medicine in this state.</p> <p>Applies to limited liability compa...</p> <p>Corporate practice of medicine bill:</p> <ul style="list-style-type: none"> • The goal of this bill is to limit the privatization of health care through a loophole created for LLCs and LLPs. It does this by limiting the involvement of external private entities engagement in shareholder votes regarding ownership, management or governance of a professional health corporation and requiring reporting on ownership of health corporations. It also protects employees from non-competes, NDAs, and non-disparagement agreements. • Specifics: Does not allow employees of a management services organization to vote on any action that would affect ownership, management or governance of the professional health corporation. This would not apply if the professional health corporation owns a majority of the management services organization. Requires a majority vote of shareholders to remove a director or officer. A professional health corporation is allowed to transfer control to a private entity if it is exclusively between or among and for the benefit of a majority of shareholders who are physicians licensed in this state to practice medicine and complies with ORS 60.265. OHA is the accountability body, all ownership of 10% or higher must be reported to them. <p>Public Hearing and Possible Work Session • Senate Health Care</p> <p>Feb 26, 2024 01:00pm</p> <p>HR E</p> <p>Feb 26, 2024, Senate</p> <ul style="list-style-type: none"> • Public Hearing and Possible Work Session scheduled. <p>Feb 22, 2024, Senate</p> <ul style="list-style-type: none"> • First reading. Referred to President's desk. • Referred to Health Care. 	Senate • Feb 26, 2024: Public Hearing and Possible Work Session scheduled.	A-Engrossed

Bill	Sponsors	Title	Last Action	Latest Version
<p>OR 2024 HB 4136</p>	<p>Nancy Nathanson Julie Fahey Paul Holvey</p>	<p>Relating to health care; declaring an emergency.</p> <p>Digest: The Act changes the laws about nurse licenses, gives money to Lane County to pay for fast health care and tells the Oregon Health Authority to look at how to get health care. (Flesch Readability Score: 60.5). Expands the exemption from the licensure requirement for certain nurses. Directs the Oregon State Board of Nursing to issue a provisional license to an applicant for licensure.</p> <p>Directs the Oregon Health Authority to enter into an agreement with Lane County Public Health and distribute to Lane County Public Health moneys for the purposes of funding same-day health care services.</p> <p>Directs the authority to review access to urgent and immediate health care services and submit a report to the interim committees of the Legislative Assembly related to health care not later than September 15, 2024.</p> <p>Declares an emergency, effective on passage. Statutes affected: Introduced: 678.031, 678.034, 678.040</p> <p>Grants applicants for nursing licenses a provisional license until the date they are issued a license. Directs OHA to enter into an agreement to send money to Lane County to fund same day medical services. It also requires OHA to review and assess the urgent needs in health care no later than September 15, 2024. Effective on passage.</p> <p>-1, -2 SMS Adopted: -1: Clarifies required elements of agreement between OHA and Lane County Public Health. Specifies purposes fund appropriation. Removes requirement for OHA to review and report on access to health care services. -2: Removes provision requiring OSBN to issue provisional license to application for licensure by endorsement.</p> <p>Feb 19, 2024, House</p> <ul style="list-style-type: none"> • Recommendation: Do pass with amendments, be printed A-Engrossed, and be referred to Ways and Means. • Referred to Ways and Means by order of Speaker. <p>Feb 14, 2024, House</p> <ul style="list-style-type: none"> • Work Session held. 	<p>House • Feb 19, 2024: Referred to Ways and Means by order of Speaker.</p>	<p>A-Engrossed</p>
<p>OR 2024 HB 4150</p>	<p>Mark Owens Cyrus Javadi Hai Pham</p>	<p>Relating to prescription monitoring program; prescribing an effective date.</p> <p>Digest: The Act allows for some doctors or people like doctors to be told when a patient overdoses on a drug. (Flesch Readability Score: 68.0). Authorizes the Oregon Health Authority or a third party to provide electronic notification to a practitioner in certain circumstances when the practitioner's patient has a fatal or nonfatal overdose. Limits the use and retention of practitioner information.</p> <p>Takes effect on the 91st day following adjournment sine die. Sunsets January 1, 2028. Statutes affected: Introduced: 431A.855</p> <p>Creates a program within OHA that notifies a prescriber if the patient has experienced an overdose in the past.</p> <p>Feb 21, 2024, Senate</p> <ul style="list-style-type: none"> • Public Hearing and Work Session held. <p>Feb 15, 2024, Senate</p> <ul style="list-style-type: none"> • First reading. Referred to President's desk. • Referred to Health Care. 	<p>Senate • Feb 21, 2024: Public Hearing and Work Session held.</p>	<p>Introduced</p>

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 HB 5203	Ways and Means	<p>Relating to state financial administration; declaring an emergency.</p> <p>Digest: The Act is a budget bill for an unspecified state agency. (Flesch Readability Score: 64.9). Establishes biennial appropriations and expenditure limitations for _____ for biennium ending June 30, 2025. Declares an emergency, effective on passage.</p> <p>End of session budget bill.</p> <p>Feb 15, 2024, House</p> <ul style="list-style-type: none"> Assigned to Subcommittee On Capital Construction. <p>Feb 12, 2024, House</p> <ul style="list-style-type: none"> First reading. Referred to Speaker's desk. Referred to Ways and Means. 	House • Feb 15, 2024: Assigned to Subcommittee On Capital Construction.	Introduced
OR 2024 HB 5204	Ways and Means	<p>Relating to state financial administration; declaring an emergency.</p> <p>Digest: The Act is a budget bill for an unspecified state agency. (Flesch Readability Score: 64.9). Establishes biennial appropriations and expenditure limitations for _____ for the biennium ending June 30, 2025. Declares an emergency, effective on passage.</p> <p>End of session budget bill.</p> <p>Feb 15, 2024, House</p> <ul style="list-style-type: none"> Assigned to Subcommittee On Capital Construction. <p>Feb 12, 2024, House</p> <ul style="list-style-type: none"> First reading. Referred to Speaker's desk. Referred to Ways and Means. 	House • Feb 15, 2024: Assigned to Subcommittee On Capital Construction.	Introduced
OR 2024 SB 1506	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 pharmacy; prescribing an effective date.</p> <p>Digest: The Act tells the Oregon Health Authority to pay a pharmacist who tests or treats a person for a virus. Lets a pharmacist test for and treat a virus. Starts on October 1, 2024, and ends on June 30, 2026. (Flesch Readability Score: 62.3). Allows a pharmacist to test for and treat a certain virus. Requires the Oregon Health Authority medical assistance program to reimburse a pharmacist for testing and treatment of the virus. Sunsets June 30, 2026. Takes effect on the 91st day following adjournment sine die. Statutes affected: Introduced: 689.005</p> <p>Allows pharmacies to test and treat SARS-CoV-2 and requires OHA to reimburse the pharmacist or pharmacy for testing and treatment.</p> <p>-2 Amendment: Specifies that the Oregon Health Plan, health benefit plans, and Public Employee Benefit Board (PEBB) and Oregon Employee Benefit Board (OEBB) plans must reimburse pharmacists for testing and treatment for covid.</p> <p>Public Hearing and Possible Work Session • House Behavioral Health and Health Care</p> <p>Feb 26, 2024 03:00pm</p> <p>HR F</p> <p>Feb 26, 2024, House</p> <ul style="list-style-type: none"> Public Hearing and Possible Work Session scheduled. <p>Feb 21, 2024, House</p> <ul style="list-style-type: none"> First reading. Referred to Speaker's desk. Referred to Behavioral Health and Health Care. 	House • Feb 26, 2024: Public Hearing and Possible Work Session scheduled.	A-Engrossed

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 SB 1508	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 health care.</p> <p>Digest: The Act forbids the HERC from using quality of life to measure the weight to give to a service that may be covered by the state Medicaid program. The Act caps the amount a person must pay for insulin under a health benefit plan to \$35. (Flesch Readability Score: 63.9). [Digest: The Act forbids the HERC from using quality of life to measure the weight to give to a service that may be covered by the state Medicaid program. (Flesch Readability Score: 63.6).]</p> <p>In determining the ranking of a condition-treatment pair on the prioritized list of health services covered by the medical assistance program, prohibits the Health Evidence Review Commission from relying upon a quality of life in general measure or from relying on any research or analyses that rely upon or refer to a quality of life measure, unless specified conditions are met.</p> <p>Caps cost-sharing required by health benefit plans at \$35 for coverage of insulin. Statutes affected: Introduced: 414.065, 414.689, 414.690, 414.701, 414.025A-Engrossed: 414.065, 414.689, 414.690, 414.701, 414.025, 743A.069</p> <p>Background: The HERC (Health Equity Review Committee) determines which health services will be covered under the Oregon Health Plan (among other duties). The HERC is charged with developing and maintaining a list of health services ranked by priority, from the most important to the least important, representing the comparative benefits of each service to the population to be served by OHP.</p> <p>1508 seeks to prevent bias inherent to some "quality of life measures" (ie. econometric models that assign a certain dollar value to the quality of a human life), from impacting decisions unless the commission has a professional trained in this area involved in the determinations.</p> <p>-2 amendment (adopted) also adds limits to the maximum allowable out-of-pocket cost for insulin to \$35 for a 30-day supply and to \$105 for a 90-day supply.</p> <p>Third Reading • House Session</p> <p>Feb 27, 2024 11:00am</p> <p>House</p> <p>Feb 23, 2024, House</p> <ul style="list-style-type: none"> • Recommendation: Do pass. <p>Feb 21, 2024, House</p> <ul style="list-style-type: none"> • Public Hearing and Work Session held. <p>Feb 14, 2024, House</p> <ul style="list-style-type: none"> • Referred to Behavioral Health and Health Care. 	House • Feb 23, 2024: Recommendation: Do pass.	A-Engrossed

Bill	Sponsors	Title	Last Action	Latest Version
OR 2024 SB 1578	James Manning Jr. Travis Nelson Maxine Dexter	<p>Relating to health care interpreters; prescribing an effective date.</p> <p>Digest: The Act directs the OHA to set up a health care interpreter management system. The Act requires the OHA to contract with a nonprofit entity to manage the system. The Act sets out certain requirements for the nonprofit. The Act requires the nonprofit to submit a report to the OHA each year. (Flesch Readability Score: 60.2).</p> <p>Directs the Oregon Health Authority to establish and maintain an online portal with the functionality to provide online scheduling for health care providers and coordinated care organizations to use to contact health care interpreters directly and to process billing. Requires the authority to contract with a nonprofit entity to administer the portal. Provides criteria and reporting requirements that the contracting nonprofit must meet. Statutes affected: Introduced: 413.550</p> <p>Amendment to bill: -1 The amendment details the roles and responsibilities of OHA and the nonprofit established in the measure</p> <p>with regard to the interpreter management system.</p> <p>Summary: Directs the OHA to establish and maintain an online portal with the functionality to provide online scheduling for health care providers and coordinated care organizations to use to contact health care interpreters directly and to process billing. Requires the authority to contract with a nonprofit entity to administer the portal. The non-profit must follow the below requirements.</p> <p>(a) Providing low-cost training and continuing education opportunities for certified and qualified health care interpreters.</p> <p>(b) The ability to directly contact qualified and certified health care interpreters to fill empty appointment slots and last-minute cancellations.</p> <p>(c) Having a plan for recruiting and retaining certified and qualified health care interpreters.</p> <p>(d) Maintaining a commitment to involving certified and qualified health care interpreters and labor organizations that represent health care interpreters in developing strategies to improve education and training, recruitment and support for the health care interpreter workforce.</p> <p>(e) Providing information to health care interpreters regarding the health care interpreter qualification and certification standards established by the Oregon Health Authority.</p> <p>(f) Informing health care interpreters of training and professional development opportunities, made available through the nonprofit entity or otherwise, that are in accordance with standards adopted by the Oregon Health Authority under ORS 413.558.</p> <p>Feb 15, 2024, Senate</p> <ul style="list-style-type: none"> • Recommendation: Do pass with amendments and be referred to Ways and Means by prior reference. (Printed A-Eng.) • Referred to Ways and Means by prior reference. <p>Feb 14, 2024, Senate</p> <ul style="list-style-type: none"> • Work Session held. 	Senate • Feb 15, 2024: Referred to Ways and Means by prior reference.	A-Engrossed