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**LEGISLATIVE UPDATE**

Prepared for OAFP

March 21, 2021

**HEALTH CARE****SB 587 – Tobacco Retail Licensure**

The Senate Health Committee voted to require businesses that wish to sell tobacco products to obtain a license from the Department of Revenue.

**SB 567 – Prohibits Discrimination in Medical Treatment**

Despite the existence of federal law, the Senate Health Committee passed SB 567 which prohibits denial of medical treatment that is likely to benefit a patient based on their race, color, national origin, sexual orientation, gender identity, age or disability.

It now goes to the floor for debate.

**HB 2164 and HB 3352 – Cover All People**

These two bills would expand eligibility for the Oregon Health Plan to adults who would qualify but for their immigration status. Gov. Kate Brown was the first to testify in the House Health Committee's public hearing on both bills. HB 2164 -3 and HB 3352 would expand the Cover All Kids program and give parents who have kids in the program, and young adults who have aged out of it access to the Oregon Health Plan.

Gov. Brown passionately testified, "All Oregonians must have quality, affordable health care regardless of who they are or where they live. ... Currently 94% of Oregonians and 100% of children have access to health care. Unfortunately the pandemic has shown us that this is not good enough, and people of color have paid the price." She added, "The bill is one vital step – one might say a baby step – in creating a more just, equitable Oregon."

Several legislators and a wide range of advocates testified in support of the bills, including Reps Wmsvey Campos (D-Campos) and Teresa Alonso León (D-Woodburn) who spoke about how this would have helped their families growing up. The Oregon Health Authority, Oregon Latino Health Coalition, several CCOs, Kaiser Permanente, Salem Health, family physicians, the Ecumenical Ministries of Oregon, SEIU and the Oregon Law Center also testified in support.

**HB 3057 – Health Information Exchange Data Sharing**

HB 3057 would allow OHA to share data with the Oregon Health Leadership Council's information exchange system, which is used by clinics and payers. The House Health Committee passed the bill, with Reps. Christine Drazan (R-Canby), Raquel Moore Green (R-Salem) and Cedric Hayden (R-Roseburg) in opposition. Rep. Hayden said he was "voting no because I think it is a broader bill than I would like to see and the data lives on too long for my comfort under HIPAA."

The bill now goes to the House floor.

### **HB 3011 – New Funding for Nurse Staffing Program**

The House Health Committee unanimously passed HB 3011, which would appropriate \$1.38 million to OHA to fund the Hospital Nurse Staffing Program. The bill now goes to Ways and Means.

### **HB 3016 – Nurse Staffing during Emergency**

This bill would give nurses a say in where they are assigned during an emergency. It passed the House Health Committee on a party-line vote. HB 3016 now goes to the House floor.

### **HB 2981 – Palliative Care Reimbursement**

House Bill 2981 requires the Oregon Health Authority to establish and administer a program to provide palliative care services for Medicaid beneficiaries. The House Health Committee unanimously adopted the -1 amendment, which fixes technical issues in the bill, and passed it out of Committee.

Rep. Cedric Hayden (R-Roseburg) spoke in support of providing palliative care, but is concerned about its cost. “I love the concept, but who pays for it?” he asked.

HB 2981 now goes to Ways and Means. Rep. Hayden asked proponents to figure out a funding solution so that the bill does not die there.

### **HB 2113 – Oregon Medical Board Geographic Diversity**

The House Health Committee held a short public hearing on HB 2113, which would expand the geographic diversity requirement to all members of the Oregon Medical Board. Nicole Krishnaswami, Executive Director of the Oregon Medical Board, asked for the Committee’s support.

## **BEHAVIORAL HEALTH**

### **HB 2086 – Behavioral Health Investments**

This bill encompasses recommendations from the Governor’s Behavioral Health Task Force. It would appropriate:

- \$1.4 million for Medicaid reimbursement of tribal based practices
- \$19 million for community restoration for the aid and assist population, and secure residential treatment facilities
- \$7.5 million to expand the Young Adult in Transition residential system, adding three residential homes

The -1 amendment, which has not yet been posted, would also:

- Expand the range of housing permissible for OHA to use for individuals with substance use disorders
- Increase funding for community restoration for the aid and assist population, and secure residential treatment facilities
- Repeal SB 944 (2017) and direct behavioral health providers of children to track data on treatment demand, including a real-time bed registry

Several Task Force members, including former Sen. Arnie Roblan, shared their support for the bill in the House Behavioral Health Committee’s public hearing. “It is more important now than ever that this funding get done,” former Sen. Roblan testified. “All that the pandemic did was exacerbate behavioral health issues.”

Jackie Yerby, the Governor’s policy advisor for behavioral health, the League of Oregon Cities, AFSCME and patient advocates also voiced their support.

### **SB 755 – Ballot Measure 110**

This bill would implement Ballot Measure 110, the Drug Decriminalization and Addiction Treatment Initiative, in statute. It was heard in a joint meeting of the House Committee on Behavioral Health and Senate Judiciary Committee. Dozens of advocates and people with lived experience testified alongside members of the Oregon Department of Justice, Oregon Attorney General's office, Oregon Health Authority, and others working to implement the Act.

The Act decriminalizes the possession of small amounts of drugs, and allows people to choose between paying a \$100 fine and undergoing a behavioral health needs assessment at an Addiction Recovery Center. Aaron Knott, Legislative Director, Oregon Attorney General, said that the Act still leave a lot of questions open, such as how people convicted of possession should learn that they have this decision to make.

Senate Judiciary Chair Floyd Prozanski (D-Eugene) is convening a workgroup to propose amendments to the bill.

### **HB 2585 – Mental Health Services for Individuals who are Deaf, Deaf-Blind and Hard of Hearing**

The House Behavioral Health Committee unanimously passed HB 2585, which now goes to Ways and Means. The bill would establish a Mental Health Bill of Rights for Deaf, Deaf-Blind and Hard of Hearing Individuals and create an advisory committee on these issues. It would also establish minimum standards for sign language interpreters in health care settings, and require that if deaf, deaf-blind or heard of hearing individuals are admitted to the hospital or residential treatment facilities, a qualified staff member have primary responsibility for coordinating and implementing their care.

## **ORAL HEALTH**

### **HB 2528 – Dental Therapists**

HB 2528 would allow dental therapists to practice in Oregon. The House Health Committee finished its public hearing of HB 2528, which it ran out of time for on March 4. The Oregon Dental Association, the Oregon Society of Oral Surgeons and many dentists fiercely opposed the base bill, citing concerns about dental therapists' scope of practice and education requirements.

Thomas Kolodge, Oregon Society of Oral Surgeons, said, "This bill combines the lowest level of education for dental therapists with the most extensive and complex scope of care in the country, all with the most permissive model of practice regarding setting and supervision."

Bill sponsor Rep. Tawna Sanchez (D-N/NE Portland), the Coquille tribe, Advantage Dental, and dentists who have worked with or helped train dental therapists in the pilot program all spoke in support of the bill. Rep. Sanchez voiced her frustration in trying to come to consensus with ODA. "Areas of our state don't have dentists," she told the Committee. "This has been a long time coming. ...We need affordable dental care."

Rep. Cedric Hayden (R-Roseburg), a practicing dentist, worked with opponents to come up with a compromise, which is reflected in the -3 amendment. The amendment is more restrictive than the current bill, but "it is a path forward for dental therapists," Rep. Hayden said. "Sometimes a step forward with consensus is better than a leap forward without it."

ODA said it would be neutral on the -3 amendment, which:

- Uses the same standards for dental therapists as dental hygienists

- Allows some practices to be done under indirect supervision and others under general supervision of a dentist
- Permits dental therapists to supervise two dental assistants, and dentists to supervise two dental therapists
- Requires dental therapists to carry their own liability insurance
- Removes the base bill's requirement that a dental therapist must sit on the Board of Dentistry
- Commits dental therapists to spending at least 51% of their time serving underserved populations

Rep. Hayden also clarified that dental therapists who have graduated from the pilot project would be grandfathered in, even if they do not meet the requirements of the bill. He also emphasized that the -3 amendment does not only apply to tribes or a certain segment of the population, but is a pathway forward for dental therapists to practice across the state.

## **OTHER ISSUES**

### **SB 615 – Broadband Assistance Fund**

The Senate Labor Committee held a public hearing on SB 615, which establishes, but does not fund, a Low Income Broadband Bill Payment Assistance Fund in the State Treasury.

Sen. Lew Frederick (D-N/NE Portland) introduced the bill and testified that his goal is to set up this fund now, and figure out how to finance it later. Sen. Kate Lieber (D-Beaverton), who is a member of the Governor's Broadband Committee, voiced her support for the bill and other measures to increase broadband access and infrastructure across the state.

Brant Wolf, Oregon Telecommunications Association, opposes the bill, saying that the Public Utility Commission's Lifeline program already does what SB 615's Broadband Fund proposes to. The Lifeline program offers qualifying Oregonians a monthly discount of \$16.25 on their broadband bill. It is funded by a surcharge on wireless devices and phone lines. Wolf did say the program is unfortunately not known or marketed well enough.

Sen. Frederick responded that his goal is to create a fund that can accept money from other sources, and to publicize the fact that such a fund exists.

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