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**LEGISLATIVE UPDATE**

Prepared for OAFP

June 20, 2021

**HB 3159 – Data Justice Act (REALD/SOGI Collection)**

The Human Services Ways and Means Subcommittee voted unanimously to provide ~\$18 million for the adoption of HB 3159. The bill requires the Oregon Health Authority to develop timelines for the implementation and collection of race, ethnicity, language, disability status (REALD), sexual orientation and gender identity (SOGI) data by health insurers and health care providers. OHA must develop infrastructure to collect the data that is query-able by providers, and allows patients to input and upload the data themselves.

Bill sponsor Rep. Rob Nosse (D-Portland) told the Subcommittee he would have liked to add an amendment CCOs requested, but it was not possible. “If we need to, we’ll address that in the short session,” he said.

Rep. Duane Stark (R-Grants Pass) asked about how fines would work if CCOs are found in violation of the bill, and what constitutes a violation. Rep. Nosse answered they will try to clarify this before the House floor votes on the bill, but that he thought these issues would be decided in OHA’s rule-making process. “Our intent in the policy committee was to give ample time to work out all the kinks of this program so fines ultimately wouldn’t be contemplated, but used as a last resort,” he added.

The bill now goes to full Ways and Means.

**SB 143/HB 2433 – Rural Medical Provider Tax Credit Renewed**

The Joint Tax Expenditures Committee passed HB 2433, their omnibus tax credit renewal bill, which extends the Rural Medical Provider Tax Credit through 2028.

Sen. Ginny Burdick (D-Portland), co-chair of the Committee, pushed for a last minute change to the credit to allow emergency room physicians in frontier counties who make more than \$300k annually to receive the credit

**HB 2949 – Behavioral Health Incentive Fund**

The Ways and Means Subcommittee on Human Services allocated \$60 million dollars to a new Behavioral Health Subaccount of the existing Health Care Provider Incentive Fund. The funding is very flexible but is intended to support things like scholarships, loan repayment incentives, housing assistance, signing bonuses, and more. The Healthcare Workforce Committee will be charged with determining how that money is spent.

The bill also allocates \$20 million dollars to the Oregon Health Authority to create a grant program to support behavioral health professionals who provide supervised clinical experience to individuals seeking licensure.

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

SB 567 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.

The Ways and Means Human Services Subcommittee unanimously adopted the -6 amendment and passed the bill to the full Ways and Means Committee.

Sen. Sara Gelser (D-Corvallis) said “the amendment tries to make crystal clear what the bill does and does not do.” It adds clarifying language and states that nothing in the measure restricts the authority of a patient, or an individual legally authorized to act on behalf of a patient, to consent to or decline medical treatment, or restricts a provider from providing objective information to the patient about the risks and benefits of treatment.”

### **HB 2010 – Public Option Study**

The Human Services Ways and Means Subcommittee funded HB 2010 and moved it to the full Ways and Means Committee. The bill tasks DCBS and OHA with researching how Oregon could implement a public option plan, while maintaining provider networks and reducing premiums. OHA will receive \$650,000 to carry out the study, and is to report back prior to the 2022 session.

An amendment to provide an additional \$650,000 to the OHA to provide recommendations on regional global budget health care delivery, a concept proposed by Rep. Maxine Dexter (D-Portland) earlier in the session, was not adopted.

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