



## Oregon Academy of Family Physicians Week ending May 5th, 2023

### Capitol Climate

If you wanted, or needed, a lesson on the parliamentary procedures of the Senate and House this would've been your week to tune in to Senate and House floor sessions. Starting first thing on Monday, legislators dug deep into the annals of the arcane rules that govern floor sessions. In the House, as they debated HB 2002 (reproductive health care and gender affirming care access legislation) House Republicans used every maneuver possible to pull the bill back into Committee (any committee) or pull the bill from the floor indefinitely. It was interesting to watch both Republicans and Democrats reaching for their Mason's Manual of Legislative Procedure (used by most state legislatures in the U.S.) to counter one another's motions and arguments.

After Monday, the real circus arrived in town. Here is a rundown of events this week:

- Senate Republicans made a motion to remove the presiding officer from his position (Senate President Wagner), failed: 12-16-2
- Secretary of State Shamia Fagan [resigned](#) – she's been in the [spotlight](#) for a contract she has had for personal work with a cannabis industry company, one which itself is [embroiled](#) in issues related to outstanding taxes, all while the Secretary of State's office has been auditing the entire Oregon cannabis industry.
- Senate R's [denied the Senate a quorum](#) on Wednesday **and Thursday**, drawing a line in the sand on the future of workflow in the chamber.
  - Senate Majority Leader responds with "DO YOUR JOB" [press release](#)
  - In response to the no show on Thursday Senate President Wagner will convened a Friday floor session, which forces a 3rd "unexcused absence" day for the missing R's.
- Senator Suzanne Weber and Representative Emily McIntire [sue Oregon legislature](#), represented by Oregon Right to Life

Will be interesting to see what next week brings as we head toward the next legislative deadline on May 19th (policy bills must be voted out of the 2nd Chamber committee to move forward.)

## **Committee Hearing Report outs**

*Senate Health Care*

05/01/2023

Public Hearings

- HB 2486, Allows pharmacy technicians, under the supervision of a pharmacist, to administer vaccines.
  - 2 people spoke in support of the bill (Albertson and Wal-Mart representatives) and compared it to a similar, successful law in Idaho.
  - UFCW 555 is neutral, and would like to see personal liability protections added to the bill prior to supporting it.
  - Sen Patterson & Sen Hayden wants a list of plans that Walmart & Albertson's works with
- HB 2278, Authorizes pharmacists to administer influenza vaccines to persons six months of age or older.
  - Dr Paul Ceislak from OHA was the only person who testified, he advocated for flu vaccines to be given to kids six months of age or older, their current vaccination rate is at 27%
  - Sen Hayden has concerns about who is giving kids as young as 6 months old vaccines. Dr Ceislak believes that it's pediatricians only that can help cover this vaccination rate gap.

*Senate Health Care*

05/03/2023

Public Hearing

- [HB 2513](#), Requires local planning committees for alcohol and drug prevention and treatment services to coordinate with local Behavioral Health Resource Networks.
  - Rep Nosse opened the public hearing and gave an overview of the bill and the workgroup process that generated the bill. He noted that while there has been a lot of negative press and legislator comments on Measure 110 the bill received a unanimous vote in the House

Committee On Behavioral Health and Health Care and only 3 no votes on the House floor.

- Other advocates for the bill testified in support (OHA, Oregon Recovers, Bridges to Change, Family Nurturing Center, Health Justice Recovery Alliance, and ACLU of Oregon) all echoed Rep. Nosse’s point on how important it is to tackle the addiction crisis in Oregon and this is a part of the solution.
- There was no opposition or neutral testimony given nor any questions from the committee.
- [HB 2235](#), Requires Oregon Health Authority to convene a work group to study major barriers to workforce recruitment and retention in publicly financed behavioral health systems in this state and to develop recommendations on specific topics.
  - Eva Rippeteau from Oregon AFSCME opened the hearing discussing the importance of reducing caseloads, creating a work group dedicated to tackling the administrative burdens healthcare workers face. A representative from Cascadia Health echoed the same benefits that the Oregon AFSCME highlighted and also mentioned the unsustainability of the current system and that we need action on this issue promptly.

*House Early Childhood and Human Services*

05/03/2023

Public Hearing

- [SB 968](#), Modifies duties of System of Care Advisory Council
  - Fmr Rep. Anna Williams, now representing the System of Care Advisory Council, testified in support of the measure. She gave an overview of the System of Care Advisory Council and that the bill will provide better implementation of their work as it will change the timeline for updating their strategic plan (from every two to every four years). And, require the Oregon Youth Authority, the Department of Human Services, the Oregon Health Authority, the Department of Education, Coordinated Care Organizations and any other state agencies, boards or commissions to work with the SOCAC on joint

studies. It will also direct the SOCAC to provide recommendations to the Deputy Superintendent of Public Instruction.

- Rep Hieb is concerned about the need for multiple state agencies that need to collaborate on various issues.

### *House Behavioral Health and Health Care*

05/03/2023

#### Work Session

- SB 1043, 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
  - *Carried over to monday's hearing on 5/8/23*

### *House Rules*

05/04/2023

#### Work Session

[HB 2045](#): Cost growth exemption bill (new vehicle is HB 2742)

- Motion to adopt the [-1 amendment](#) (exempts growth resulting from total compensation to frontline workers from accountability provisions of Health Care Cost Growth Target Program. Defines "frontline worker" and "total compensation." Requires provider to annually report total compensation based on methodology determined by OHA) passed unanimously without discussion.
- Motion to move the bill as amended to the floor with a "do pass" recommendation passed unanimously with no discussion.

## **Floor Activity**

### House Floor

[HB 2002](#): the reproductive health care access and gender affirming care legislation.

05/01/2023

- Epicly long House floor session was held on the bill on May 1st. As a reminder, the bill was expected to be on the House floor sooner than May

1st but negotiations between Republicans and Democrats resulted in the May 1st date.

- During the course of the floor debate Republicans attempted several maneuvers to move the bill back to various policy committees, a means to slow down and/or kill the bill entirely, without success. These arguments focused on the need for policy specific committees which have some purview over sections of the bill (ie. higher education committee because there is a grant to higher education for campus health care access in the bill) or arguments for removal of the emergency clause.
- Arguments for and against the bill followed the course of conversation throughout session: Those opposed believe greater restrictions ought to be in place to access this type of care, while proponents expressed their belief that that Oregonians—no matter your income, race, gender, or zip code—should have the right to make deeply personal health care decisions without interference from politicians.
- **Vote aye: 36 (all D's and Rep. Conrad, R-Eastern Lane County); no: 23; absent: 1 (Hieb, R-Clackamas)**

[SB 5522](#): Oregon Medical Board budget bill

05/04/2023

The bill passed out of the floor with minimal discussion.

Yes 39 No 15 Excused 7 (Ruiz, Scharf, B Levy, K. Pham, Rayfield, E Levy and Boshart Davis)

## **Coalition Meeting Report**

*AHO Policy Check-In*

05/03/2023

OHA shared a general update on bills they are tracking but did not share any specifics worth noting. They shared their Cost Growth Trends [Report](#) explaining that during the pandemic cost growth declined due to delayed care and is starting the increase. Behavioral health is increasing but this is likely positive as more people are seeking care.

## The Week Ahead

House Early Childhood and Human Services

05/08/2023 1:00 PM

[SB 968](#): 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).

Work Session

Senate Health Care

05/08/2023 1:00 PM

[HB 2235](#): Requires OHA to convene a work group on barriers to behavioral health work force and retention.

Work Session

[HB 2278](#): Authorizes pharmacists to administer influenza vaccines to persons six months of age or older.

Work Session

[HB 2395](#): Dexter's fentanyl bill package

Work Session

[HB 2486](#): Allows pharmacy technicians under the supervision of a pharmacist to administer vaccines.

Work Session

[HB 2513](#): Rep. Noose's M 110 fixes bill.

Work Session

[HB 2584](#): Adds physician assistants to practice of medicine provisions, including use of title and duty of care.

Work Session

House Behavioral Health and Health Care

05/08/2023 3:00 PM

[SB 608](#): 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.

Public Hearing

[SB 376](#): 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.

Public Hearing

[SB 1043](#): 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.

Public Hearing