IHN-CCO Community Advisory Council

Government Relations Update March 14, 2022

InterCommunity (**)
Health Network CCO



HB 4003

Addresses nurse workforce shortage; creates nurse intern license, temporary licensure for out of state nurses in good standing, adds RNs to Oregon Wellness Program. Supported/PASSED

HB 4004

Requires Oregon Health Authority to distribute grants to behavioral health treatment providers for staff compensation and workforce retention and recruitment.

Supported/PASSED

HB 4035

Amended to address the Medicaid redetermination process and creates a basic health plan as a bridge for individuals in the 138-200% of federal poverty level. Supported/PASSED.



HB 4039

Modifies financial requirements for coordinated care organization expenditures on social determinants of health and health equity. Support/FAILED.

HB 4101

Increases distance from certain parts of public places and places of employment within which person may not smoke, aerosolize or vaporize inhalant from 10 feet to 25 feet. Support/FAILED.

HB 4106

Allows person employed by health care facility to practice surgical technology if person is enrolled in or has completed specified apprenticeship program or obtained specified certification. Support/PASSED.

HB 4134

Coverage for labor and delivery provided at out of network hospital if due to diversion from in network hospital related to PHE. Neutral/PASSED



HB 4123

Requires Oregon Department of Administrative Services to provide grants for certain coordinated homeless response systems. Benton and Lincoln to receive \$1M each. Support/PASSED.

HB 4142

Expands crime of assault in the third degree to include intentionally or knowingly causing physical injury to person working in hospital while worker is performing official duties. Support/FAILED.

HB 4150

Requires Health Information Technology Oversight Council to convene stakeholders to explore options to accelerate, support and improve secure, statewide community information exchanges. Support/PASSED.



SB 1549

Requires Oregon Health Authority to issue temporary staffing agency license to qualified applicant. OHA stakeholder group to submit a report regarding rate setting. Oppose to Neutral/PASSED.

SB 1574

Includes specified documentation, when authorized by the victim, in the definition of "sexual assault forensic evidence kit" for the purpose of statutes regulating collection, testing and retention of kits. Support/PASSED.

SB 1529

Access to primary care and outpatient behavioral health coverage to 3 additional visits annually, allows same day visits without additional copayment. Neutral/PASSED



Investments

- Future Ready Oregon: \$200M workforce development in technology, health care, and manufacturing focused on priority populations.
- Behavioral Health Workforce and Rates: \$132M for providers directed to employee pay, recruitment, and retention. Additional allocations to increase residential rates, Medicaid fee for service rates, and CCO rates.
- Increase OHP postpartum coverage from 3 months to 12 months.
- **988 Hotline:** National implementation begins July 1st for a "911" like system for Behavioral Health emergencies. Provides \$5M for hotline, \$10M to counties, and \$2M to OHA.
- Behavioral Health Housing: Provides \$100M for counties to invest locally.
- OHSU 30-30-30: Provides \$45M to OHSU to increase graduates and graduate diversity by 30% by 2030.
- Housing and homelessness investment of \$400M: services, affordable housing, access to homeownership.
- \$300M education package for staffing and summer school.
- \$100M for climate resiliency for drought, extreme weather, and infrastructure needs.



OHP Redeterminations

- Oregon will have 14 months to complete 1.4 million redeterminations after the public health emergency ends (anticipate July).
- OHA will stager and prioritize member redeterminations. Members will have 90 days to respond and receive a 60-day notice prior to disenrollment.
- Provide increased flexibilities for CCOs for member outreach and engagement. Allow CCOs to provide member contact information to OHA.
- OHA/ODHS/DCBS create community and partner workgroup to develop outreach, enrollment assistance, and communication strategies.



OHP Redeterminations

- OHA to report to the legislature by May 31, 2022, outlining the process, timelines, risks, and use of funds.
- Approximately 300,000 CCO members will lose OHP coverage.
- OHA to report to the legislature by March 1, 2023, outlining CMS waivers or other approvals granted, implementation process, and timeline to completion.
- Seeking temporary enrollment extension for members 139%-200% Federal Poverty Level until bridge plan is operational.



Bridge Plan-Basic Health Plan

- CCO members between 139-200% of the federal poverty level, estimate is 55,000. Individual marketplace estimate is 30,000.
- Task Force first meeting by March 31st and proposal due September 1st.
- CCO based plan with potential to be offered on the exchange.
- Submit Waiver approval to create basic health plan using federal subsidies.
- Target approval date from CMS in Spring 2023.
- Create a permanent plan option.



Questions?

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