House Bill 2129

Ordered printed by the Speaker pursuant to House Rule 12.00A (5). Presession filed (at the request of Governor Theodore R. Kulongoski for Department of Human Services)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires Health Resources Commission to conduct comparative effectiveness research and to disseminate research findings. Requires Health Services Commission to develop or identify and to disseminate evidence-based health care guidelines. Requires Office for Oregon Health Policy and Research to coordinate work of both commissions. Requires public bodies and public purchasers of health care to pursue purchasing strategies that encourage adoption of research findings and evidence-based health care guidelines.

Appropriates moneys from General Fund to Department of Human Services for purposes of Act. Declares emergency, effective July 1, 2009.

2 Relating to health services; creating new provisions; amending ORS 442.584; appropriating money;

A BILL FOR AN ACT

3 and declaring an emergency.

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4 Be It Enacted by the People of the State of Oregon:

5 <u>SECTION 1.</u> (1) The Health Resources Commission established by ORS 442.580 shall con-6 duct comparative effectiveness research of new and existing health treatments, procedures 7 and services selected in accordance with ORS 442.583. The commission may conduct the re-8 search by comprehensive review of the comparative effectiveness research undertaken by 9 recognized state, national or international entities. The commission shall disseminate the 10 research findings to health care consumers, providers and third-party payers and to other 11 interested stakeholders.

(2) The Health Services Commission established by ORS 414.715 shall develop or identify
 and shall disseminate evidence-based health care guidelines for use by providers, consumers
 and purchasers of health care in Oregon.

(3) The Office for Oregon Health Policy and Research shall ensure that the work of the
 Health Services Commission and the Health Resources Commission under this section is
 aligned and coordinated.

(4) The Public Employees' Benefit Board, the Oregon Educators Benefit Board, the Department of Corrections and the Department of Human Services shall vigorously pursue
health care purchasing strategies that encourage the adoption of the research findings described in subsection (1) of this section and the evidence-based health care guidelines described in subsection (2) of this section.

(5) Public bodies, as defined in ORS 174.109, that purchase health care or provide health
 services directly are encouraged to adopt the research findings described in subsection (1)
 of this section and the evidence-based health care guidelines described in subsection (2) of
 this section.

27 SECTION 2. ORS 442.584 is amended to read:

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

HB 2129

442.584. (1) All applicants for a certificate of need for any of the technologies or services under 1 2 study by the Health Resources Commission shall provide the information specified in paragraphs (a) to (f) of this subsection. This information may be utilized by the commission in performing its func-3 tions under ORS 442.583 and section 1 of this 2009 Act. The information shall include: 4 (a) The estimated number of patients needing the service or procedure who are not currently $\mathbf{5}$ being served and who cannot be served by existing programs in the service area. 6 (b) The anticipated number of procedures to be performed per year for a five-year period com-7 mencing on the date the service is started or the technology is acquired. 8 9 (c) The anticipated number of patients to be served by the applicant, based on the incidence in the population to be served or the conditions for which the technology or service will be used. 10 (d) Clinical indications for ordering use of the technology or service, with appropriate references 11 12to relevant literature. 13 (e) An estimate of the treatment decisions likely to result from use of the technology or service. (f) A proposed method for collecting data on the patients served, costs engendered directly or 14

15 indirectly and the health outcomes resulting from use of the technology or service.

16 (2) An application shall be decided in accordance with the statutes and rules in effect at the 17 time of filing of a completed letter of intent for that application.

18 <u>SECTION 3.</u> There is appropriated to the Department of Human Services, for the 19 biennium beginning July 1, 2009, out of the General Fund, the amount of \$_____ for the 20 purpose of carrying out the provisions of section 1 of this 2009 Act.

21 <u>SECTION 4.</u> This 2009 Act being necessary for the immediate preservation of the public 22 peace, health and safety, an emergency is declared to exist, and this 2009 Act takes effect 23 July 1, 2009.

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