## FIRST, DO NO HARM! 103 Health, Public Policy & Business Organizations Oppose HB 3309A

DATE: SUBJECT:	June 10, 2013 103 health, policy, business organizations <b>Oppose HB 3309A</b>
DATE	
	Representatives Freeman and Gallegos
	Co-Chairs Sen. Alan Bates and Rep. Nancy Nathanson, Senators Winters and Steiner Hayward
то:	Human Services Subcommittee Ways & Means

Dear Committee Members:

We respectfully request that you *oppose* HB 3309A and choose to not advance it for a floor vote. We ask this as providers, advocates, Coordinated Care Organization participants (CCOs), community partners and consumers who are committed to transforming Oregon's health care system to a patient-centered and community-focused delivery paradigm.

HB 3309A does not just allow the removal of a CCO board member by two-thirds of fellow board members, but it also reduces the reimbursement rate to the entity represented by the removed board member to 58% of Medicare. The terminated entity would be barred from contracting with that CCO for five years. This proposed penalty has some current board members of CCO's reviewing the risks associated with board membership. If Board members drop off the CCO Boards and only continue their service contract with the CCO, it could limit the ability of the CCO board to fully represent the local community and put them in violation of ORS 414.625 (2)(o) which is required for certification of a CCO.

While the most current version of this legislation narrows the scope and duration of HB 3309, it does nothing to address its fundamental flaws. In fact, its language reveals intent to expand this detrimental policy statewide after one year. The following is a summary of our concerns with the bill.

- It undermines local control: The amended version is designed to target a single CCO which is experiencing governance challenges. Its passage would set a negative precedent of lawmakers inserting themselves into a local CCO conflict. The state's role should be to support CCOs in meeting the Triple Aim objectives of better quality, lower costs and better health for all -- not to act as arbiter in a parochial CCO governance dispute.
- The measure is duplicative: Oregon law already provides for State removal of directors of corporate boards (for-profit and non-profit), members of LLCs, and dissolution of partnerships in LLPs. CCO bylaws also have provisions to deal with problematic board members.
- HB 3309 violates other CCO laws: SB 568, which unanimously passed the House and Senate and was recently signed into law, extends for two years the CCO payment floor of 64% of Medicare for non-contracted providers. HB 3309 would reset that payment floor, lowering it by six points. SB 568 is a part of the overall Medicaid funding package that will bring in \$1.4 billion federal matching dollars to the 2013-15 biennium in order to balance the Medicaid budget.

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#### Collectively, we urge you to oppose HB 3309A

Central Oregon Health Council (COHC) Columbia Pacific CCO Columbia Gorge Health Council CCO Eastern Oregon CCO Health Share of Oregon CCO Jackson Care Connect CCO PacificSource Community Solutions CCO AARP Oregon Advantage Dental Albertina Kerr Asian Pacific American Network of Oregon Associated Oregon Industries (AOI) Care Oregon Causa **Central City Concern** Commissioner Tammy Baney, Deschutes, County, Chair COHC GOBHI Larry Mullins, Chairman, Intercommunity Health Network CCO Mid-Valley Health Care Advocates MODA Health (ODS) **Oregon Alliance for Children's Programs** Oregon Association of Hospitals and Health **Systems Oregon Business Association Oregon Center for Public Policy** OSPIRG **Oregon Prevention Education and Recovery** Association Oregon Primary Care Association **Oregon Law Center** Oregon Residential Providers Association PacificSource Health Plans Susan Ban, Executive Director, ShelterCare Urban League of Portland We Can Do Better Willamette Dental Adventist Health NW Adventist Medical Center

Asante Rogue Regional Medical Center Asante Three Rivers Medical Center Ashland Community Hospital **Bay Area Hospital** Blue Mountain Hospital Cedar Hills Hospital Columbia Memorial Hospital Coquille Valley Hospital Curry General Hospital Good Samaritan Regional Medical Center Good Shepherd Medical Center Grande Ronde Hospital Harney District Hospital Kaiser Permanente Northwest Kaiser Sunnyside Medical Center Kaiser Westside Medical Center Lake District Hospital Legacy Health Legacy Emanuel Medical Center Legacy Good Samaritan Medical Center Legacy Meridian Park Medical Center Legacy Mount Hood Medical Center Lower Umpgua Hospital McKenzie-Willamette Medical Center Mid-Columbia Medical Center PeaceHealth Oregon Region PeaceHealth Cottage Grove Community Hospital PeaceHealth Peace Harbor Hospital PeaceHealth Sacred Heart Medical Center Riverbend PeaceHealth Sacred Heart Medical Center University Pioneer Memorial Hospital - Heppner **Pioneer Memorial Hospital - Prineville** Providence Health & Services Oregon Region Providence Hood River Memorial Hospital Providence Medford Medical Center Providence Milwaukie Hospital

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**Providence Newberg Medical Center Providence Portland Medical Center Providence Seaside Hospital** Providence St. Vincent Medical Center Providence Willamette Falls Medical Center Saint Alphonsus Medical Center - Baker City Saint Alphonsus Medical Center - Ontario Salem Health Salem Hospital Samaritan Health Services Samaritan Albany General Hospital Samaritan Lebanon Community Hospital Samaritan North Lincoln Hospital Samaritan Pacific Communities Hospital Santiam Memorial Hospital Shriners Hospital - Portland Silverton Health **Sky Lakes Medical Center** Southern Coos Hospital & Health Center St. Anthony Hospital St. Charles Health System St. Charles Madras St. Charles Medical Center - Bend St. Charles Medical Center - Redmond Tillamook County General Hospital **Tuality Healthcare Tuality Health Alliance** Vibra Specialty Hospital Wallowa Memorial Hospital West Valley Hospital Willamette Valley Medical Center



# Editorial: Don't poison state's health care reform

#### Published: June 08. 2013 4:00AM PST

Oregon's sweeping changes to Medicaid don't stand a chance of succeeding if the Legislature doesn't stop bad bills such as House Bill 3309. Poison pill politics and health care reform do not mix.

Gov. John Kitzhaber's Medicaid overhaul was designed to improve health and help hold down costs of Medicaid. It has hospitals, doctor groups and other providers working together to find solutions by forming what are called "coordinated care organizations," or CCOs.

The state gives a CCO a fixed amount of money to provide Medicaid care for a region of the state. CCOs figure out how to make it work to meet targets.

When setting up a new system, there are going to be problems nobody expected. There was a process to settle disputes when a needed regional provider didn't want to participate in a CCO. But there's been a dispute in Salem that has highlighted that there may not be a good enough system in place to resolve disputes once a CCO is formed.

Salem Health, the parent company of the Salem Hospital, is a participant in the CCO that operates in Marion and Polk counties. Salem Health sued over reimbursement rates. It has also been unhappy about the balance of power on the board of the CCO.

We don't know who is right or wrong in the dispute, but it could undermine the ability of the CCO to operate and provide care.

Rep. Brian Clem, D-Salem, proposed House Bill 3309. It would enable CCOs in Marion and Polk counties to petition the state to throw a member of a CCO out after a two-thirds vote of the CCO board. A removed provider would be forbidden from joining any CCO for five years and would only be able to receive severely lowered reimbursements — 58 percent of the Medicare reimbursement rate.

That would be bad for the provider and could be very bad for patients, too. The bill also contains language suggesting this same method of resolving disputes should be considered for statewide expansion.

It's poison pill politics — similar to the sequester on the federal level. We all know how well that worked.

There's a hearing for the bill on Monday. In its current form, it doesn't deserve to get out of committee.