HB 2859-8 (LC 174) 3/18/13 (LHF/ps)

## PROPOSED AMENDMENTS TO HOUSE BILL 2859

1 On page 66 of the printed bill, after line 15, insert:

"SECTION 100. (1) The Oregon Health Authority shall establish a program to provide grants to coordinated care organizations to fund pilot projects designed to improve patient engagement in and patient accountability for a patient's own health, disease prevention and wellness activities. To receive a grant through the program, a coordinated care organization must submit an application to the authority, no later than January 1, 2014, that includes:

9 "(a) A proposal detailing the pilot project;

"(b) An explanation of how the organization intends to promote
 patient responsibility and improve health care outcomes for patients
 through the pilot project;

"(c) The incentives or penalties that the organization will utilize in
 the pilot project; and

"(d) The goals of the pilot project and how the success of the pilot
 project will be measured.

"(2) The Governor shall petition the federal government for waivers
 of any federal laws that prevent the implementation of the pilot
 projects.

"<u>SECTION 101.</u> (1) The Task Force on Individual Responsibility and
 Health Engagement is established, consisting of 11 members appointed
 as follows:

"(a) The President of the Senate shall appoint two members of the
Senate, one of whom is a Democrat and one of whom is a Republican.
"(b) The Speaker of the House of Representatives shall appoint two
members of the House of Representatives, one of whom is a Democrat
and one of whom is a Republican.

6 "(c) The Governor shall appoint seven persons, at least two of 7 whom are receiving medical assistance.

8 "(2) Under the direction of the Governor, the task force shall de-9 velop recommendations for legislation that will establish mechanisms 10 to meaningfully engage medical assistance recipients in their own 11 health, disease prevention and wellness activities, in addition to the 12 pilot projects authorized by section 1 of this 2013 Act. The task force 13 shall prioritize recommendations that:

14 "(a) Use incentives or disincentives;

"(b) Encourage partnerships between medical assistance recipients
 and their health care providers;

"(c) Are appropriate to the cultural and economic circumstances
 of medical assistance recipients;

"(d) Can be implemented rapidly upon receipt of any necessary
 federal approval; and

"(e) Represent best practices and are evidence-based with respect
 to medical assistance recipients.

"(3) The task force may receive testimony or reports from persons
 or agencies that are nationally recognized experts in the field, as appropriate.

"(4) A majority of the members of the task force constitutes a
 quorum for the transaction of business.

"(5) Official action by the task force requires the approval of a
 majority of the members of the task force.

30 "(6) The task force shall elect one of its members to serve as

1 chairperson.

"(7) If there is a vacancy for any cause, the appointing authority
 shall make an appointment to become immediately effective.

"(8) The task force shall meet at times and places specified by the
call of the chairperson or of a majority of the members of the task
force.

"(9) The task force may adopt rules necessary for the operation of
the task force.

9 "(10) The task force shall submit its recommendations, in the 10 manner provided in ORS 192.245, to the appropriate interim commit-11 tees of the Legislative Assembly no later than November 1, 2013.

"(11) The Oregon Health Authority shall provide staff support to the
 task force.

"(12) Members of the task force who are not members of the Legislative Assembly are not entitled to compensation, but may be reimbursed for actual and necessary travel and other expenses incurred by them in the performance of their official duties in the manner and amounts provided for in ORS 292.495.

"(13) All agencies of state government, as defined in ORS 174.111, are directed to assist the task force in the performance of its duties and, to the extent permitted by laws relating to confidentiality, to furnish such information and advice as the members of the task force consider necessary to perform their duties.

24 "SECTION 102. The costs of the pilot projects described in section 25 100 of this 2013 Act shall be paid from funds in the legislatively adopted 26 budget that are allocated to the Oregon Health Authority to provide 27 innovation grants to coordinated care organizations.

"<u>SECTION 103.</u> Section 101 of this 2013 Act is repealed on the date
 of the convening of the 2014 regular session of the Legislative Assem bly as specified in ORS 171.010.".

- 1 In line 16, delete "100" and insert "104".
- 2 In line 32, delete "101" and insert "105".
- 3 On page 67, line 1, delete "102" and insert "106".

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