Seventy-Eighth Oregon Legislative Assembly - 2015 Regular Session STAFF MEASURE SUMMARY House Committee On Health Care

MEASURE: SB 231 B CARRIER: Rep. Nosse

Fiscal:	Has minimal fiscal impact
Revenue:	No Revenue Impact
Action Date:	06/03/15
Action:	Do Pass As Amended And Be Printed Engrossed.
Meeting Dates:	05/18, 05/29, 06/03
Vote:	
	Yeas: 9 - Buehler, Clem, Greenlick, Hayden, Kennemer, Keny-Guyer, Lively, Nosse, Weidner
Prepared By:	Sandy Thiele-Cirka, Committee Administrator

WHAT THE MEASURE DOES:

Requires certain carriers, Public Employees' Benefit Board and Oregon Educators Benefit Board to report to the Department of Consumer and Business Services (DCBS) proportion of carrier's and board's total medical expenses allocated to primary care. Requires Oregon Health Authority (OHA) and DCBS to submit report to Legislative Assembly on the information provided by the carriers and the boards. Requires OHA to convene primary care payment reform collaborative to advise and assist authority in developing Primary Care Transformation Initiative. Specifies membership. Repeals reporting requirement December 31, 2018. Limits the anti-trust exemption to participants in the primary reform collaboration. Specifies actions that are subject to immunity. Specifies OHA's supervision requirements of the collaborative. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Need for broad-based participation across payers
- Need to assess the level of investment in Oregon's Patient-Centered Primary Care Home (PCPCH) program
- Current primary care initiative programs
- 550 Oregon clinics recognized as PCPCH
- Anti-trust concerns

EFFECT OF COMMITTEE AMENDMENT:

Repeals reporting requirement December 31, 2018. Limits the anti-trust exemption to participants in the primary reform collaboration. Specifies actions that are subject to immunity. Specifies OHA's supervision requirements of the collaborative.

BACKGROUND:

The Oregon Health Authority (OHA) assists with the implementation of Health System Transformation Initiatives with the goal of achieving Oregon's Triple Aim in health care, which is to improve population health, improve patient care and contain costs. Research confirms the value of primary care in improving quality and reducing costs (e.g., reducing unnecessary emergency room visits). The multi-payer Comprehensive Primary Care Initiative is a pilot program scheduled to end in 2016. This initiative aims to implement primary care based payments to support primary care infrastructure, reimburse for care coordination and encourage patient engagement. The Patient-Centered Primary Care Home (PCPCH) Program is a health transformation program. PCPCHs are health care clinics recognized for patient-centered care, with the goal of providing integrated, preventive care in community settings. Over 500 clinics have been recognized as PCPCHs. In 2013, OHA and the Oregon Health Leadership Council convened a series of meetings between a majority of payers in Oregon and other partners to develop consensus-based strategies to support PCPCHs. Representatives from participating organizations agreed to shared goals, objectives and key actions that support aligning payment with quality. Participating payers agreed to provide variable payments to those participating in the PCPCH program based on achieving outcomes which lead to the Triple Aim, set meaningful outcome metrics and review progress toward meeting metrics.