SB 1030 STAFF MEASURE SUMMARY

Senate Committee On Health Care

Action Date:	04/08/19
Action:	Do pass and requesting referral to Ways and Means.
Vote:	5-0-0
Yeas:	5 - Beyer, Fagan, Knopp, Linthicum, Monnes Anderson
Fiscal:	Fiscal impact issued
Revenue:	No revenue impact
Prepared By:	Brian Nieubuurt, LPRO Analyst
Meeting Dates:	4/3, 4/8

WHAT THE MEASURE DOES:

Establishes legislative intent that expenditures of the Oregon Health Authority (OHA) and coordinated care organizations (CCOs) in the medical assistance program, and the manner in which OHA establishes global budgets, be fully transparent and available to the public. Requires OHA make publicly available specified information about payments to and expenditures by CCOs, OHA, and the Department of Human Services. Requires OHA to make readily available and report annually to the Legislative Assembly CCO compensation, financial disbursements, audited financial statements, and tax information. Requires OHA to adopt, by rule, uniform data reporting requirements for CCOs. Requires OHA to create and publish annually a per capita cost report for each CCO beginning January 1, 2020. Specifies required elements of cost report. Defines "category of service," "eligibility category," "per capita costs," "related party," "risk accepting entity," "risk adjusted rate of growth," "risk score," and "total compensation." Sunsets on January 2, 2031 requirement that OHA reports include hospital payments. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Desire to have increased transparency on CCO financial information
- Difficulty in comparing CCO performance

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

With the passage of House Bill 3650 (2011) and Senate Bill 1580 (2012), the Legislative Assembly established the Oregon Integrated and Coordinated Health Care Delivery System in which newly established coordinated care organizations (CCOs) became responsible for coordinating the physical, behavioral, and oral health care for individuals enrolled in the state's Medicaid program, the Oregon Health Plan (OHP). Fifteen regional CCOs currently coordinate the provision of services for over 850,000 Oregonians enrolled in OHP. Oregon's Section 1115 Medicaid Demonstration waiver with the Centers for Medicare and Medicaid Services was renewed in 2017, continuing approval of the CCO delivery model through June 30, 2022.

Senate Bill 1030 requires OHA to make publicly available specified financial information about the administration of OHP and CCOs.