House Bill 2706

Sponsored by Representatives RAYFIELD, HAYDEN, Senator MONNES ANDERSON, Representatives KENY-GUYER, POST, STARK, Senator HANSELL; Representatives ALONSO LEON, BARKER, BYNUM, DOHERTY, EVANS, FAHEY, GOMBERG, GORSEK, GREENLICK, HELM, HERNANDEZ, HOLVEY, LIVELY, NEARMAN, NOSSE, PILUSO, SANCHEZ, SCHOUTEN, SPRENGER, WILDE, WILLIAMSON, WILSON, WITT, Senators BEYER, BURDICK, DEMBROW, FREDERICK, GELSER, MANNING JR, PROZANSKI, ROBLAN, STEINER HAYWARD (Presession filed.)

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**.

Establishes COFA Dental Program in Oregon Health Authority to provide dental care to lowincome citizens of Pacific Islands in Compact of Free Association who reside in Oregon and lack access to affordable dental coverage. Specifies eligibility requirements for program and duties of authority in administering program.

A BILL FOR AN ACT

2 Relating to dental care for Pacific Islanders legally residing in Oregon under the Compact of Free

3 Association; creating new provisions; and amending ORS 413.032 and 735.608.

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

5 <u>SECTION 1.</u> (1) As used in this section:

6 (a) "Affordable dental coverage" means dental insurance available to an individual for

which the average monthly cost for premiums and any required cost sharing is less than the
average per capita monthly payment by the Oregon Health Authority and coordinated care
organizations to dental care organizations for medical assistance recipients.

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(b) "COFA citizen" has the meaning given that term in ORS 735.604.

11 (c) "Dental care organization" means a prepaid managed care health services organiza-12 tion, as defined in ORS 414.025, that provides dental care to members of a coordinated care

13 organization.

(d) "Income" means the modified adjusted gross income that is attributed to an individual
 in determining the individual's eligibility for the medical assistance program.

(2) The COFA Dental Program is established in the Oregon Health Authority and shall
 be administered in collaboration with the Department of Consumer and Business Services.
 The purpose of the program is to provide oral health care to low-income citizens of the island
 nations in the Compact of Free Association who are residing in Oregon.

(3) The authority shall contract with dental care organizations throughout this state and
 with individual oral health care providers in areas of this state that are not served by dental
 care organizations to provide oral health care to COFA citizens enrolled in the COFA Dental
 Program.

(4) Enrollees in the COFA Dental Program shall receive the types and extent of oral
 health care services that the authority determines will be provided to medical assistance
 recipients in accordance with ORS 414.065, without any corresponding copayments, deduct ibles or cost sharing required.

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1 (5) An individual is eligible for the COFA Dental Program if the individual does not have 2 access to affordable dental coverage, as prescribed by the authority by rule, and:

3 (a) The department has determined that the individual meets the criteria in ORS 735.608

4 (1)(a), (b) and (d); or

5 (b) In the case of an individual who is not applying for or receiving financial assistance 6 through the COFA Premium Assistance Program established by ORS 735.601 to 735.617, the 7 individual:

8 (A) Is a resident of Oregon;

9 (B) Is a COFA citizen; and

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(C) Has income that is less than 138 percent of the federal poverty guidelines.

(6) The authority shall prescribe by rule a simple application process for the COFA 11 12 Dental Program. The authority shall provide culturally and linguistically appropriate assistance, in person and by telephone, to applicants for and enrollees in the program. The appli-13 cation process, forms and notices used in the COFA Dental Program must conform to the 14 15 guidance adopted by the United States Department of Health and Human Services, in accordance with Title VI of the Civil Rights Act of 1964, regarding the prohibition against na-16 tional origin discrimination affecting persons with limited English proficiency in federally 17 18 funded programs.

(7)(a) The authority shall accept as verification of eligibility the attestation of an applicant for or enrollee in the COFA Dental Program that the applicant or enrollee meets the requirements of subsection (5)(b) of this section. The authority may not require an applicant or enrollee to provide documentation of eligibility except as provided in paragraph (b) of this subsection.

(b) The authority may require an applicant or enrollee to provide documentation of eligibility only if the authority receives reliable information that, if true, would preclude eligibility for the program.

(8) The authority shall provide to any individual who meets the criteria in subsection
(5)(b) of this section information about and, if requested, a referral to the COFA Premium
Assistance Program.

(9) The authority shall collaborate with the department in activities described in ORS
 735.608 (4)(e) to facilitate applications for and enrollment in the COFA Dental Program.

(10) The authority may not disclose personally identifying information about applicants
 for or enrollees in the COFA Dental Program except to the extent necessary to conduct
 outreach under subsection (9) of this section or to comply with federal or state laws.

35 SECTION 2. ORS 413.032 is amended to read:

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36 413.032. (1) The Oregon Health Authority is established. The authority shall:

37 (a) Carry out policies adopted by the Oregon Health Policy Board;

38 (b) Administer the Oregon Integrated and Coordinated Health Care Delivery System established

39 in ORS 414.620 and the COFA Dental Program established in section 1 of this 2019 Act;

(c) Administer the Oregon Prescription Drug Program;

(d) Develop the policies for and the provision of publicly funded medical care and medical as sistance in this state;

43 (e) Develop the policies for and the provision of mental health treatment and treatment of ad-44 dictions;

45 (f) Assess, promote and protect the health of the public as specified by state and federal law;

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(g) Provide regular reports to the board with respect to the performance of health services 1 2 contractors serving recipients of medical assistance, including reports of trends in health services and enrollee satisfaction; 3 (h) Guide and support, with the authorization of the board, community-centered health initiatives 4 designed to address critical risk factors, especially those that contribute to chronic disease; 5 (i) Be the state Medicaid agency for the administration of funds from Titles XIX and XXI of the 6 Social Security Act and administer medical assistance under ORS chapter 414; 7 (j) In consultation with the Director of the Department of Consumer and Business Services, pe-8 9 riodically review and recommend standards and methodologies to the Legislative Assembly for: 10 (A) Review of administrative expenses of health insurers; 11 (B) Approval of rates; and 12(C) Enforcement of rating rules adopted by the Department of Consumer and Business Services; 13 (k) Structure reimbursement rates for providers that serve recipients of medical assistance to reward comprehensive management of diseases, quality outcomes and the efficient use of resources 14 15 and to promote cost-effective procedures, services and programs including, without limitation, preventive health, dental and primary care services, web-based office visits, telephone consultations and 16 17 telemedicine consultations; 18 (L) Guide and support community three-share agreements in which an employer, state or local government and an individual all contribute a portion of a premium for a community-centered health 19 20 initiative or for insurance coverage; (m) Develop, in consultation with the Department of Consumer and Business Services, one or 2122more products designed to provide more affordable options for the small group market; 23(n) Implement policies and programs to expand the skilled, diverse workforce as described in ORS 414.018 (4); and 24 (o) Implement a process for collecting the health outcome and quality measure data identified 25by the Health Plan Quality Metrics Committee and report the data to the Oregon Health Policy 2627Board. (2) The Oregon Health Authority is authorized to: 28(a) Create an all-claims, all-payer database to collect health care data and monitor and evaluate 2930 health care reform in Oregon and to provide comparative cost and quality information to consumers, 31 providers and purchasers of health care about Oregon's health care systems and health plan net-32works in order to provide comparative information to consumers. (b) Develop uniform contracting standards for the purchase of health care, including the fol-33 34 lowing: 35(A) Uniform quality standards and performance measures; (B) Evidence-based guidelines for major chronic disease management and health care services 36 37 with unexplained variations in frequency or cost; (C) Evidence-based effectiveness guidelines for select new technologies and medical equipment; 38 and 39 40 (D) A statewide drug formulary that may be used by publicly funded health benefit plans. (3) The enumeration of duties, functions and powers in this section is not intended to be exclu-41 sive nor to limit the duties, functions and powers imposed on or vested in the Oregon Health Au-42 thority by ORS 413.006 to 413.042 and 741.340 or by other statutes. 43

44 **SECTION 3.** ORS 735.608 is amended to read:

45 735.608. (1) An individual is eligible for the COFA Premium Assistance Program if the individual:

(a) Is a resident; 1 2 (b) Is a COFA citizen; (c) Enrolls in a qualified health plan; 3 (d) Has income that is less than 138 percent of the federal poverty guidelines; and 4 (e) Qualifies for an advance premium tax credit toward the cost of the individual's qualified 5 health plan. 6 (2) Within the limits of moneys in the COFA Premium Assistance Program Fund, the Department 7 of Consumer and Business Services shall pay the premium cost for a qualified health plan and the 8 9 out-of-pocket costs for the coverage provided by the plan for an individual who meets the criteria in subsection (1) of this section. 10 11 (3) The department may disenroll a participant from the program if the participant: 12(a) No longer meets the eligibility criteria specified in subsection (1) of this section; 13 (b) Fails, without good cause, to comply with procedural or documentation requirements established by the department in accordance with subsection (4) of this section; 14 15 (c) Fails, without good cause, to notify the department of a change of address in a timely manner; 16 (d) Withdraws the participant's application or requests termination of coverage; or 17 18 (e) Performs an act, practice or omission that constitutes fraud and, as a result, an insurer rescinds the participant's policy for the qualified health plan. 19 20 (4) The department shall establish: 21(a) Application, enrollment and renewal processes for the COFA Premium Assistance Program; 22(b) The qualified health plans that are eligible for reimbursement under the program; 23(c) Procedural requirements for continued participation in the program, including participant documentation requirements that are necessary for the department to administer the program; 24 (d) Open enrollment periods and special enrollment periods consistent with the enrollment peri-25ods for the health insurance exchange; and 2627(e) A comprehensive community education and outreach campaign, working with stakeholder and community organizations, to facilitate applications for, and enrollment in, the COFA Premium 28Assistance Program and the COFA Dental Program established in section 1 of this 2019 Act. 2930 SECTION 4. In addition to and not in lieu of any other appropriation, there is appropri-31 ated to the Oregon Health Authority, for the biennium beginning July 1, 2019, out of the General Fund, the amount of \$_____, which may be expended for carrying out section 1 of 32this 2019 Act. 33

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