

# Senate Bill 888

Sponsored by COMMITTEE ON HEALTH CARE

## 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**.

Removes, for health care facilities that receive preponderance of revenue from associated comprehensive group-practice prepayment health care service plans, exemption from financial data reporting required by Oregon Health Authority for other facilities.

Declares emergency, effective on passage.

## A BILL FOR AN ACT

1  
2 Relating to health care; amending ORS 442.425; and declaring an emergency.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1.** ORS 442.425 is amended to read:

5 442.425. (1) The Oregon Health Authority by rule may specify one or more uniform systems of  
6 financial reporting necessary to meet the requirements of ORS 442.400 to 442.463. Such systems shall  
7 include such cost allocation methods as may be prescribed and such records and reports of revenues,  
8 expenses, other income and other outlays, assets and liabilities, and units of service as may be pre-  
9 scribed. Each facility under the authority's jurisdiction shall adopt such systems for its fiscal period  
10 starting on or after the effective date of such system and shall make the required reports on such  
11 forms as may be required by the authority. The authority may extend the period by which compli-  
12 ance is required upon timely application and for good cause. Filings of such records and reports  
13 shall be made at such times as may be reasonably required by the authority.

14 (2) Existing systems of reporting used by health care facilities shall be given due consideration  
15 by the authority in carrying out the duty of specifying the systems of reporting required by ORS  
16 442.400 to 442.463. The authority insofar as reasonably possible shall adopt reporting systems and  
17 requirements that will not unreasonably increase the administrative costs of the facility.

18 (3) The authority may allow and provide for modifications in the reporting systems in order to  
19 correctly reflect differences in the scope or type of services and financial structure between the  
20 various categories, sizes or types of health care facilities and in a manner consistent with the pur-  
21 poses of ORS 442.400 to 442.463.

22 (4) The authority may establish specific annual reporting provisions for facilities that receive a  
23 preponderance of their revenue from associated comprehensive group-practice prepayment health  
24 care service plans. [*Notwithstanding any other provisions of ORS 442.400 to 442.463, such facilities*  
25 *shall be authorized to utilize established accounting systems and to report costs and revenues in a*  
26 *manner consistent with the operating principles of such plans and with generally accepted accounting*  
27 *principles. When such facilities are operated as units of a coordinated group of health facilities under*  
28 *common ownership, the facilities shall be authorized to report as a group rather than as individual*  
29 *institutions, and as a group shall submit a consolidated balance sheet, income and expense statement*  
30 *and statement of source and application of funds for such group of health facilities.*]

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1        **SECTION 2.** This 2019 Act being necessary for the immediate preservation of the public  
2        peace, health and safety, an emergency is declared to exist, and this 2019 Act takes effect  
3        on its passage.  
4

---