SB 526-1 (LC 1662) 3/5/19 (LHF/ps)

Requested by Senator STEINER HAYWARD

## PROPOSED AMENDMENTS TO SENATE BILL 526

In line 2 of the printed bill, after "and" delete the rest of the line and insert "prescribing an effective date.".

3 Delete lines 4 through 11 and insert:

"<u>SECTION 1.</u> (1) As used in this section, 'community' means a geographic region, county, tribe or other group of individuals living in
proximity as defined by the Oregon Health Authority by rule.

"(2) The authority shall design, implement and maintain a voluntary statewide program to provide universal newborn nurse home visiting services to all families with newborns residing in this state to support healthy child development and strengthen families. The authority shall design the universal newborn nurse home visiting program to be flexible so as to meet the needs of the communities where the program operates.

"(3) In designing the program described in subsection (2) of this section, the authority shall consult, coordinate and collaborate, as necessary, with insurers that offer health benefit plans in this state, hospitals, local public health authorities, the Early Learning Division, existing early childhood home visiting programs, community-based organizations and social service providers.

20 "(4) The program must provide nurse home visiting services that 21 are: "(a) Based on criteria established by the United States Department
 of Health and Human Services for an evidence-based early childhood
 home visiting service delivery model;

"(b) Provided by registered nurses licensed in this state to families
caring for newborns up to the age of six months, including foster and
adoptive newborns;

7 "(c) Provided in the family's home; and

8 "(d) Aimed at improving outcomes in one or more of the following
9 domains:

10 "(A) Child health;

11 "(B) Child development and school readiness;

12 "(C) Family economic self-sufficiency;

13 "(D) Maternal health;

14 "(E) Positive parenting;

15 "(F) Reducing child mistreatment;

16 "(G) Reducing juvenile delinquency;

17 "(H) Reducing family violence; or

18 **"(I) Reducing crime.** 

19 "(5) The services provided in the program must:

20 "(a) Be voluntary and carry no negative consequences for a family 21 that declines to participate;

22 "(b) Be offered in every community in this state;

"(c) Include an evidence-based assessment of the physical, social
 and emotional factors affecting the family;

"(d) Be offered to all families with newborns residing in the com munity where the program operates;

"(e) Include at least one visit during a newborn's first three months
of life with the opportunity for the family to choose up to three additional visits;

30 "(f) Include a follow-up visit no later than three months after the

1 last visit; and

"(g) Provide information and referrals to address each family's
identified needs.

4 "(6) The authority shall collect and analyze data generated by the 5 program to assess the effectiveness of the program in meeting the 6 aims described in subsection (4)(d) of this section and shall work with 7 other state agencies to develop protocols for sharing data, including 8 the timely sharing of data with primary care providers of care to the 9 families with newborns receiving the services.

"(7) In collaboration with the Department of Consumer and Business Services, the authority shall adopt by rule, consistent with the provisions of this section, criteria for universal newborn nurse home visiting services that must be covered by health benefit plans in accordance with section 3 of this 2019 Act.

"<u>SECTION 2.</u> Section 3 of this 2019 Act is added to and made a part
 of the Insurance Code.

"<u>SECTION 3.</u> (1) As used in this section, 'carrier', 'enrollee' and
'health benefit plan' have the meanings given those terms in ORS
743B.005.

"(2) A health benefit plan offered in this state must reimburse the
cost of universal newborn nurse home visiting services as prescribed
by the Oregon Health Authority by rule under section 1 (7) of this 2019
Act.

24 "(3) The coverage must be provided without any cost-sharing,
 25 coinsurance or deductible applicable to the services.

"(4) Carriers must offer the services in their health benefit plans
but enrollees are not required to receive the services as a condition
of coverage and may not be penalized or in any way discouraged from
declining the services.

30 "(5) A carrier must notify an enrollee about the services whenever

1 an enrollee adds a newborn to coverage.

"(6) A carrier may use in-network providers or may contract with
 local public health authorities to provide the services.

"(7) This section does not require a carrier to reimburse the cost
of the services in any specific manner. The services may be reimbursed
using:

7 "(a) A value-based payment methodology;

8 "(b) A claim invoicing process;

9 "(c) Capitated payments;

"(d) A payment methodology that takes into account the need for
 a community-based entity providing the services to expand its capacity
 to provide the services and address health disparities; or

"(e) Any other methodology agreed to by the carrier and the pro vider of the services.

"(8) Carriers shall report to the authority, in the form and manner
 prescribed by the authority, data regarding claims submitted for ser vices covered under this section to monitor the provision of the ser vices.

"<u>SECTION 4.</u> The Department of Consumer and Business Services
 may request a waiver for state innovation under 42 U.S.C. 18052 to
 obtain federal financial participation in the cost of services provided
 under section 3 of this 2019 Act.

"SECTION 5. In addition to and not in lieu of any other appropriation, there is appropriated 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 this
2019 Act.

"<u>SECTION 6.</u> This 2019 Act takes effect on the 91st day after the
 date on which the 2019 regular session of the Eightieth Legislative
 Assembly adjourns sine die.".

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