

Requested by Representative SALINAS

**PROPOSED AMENDMENTS TO
HOUSE BILL 3076**

1 On page 1 of the printed bill, line 2, after “442.200” insert “, 442.205”.

2 In line 25, after “of” insert “at least”.

3 On page 2, delete lines 5 through 9.

4 In line 10, delete “(d)” and insert “(c)”.

5 After line 28, insert:

6 “(6) This section does not apply to any campus of the Oregon State Hos-
7 pital, a hospital of the United States Department of Veterans Affairs or any
8 other hospital operated by the state or the federal government.”.

9 In line 29, delete “(6)” and insert “(7)”.

10 On page 3, delete lines 25 through 29.

11 In line 30, delete “strategy for meeting the health care needs. The
12 hospital” and insert:

13 “(7) This section does not apply to any campus of the Oregon State Hos-
14 pital, a hospital of the United States Department of Veterans Affairs or any
15 other hospital operated by the state or the federal government.

16 “(8) Violation of this section is an unlawful collection practice under ORS
17 646.639.

18 **“SECTION 3. (1) The Oregon Health Authority shall work with
19 representatives of hospital systems in this state to:**

20 **“(a) Develop best practices and reporting for financial assistance
21 policies and discounts and for hospital billing and collections, in addi-**

1 tion to the provisions of sections 1 and 2 of this 2019 Act and ORS
2 442.205;

3 “(b) Develop one or more methods for evaluating the impact of
4 hospital community benefit programs on communities, considering the
5 success of different approaches used by hospitals in improving the
6 health of their communities; and

7 “(c) Evaluate the impact of hospital community benefit programs
8 on access to health care, health outcomes, health disparities and
9 health equity and how the hospitals’ investments in community bene-
10 fits align with community health improvement plans.

11 “(2) No later than January 2, 2021, the authority shall report, to the
12 interim committees of the Legislative Assembly related to health, the
13 results of the study and recommendations, if any, based on the work
14 with hospital systems described in subsection (1) of this section.

15 “SECTION 4. (1) As used in this section, “hospital” has the meaning
16 given that term in ORS 442.015.

17 “(2) In conducting a community health needs assessment and developing
18 a three-year strategy in accordance with section 501(r)(3) of the Internal
19 Revenue Code, a”.

20 In line 42, delete “; and” and insert a period and delete lines 43 through
21 45.

22 On page 4, delete lines 1 through 39 and insert:

23 “SECTION 5. (1) As used in this section:

24 “(a) ‘Affiliated clinic’ means a health care facility, as defined in
25 ORS 442.015, that provides outpatient health services and is operated
26 under the common control or ownership of a hospital or health sys-
27 tem.

28 “(b) ‘Charity care’ has the meaning given that term in ORS 442.200.

29 “(c) ‘Community benefit’ has the meaning given that term in ORS
30 442.200.

1 “(d) ‘Days cash on hand’ means the figure derived by dividing a
2 hospital or hospital system’s available cash by the difference of its
3 operating expenses minus its noncash expenses and multiplying the
4 quotient by 365.

5 “(e) ‘Hospital’ has the meaning given that term in ORS 442.015.

6 “(f) ‘Hospital system’ has the meaning given that term in section
7 1 of this 2019 Act.

8 “(g) ‘Social determinants of health’ has the meaning given that
9 term in ORS 442.200.

10 “(2) Every two years, the Oregon Health Authority, in consultation
11 with hospital systems and with opportunities for public comment,
12 shall establish qualitative and quantitative spending floors for each
13 hospital based on:

14 “(a) Historical expenditures on community benefits both before and
15 after the implementation of the Patient Protection and Affordable
16 Care Act (P.L. 111-148);

17 “(b) Existing community needs identified in community health
18 needs assessments under section 4 of this 2019 Act and community
19 health assessments under ORS 414.627;

20 “(c) Strategies developed by hospitals to address community health
21 needs under section 3 of this 2019 Act and community health im-
22 provement plans under ORS 414.627;

23 “(d) The need for workforce development in the health care sector;

24 “(e) The hospital or hospital system’s income margins, both oper-
25 ating and nonoperating, and reserves;

26 “(f) Charity care spending in the previous two-year period;

27 “(g) Spending on the social determinants of health;

28 “(h) Public comments; and

29 “(i) Consultation with or advice from a health economist or other
30 individual with expertise in the economics of health care.

1 **“(3) A hospital or hospital system that fails to meet the community**
2 **benefit spending floor established under subsection (2) of this section**
3 **during a 12-month period shall spend, of the amount equal to the dif-**
4 **ference between its community benefit spending and the community**
5 **benefit spending floor, the maximum amount possible while retaining**
6 **sufficient days cash on hand to maintain the hospital or hospital**
7 **system’s current credit rating, in improving community health, ad-**
8 **dressing health disparities or providing charity care.**

9 **“(4) This section does not apply to any campus of the Oregon State**
10 **Hospital, a hospital of the United States Department of Veterans Af-**
11 **fairs or any other hospital operated by the state or the federal gov-**
12 **ernment.”.**

13 In line 40, delete “5” and insert “6”.

14 On page 5, delete line 6.

15 In line 7, delete “(d)” and insert “(c)”.

16 In line 9, delete “(e)” and insert “(d)”.

17 After line 9, insert:

18 “(3) The information reported under subsection (2) of this section must
19 be reported individually for each hospital and reported in the aggregate for
20 clinics that are majority owned by a hospital system or operating under the
21 brand of a hospital system.”.

22 In line 10, delete “(3)” and insert “(4)”.

23 In line 12, delete “(4)” and insert “(5)”.

24 After line 14, insert:

25 “(6) This section does not apply to any campus of the Oregon State Hos-
26 pital, a hospital of the United States Department of Veterans Affairs or any
27 other hospital operated by the state or the federal government.”.

28 In line 15, delete “6” and insert “7” and delete “7” and insert “8”.

29 In line 16, delete “7” and insert “8”.

30 In line 20, delete “8” and insert “9”.

1 In line 26, delete “3” and insert “4”.

2 On page 7, line 10, delete “9” and insert “10”.

3 In line 16, after “disparities” insert “or the social determinants of
4 health”.

5 After line 24, insert:

6 “(3) ‘Social determinants of health’ means the social, economic and envi-
7 ronmental conditions in which individuals are born and live.

8 **“SECTION 11.** ORS 442.205 is amended to read:

9 “442.205. (1) The Oregon Health Authority shall [*by rule*] adopt a cost-
10 based community benefit reporting system [*for hospitals operating in Oregon*
11 *that is consistent with established national standards for hospital reporting*
12 *of community benefits*].

13 “(2) Within 90 days of filing a Medicare cost report, a hospital must
14 submit a [*community benefit*] report to the authority of the community ben-
15 efits provided by the hospital, on a form prescribed by the authority. **The**
16 **form must include but is not limited to:**

17 **“(a) A description of the community benefits provided by the hos-**
18 **pital and affiliated clinics, identifying the specific activities that im-**
19 **prove the social determinants of health in the community served by**
20 **the hospital or affiliated clinics; and**

21 **“(b) The expenditures on community benefits by the hospital and**
22 **affiliated clinics, including expenditures on each of the specified ac-**
23 **tivities that improve the social determinants of health in the commu-**
24 **nity served by the hospital or affiliated clinics.**

25 “(3) The authority shall produce an annual report of the information
26 provided under subsections (1) and (2) of this section. The report shall be
27 submitted to the Governor, the President of the Senate and the Speaker of
28 the House of Representatives. The report shall be presented to the Legisla-
29 tive Assembly during each odd-numbered year regular session and shall be
30 made available to the public.

