HB 3108 STAFF MEASURE SUMMARY

House Committee On Health Care

Prepared By: Brian Nieubuurt, LPRO Analyst **Meeting Dates:** 2/11

WHAT THE MEASURE DOES:

Defines "primary care." Requires individual and group health insurance policies, health care service contractors, multiple employer welfare arrangements, and state medical assistance program (state-regulated health plans) to provide reimbursement for at least three primary care visits annually. Prohibits imposition of copayments, coinsurance or deductibles on primary care visits. Prohibits state-regulated health plans from denying coverage for services provided by behavioral health home and patient centered primary care home because services were provided on same day or in same facility. Prohibits imposition of prior authorization requirements or more than single copayment for services provided by behavioral health home and patient centered primary care home on same day. Requires Oregon Health Authority and coordinated care organizations to assign medical assistance recipients a primary care provider if recipient has not selected a primary care provider by 90th day after enrollment in medical assistance.

REVENUE: May have revenue impact, but no statement yet issued.

FISCAL: May have fiscal impact, but no statement yet issued.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

In January 2020, the House Committee on Health Care created the Universal Access to Primary Care Work Group (UAPC Work Group) and tasked it with developing proposals to move Oregon towards universal access to comprehensive primary care, including identifying policy options to ensure affordable primary care services are accessible to all residents; identifying primary care models that provide access to comprehensive primary care for the communities they serve (e.g., behavioral and oral health); and determining factors that influence the potential implementation of a system of universal primary care. The UAPC Work Group consisted of twenty members representing a wide-ranging set of primary care stakeholders, including primary care practitioners, behavioral health specialists, specialty providers, health system representatives, coordinated care organizations (CCOs), payers, and a patient advocate. In November 2020, the UAPC Work Group issued a report outlining ten policy proposals in four key areas: increasing access to, and affordability of, comprehensive primary care; increasing support for, and participation in, Oregon's patient-centered primary care home model; identifying and removing barriers to use of telehealth; and advancing alternative payment models across payers.

House Bill 3108 implements the Universal Access to Primary Care Work Group's recommendations for increasing access to, and affordability of, comprehensive primary care by requiring cost free coverage of annual primary care visits and prohibiting imposition of coverage requirements that restrict access to primary care.