

**FISCAL IMPACT OF PROPOSED LEGISLATION**

**Measure: HB 3045 - 3**

81st Oregon Legislative Assembly – 2021 Regular Session  
Legislative Fiscal Office

*Only Impacts on Original or Engrossed  
Versions are Considered Official*

Prepared by: Haylee Morse-Miller  
Reviewed by: Tom MacDonald  
Date: March 7, 2021

**Measure Description:**

Extends sunset on requirement that Oregon Health Authority reimburse cost of mental health drugs in medical assistance program.

**Government Unit(s) Affected:**

Oregon Health Authority (OHA)

**Summary of Fiscal Impact:**

Costs related to the measure are indeterminate at this time - See explanatory analysis.

**Analysis:**

HB 3045 changes the sunset date for Section 3, chapter 544, Oregon Laws 2019, from January 2, 2022 to January 2, 2026. This section requires the Oregon Health Authority (OHA) to reimburse the cost of a mental health drug that has been prescribed to a medical assistance recipient, if federal financial participation in the cost is available. "Mental health drug" is defined as a type of legend drug defined by OHA by rule that includes but is not limited to therapeutic class 7 ataractics - tranquilizers; and therapeutic class 11 psychostimulants- antidepressants.

The - 3 amendment to HB 3045 specifies that OHA may not require prior authorization for any mental health drug prescribed for a medical assistance recipient, if the claims history available to OHA shows that the recipient has been in a course of treatment with the drug during the preceding year; or if a prescription for a mental health drug specifies "dispense as written" or similar. The requirements included in the - 3 amendment take effect January 2, 2026.

If this measure were to not pass, OHA would anticipate potential savings of \$3.6 to \$5.7 million total funds over the next four years, by moving forward the start date for a mental health preferred drug list.

The costs under the - 3 amendment are indeterminate, but likely minimal. There may be some minimal costs for OHA in the latter part of the 2023-25 biennium related to modifications to the Medicaid Management Information System to allow a bypass of prior authorization requirements. Any additional fiscal impact to OHA related to the prohibition on requirement prior authorization will also likely be minimal and not occur until the 2025-27 biennium, which is beyond the two biennia scope of this fiscal impact statement.