COALITION FOR A HEALTHY OREGON

HB 3353

CCOs make community investments that address Social Determinants of Health (SDOH) and Health Equity. The OHA then looks at those SDOH related community investments and decides what specific investments qualify for Health Related Services (HRS). Historically, some of these investments are not accepted as HRS, but rather, "administrative expenses," and thus, these are not captured in the rate of growth for future rate setting cycles. This erodes CCOs' ability in forward years to sustainably fund community programs. Some of these decisions are tied to what CMS defines as HRS, meaning this is more than just an issue at the state level.

HB 3353 REQUIRES THE OHA TO INCLUDE IN ITS 1115 WAIVER RENEWAL REQUEST:

▶ Up to 3% of CCOs' budgets can be counted as medical spend if they are: investments improving health equity, community-based SDOH programs, or improve the overall health of the community; or enhanced payments to providers who can demonstrate that they can address the culturally and linguistically appropriate services needed in their community, or that the increased funding can improve services to the community as a whole.

▶ To ensure the equitable distribution or redistributing of resources and power, at least 30% of these funds will be dedicated to further the goals of the CCOs Health Equity Plan and Community Health Improvement Plan as approved by the Community Advisory Councils.

▶ At least 20% of these funds will be used to address needs in Behavioral Health.

▶ Create an oversight committee (modeled on the Metrics and Scoring Committee) within the OHA Office of Equity and Inclusion to review the outcomes of all investments in Health Equity, SDOH, and provider investments. This Committee would be charged with recommending best practices and writing the criteria for investments that qualify for this (which would also have to be approved by CMS).

▶ Change these fundings to be considered medical spending, which will create sustainable funding for programs year over year.

PLEASE VOTE YES ON HB 3353