HB 4034 -2 STAFF MEASURE SUMMARY

House Committee On Health Care

Prepared By:Brian Nieubuurt, LPRO AnalystMeeting Dates:2/9, 2/11

WHAT THE MEASURE DOES:

Deletes requirement that coordinated care organization collect race, ethnicity, preferred spoken and written languages, disability status (REALD), sexual orientation and gender identity (SOGI) data from members and report to Oregon Health Authority (OHA). Clarifies OHA's permitted use and release of data. Allows pharmacy intern to transfer drug containing pseudoephedrine or ephedrine to person 18 years of age or older without prescription. Extends sunset on provisions regulating sharing of COVID-19 data to one year after date on which state of emergency declared by Governor on March 8, 2020 and any extension of state of emergency, is no longer in effect. Requires reporting of information regarding dispensing of biological products until January 1, 2026. Authorizes OHA to implement reproductive health services and education programs and provide funding for reproductive health services and education. Allows physicians and physician assistants to use telemedicine. Defines "telemedicine." Prohibits Oregon Medical Board and State Board of Pharmacy from establishing standards for telemedicine that are stricter than standards for in-person delivery of health care services. Declares emergency, effective on passage.

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:

-2 Deletes REALD data collection and use provisions. Defines "synchronous" and "asynchronous." Clarifies applicability of telehealth provision to Board of Pharmacy licensees. Clarifies school-based health center provisions from HB 2591 (2021), including allowing OHA to grant up to 4 grants for mobile school-linked health centers. Allows private entity to swipe driver license or identification card to submit information to electronic system for purpose of transferring drug containing pseudoephedrine.

BACKGROUND:

The Oregon Health Authority administers many of the state's health programs, including Public Health and the Oregon Health Plan, the state's Medicaid program.

House Bill 4212 (2020) directed the Oregon Health Authority (OHA) to adopt rules requiring health care providers to collect and report to OHA data on Race, Ethnicity, Language and Disability (REALD) during all health care encounters for reportable COVID-19 conditions.

House Bill 3391 (2017), also known as the Reproductive Health Equity Act (RHEA), provided expanded coverage for some Oregonians to access free reproductive health services, especially those who, in the past, may have not been eligible for coverage of these services.

Telemedicine involves the two-way, real time interactive communication between the patient, and the physician or practitioner at the distant site. During the COVID-19 pandemic, telemedicine has allowed people to receive medical care while still socially distancing. Consequently, federal and states laws have been updated to allow for expanded use and coverage of telemedicine.

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House Bill 4034 updates and clarifies a number of laws, including expressly allowing implementation of the Reproductive Health Equity Act and laws related to deliver of health care during the COVID-19 pandemic.