

FISCAL IMPACT OF PROPOSED LEGISLATION

Measure: HB 4035 - 1

81st Oregon Legislative Assembly – 2022 Regular Session
Legislative Fiscal Office

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

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Measure Description:

Requires Oregon Health Authority and Department of Human Services to collaborate on redetermination process.

Government Unit(s) Affected:

Department of Human Services (DHS), Legislative Policy and Research Office (LPRO), Task Force/Committee/Workgroup, Oregon Health Authority (OHA), Emergency Board

Analysis:

This fiscal impact statement is for the purpose of transmitting the measure from the House Committee on Health Care to the House Committee on Rules.

The measure states that it is the goal of the Legislative Assembly to develop a thoughtful, methodical, and successful medical assistance redetermination process. The Oregon Health Authority (OHA), in collaboration with the Department of Human Services (DHS), is directed to develop a process for conducting medical assistance program redeterminations that reflects the goals of the Legislative Assembly no later than May 31, 2022. A report describing the process, including an operational timeline, is to be submitted to the interim committees of the Legislative Assembly related to health, the subcommittee of the Joint Interim Committee on Ways and Means related to human services, the President of the Senate, the Speaker of the House of Representatives, and the Legislative Fiscal Officer.

The redetermination process is to begin following the end of the public health emergency declared by the Governor on March 8, 2020. OHA and DHS are to display a dashboard on enrollment and disenrollment as part of the redetermination process. OHA is directed to maintain the continuous enrollment policy for the medical assistance program that was in effect during the public health emergency until reports have been made available or until May 31, 2022, whichever is later. OHA is to submit a request for resources to the Legislative Assembly to implement the redetermination process. OHA and DHS are granted flexibility on when the redeterminations begin and timelines for obtaining eligibility information from enrollees, until December 31, 2023. OHA and DHS may also temporarily waive limits on disclosure of enrollee information to promote greater information sharing with community partners that assist individuals reapplying for or seeking to maintain eligibility in the medical assistance program, or who are in transition to coverage under the health insurance exchange.

OHA and DHS must ensure appropriate consumer protections are considered before waiving any specific statutory requirements and any waiver must be reported to the interim committees of the Legislative Assembly related to health, the subcommittee of the Joint Interim Committee on Ways and Means related to human services, the President of the Senate, the Speaker of the House of Representatives, and the Legislative Fiscal Officer. Once the Centers for Medicare and Medicaid Services approve the redetermination process, OHA and DHS may adopt rules or conduct emergency procurements necessary to ensure rules and resources are in place when needed to implement the process for conducting medical assistance redeterminations after the public health emergency ends.

OHA and DHS are to immediately convene a community and partner workgroup to develop an outreach and enrollment assistance program and a communications strategy, with both agencies jointly staffing the work group. No later than May 31, 2022, OHA and DHS are to submit a report to the interim committees of the Legislative Assembly related to health with information on the program and communications strategy, including recommendations to the Emergency Board for additional resources needed in addition to those included in the agencies' budgets. Once redeterminations begin, OHA and DHS are to provide monthly updates on their communications, outreach, and navigation assistance activities to the interim committees of the Legislative Assembly related to health, the Medicaid Advisory Committee, and the Health Insurance Exchange Advisory Committee.

This measure finally establishes a task force to create a bridge program to provide affordable health insurance coverage and improve the continuity of coverage for individuals who regularly enroll and disenroll in the medical assistance program or other health care coverage due to frequent fluctuations in income. The task force must complete the proposal for a bridge program and prepare a report containing recommendations and a request for additional funding, if necessary, to the interim committees of the Legislative Assembly related to health, the subcommittee of the Joint Interim Committee on Ways and Means related to human services, the President of the Senate, the Speaker of the House of Representatives, and the Legislative Fiscal Officer. The Director of the Legislative Policy and Research Office is to provide staff support to the task force.

OHA is to submit a request for any federal approval necessary to secure federal financial participation in the costs of administering the bridge program developed by the task force to the Centers for Medicare and Medicaid Services; and to begin administering the bridge program with federal approval is received.

This measure declares an emergency and takes effect on passage.

The Legislative Fiscal Office notes that the reporting requirements included in this measure may not align with budgetary process timelines.

A more complete fiscal analysis on the measure will be prepared as the measure is considered in the House Committee on Rules.

Further Analysis Required