



**To:** Senate Health Care Committee

**From:** Sen. Tim Knopp

**Date:** Wednesday, May 3, 2023

**RE:** Non-compliance with Article 4 Section 21 of the Oregon Constitution, Senate Rule 13.02, or ORS 171.134

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Chair Patterson and Vice-Chair Hayden,

All of the bills in today's public hearing do not comply with Article 4 Section 21 of the Oregon Constitution, Senate Rule 13.02, or ORS 171.134. These bills need to comply with these provisions before moving forward

#### **[HB 2446](#)**

- **Catchline/Summary:** Requires extension to no later than December 31, 2026, of term for contract between Oregon Health Authority and coordinated care organization. Sunsets January 2, 2027. Declares emergency, effective on passage.
- **Catchline/Summary Flesch Reading Ease:**
  - **Reading Score:** 19
  - **Reading Level:** 13.1

#### **[HB 2513 A](#)**

- **Catchline/Summary:** *Requires Oregon Health Authority to study implementation of Ballot Measure 110 (2021). Directs authority to submit findings to interim committees of Legislative Assembly related to health not later than September 15, 2024.* ] **Requires local planning committees for alcohol and drug prevention and treatment services to coordinate with local Behavioral Health Resource Networks. Establishes policy of state to encourage treatment and recovery for people struggling with substance use. Removes four percent cap on amounts from Drug Treatment and Recovery Services Fund that Oregon Health Authority may use for administrative expenses to administer provisions of Ballot Measure 110 (2020). Modifies appointment of members to Oversight and Accountability Council and staggers terms of members of council. Increases responsibility of authority in processing applications for grants made by council. Modifies requirements for networks to receive grants. Modifies requirements for Secretary of State audit of uses by grantees of moneys from fund. Requires community mental health programs to provide guidance and assistance to networks for joint development of programs and activities to increase access to treatment. Allows authority, with approval of council after July 1, 2025, to implement education campaign to inform public about networks, statewide hotline and other information authority believes will benefit public in accessing behavioral health services.**
- **Catchline/Summary Flesch Reading Ease:**
  - **Reading Score:** 18.8
  - **Reading Level:** 15.3

*For questions or additional information please contact [Samuel.Herscovitz@oregonlegislature.gov](mailto:Samuel.Herscovitz@oregonlegislature.gov)*

### [HB 3596 A](#)

- **Catchline/Summary:** Allows person to practice surgical technology at health care facility if person has completed and is certified by specified apprenticeship program. Declares emergency, effective on passage.
- **Catchline/Summary Flesch Reading Ease:**
  - **Reading Score:** 16
  - **Reading Level:** 14.3

### [HB 2235 A](#)

- **Catchline/Summary:** Requires Oregon Health Authority to **convene work group to study access to behavioral health treatment in rural and medically underserved areas of this state. Directs authority to submit findings to interim committees of Legislative Assembly related to health not later than September 15, 2024.] major barriers to workforce recruitment and retention in publicly financed behavioral health system in this state and to develop recommendations on specified topics. Specifies membership. Requires authority to report work group's initial recommendations, no later than January 15, 2025, to interim subcommittee of Joint Committee on Ways and Means related to human services and report final recommendations, by December 15, 2025, to subcommittee and to interim committees of Legislative Assembly related to health care. Sunsets January 2, 2025] 2026. Declares emergency, effective on passage.**
- **Catchline/Summary Flesch Reading Ease:**
  - **Reading Score:** 19.1
  - **Reading Level:** 15.1

### [HB 3258 A](#)

- **Catchline/Summary:** *Requires monitoring and reporting by prescription drug program prescription and dispensation of prescription drugs classified in schedule V of federal Controlled Substances Act.] Requires pharmacy to report dispensation of prescription drugs classified in schedules II through V under federal Controlled Substances Act to electronic system established for monitoring and reporting prescription drugs when drug is prescribed and dispensed to individual for use by individual or individual's animal. Prohibits Oregon Health Authority from disclosing prescription monitoring information to veterinarian. Requires authority to disclose prescription monitoring information to director of division of authority that administers state medical assistance program, director of division of authority that administers prescription drug program within state medical assistance program and Centers for Medicare and Medicaid Services for specified purposes. Exempts prescription and dispensation of naloxone or drug containing pseudoephedrine or ephedrine from reporting requirements. Increases membership of Prescription Monitoring Program Advisory*

**Commission to include practicing veterinarian and additional member of public. Takes effect on 91st day following adjournment sine die.**

- **Catchline/Summary Flesch Reading Ease:**
  - **Reading Score: 0**
  - **Reading Level: 20.6**