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Senate Committee on Healthcare
Testimony in support of HB 3320
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Chair Patterson, Vice-chair Hayden, members of the committee,

On behalf of the Oregon Law Center (OLC), I request your support for HB 3320 to strengthen hospital financial assistance access and standards.

OLC is a non-profit organization that provides free legal help to people struggling to make ends meet. Our mission is to achieve justice for low-income communities in Oregon by providing a full range of the highest quality civil legal services. We advocate for our clients and the services and programs that help them overcome poverty. Access to healthcare and issues of health equity are at the forefront of the needs of our clients. While many of our clients are covered by OHP, medical debt is still a serious concern for many.

Oregon has done much work to increase the availability of healthcare insurance for individuals, but true access depends on more than having insurance. It means being able to receive care without a lifetime of medical debt. In 2019, Oregon passed HB 3076, a groundbreaking charity care law that aimed to protect people from medical debt, clear expectations for non-profit hospitals, and expand access to those most in need.

Despite Oregon's high rate of insurance and more recent charity care protections, there are various reasons why medical debt is still a significant concern for OLC. A [recent study](#) from SEIU Local 49 brings to light the shortcomings of our current charity care law that fail Oregon patients with the greatest need. First, financial assistance information for patients is challenging to find and understand on provider websites. Often, the application process is highly time-consuming and complex, for example, asking applicants to itemize their estimated monthly expenses. While the law states that income is the only eligibility requirement, many providers still ask applicants to provide information about their assets without disclosing that this is optional. All these unnecessary challenges often deter people from knowing about medical financial assistance or seeking and applying for medical financial assistance.

Our clients are very low-income and need help with medical debt. We are particularly concerned that farmworkers and immigrant communities continue to be ineligible for

healthcare for various reasons and shore up significant medical debt that they should not owe. The vast difference between policies and accessibility of applications is a genuine concern for low-income Oregonians. Clients who don't speak English often have language barriers to understanding that charity care is available. There are easy fixes hospitals can make to help patients access their charity care options.

HB 3320 does several things that are vital for low-income Oregonians. These include:

- Make information about financial assistance prominent by featuring information in multiple locations, including on hospital website homepages.
- Require hospitals to accept applications online in addition to other methods.
- Screen patients with bills of \$500 or more for presumptive eligibility for financial assistance. For patients determined eligible through this screening process, the financial assistance amount will be applied before the patient receives a bill.
- If a patient applies for and is found to be eligible for financial assistance after the patient has already paid, they will receive a refund for those payments.
- Require hospitals to have a process for a patient to appeal a hospital's denial of financial assistance.
- Increases transparency about hospital financial assistance practices by requiring annual standardized information reporting.

Poverty shouldn't be a reason that an individual forgoes necessary medical treatment. Yet, many Oregonians must choose between receiving the care they need and paying for basic needs. Unfortunately, medical debt remains a significant concern for too many in our state. HB 3320 increases access to hospital financial assistance for poor and low-income Oregonians. OLC requests your support for HB 3320.

Thank you,

Martha Sonato