

HB 4130-B13  
(LC 9)  
3/4/24 (TSB/ps)

Requested by Senator HAYDEN

**PROPOSED AMENDMENTS TO  
B-ENGROSSED HOUSE BILL 4130**

1 On page 1 of the printed B-engrossed bill, line 2, after the first semicolon  
2 delete the rest of the line and lines 3 through 5 and insert “and declaring  
3 an emergency.”.

4 On page 2, delete lines 1 through 22.

5 Delete lines 24 through 45 and delete pages 3 through 22 and insert:

6 **“SECTION 1. (1) The Legislative Policy and Research Director shall**  
7 **study the effects of business entities engaging in the practice of med-**  
8 **icine in this state and shall report the director’s findings to an interim**  
9 **committee of the Legislative Assembly related to health care policy**  
10 **not later than November 1, 2024.**

11 **“(2) In the study described in subsection (1) of this section, the di-**  
12 **rector shall research, develop an understanding of and make policy**  
13 **recommendations, including possible legislation, with respect to the**  
14 **following issues:**

15 **“(a) The extent to which a fiduciary duty to owners of shares or**  
16 **interests in business entities that employ or contract with licensed**  
17 **professionals to provide health care services can, and does, conflict**  
18 **with the duty the licensed professionals have to patients to render**  
19 **appropriate and necessary health care services;**

20 **“(b) The extent to which the existing laws of this state are adequate**  
21 **or inadequate to ensure that licensed professionals remain in control**

1 of clinical practices and decisions that affect patients and patient  
2 health care services;

3 “(c) Whether business entities are creating or using business  
4 structures, contracts or other methods and means to evade or skirt  
5 the intent, as expressed in ORS 58.375 and 58.376, to keep medical  
6 decision-making in the hands of licensed professionals;

7 “(d) Whether ownership, management or employment with both a  
8 medical practice and a business entity that has a contract with the  
9 medical practice can and does introduce conflicts of interest for the  
10 owner, manager or employee;

11 “(e) Whether business entities that provide health care services are  
12 using noncompetition agreements, nondisclosure agreements or  
13 nondisparagement agreements with licensed professionals as a means  
14 to unduly restrict competition for professional services or as insu-  
15 lation against legitimate disclosure or criticism of the business  
16 entities’ practices and decisions with respect to providing health care  
17 services;

18 “(f) Which practices, methods or means business entities use or  
19 have used, if any, to evade or skirt the intent to keep medical  
20 decision-making in the hands of licensed professionals, to allow con-  
21 flicts of interest among owners, managers, employees and contractors,  
22 to restrict competition or to insulate against legitimate disclosure or  
23 criticism and the extent to which the practices, methods and means  
24 have succeeded in reducing the role of professional expertise and  
25 judgment and the control over clinical practices and medical  
26 decision-making that licensed professionals ordinarily exercise over  
27 the provision of health care services; and

28 “(g) Which remedies would effectively eliminate practices, methods  
29 or means that result in harm to patients or to the provision of health  
30 care services or that reduce the role of professional expertise and

1 judgment and the control over clinical practices and medical  
2 decision-making that licensed professionals ordinarily exercise over  
3 the provision of health care services.

4 “(3) Before completing the report described in subsection (1) of this  
5 section, the director shall convene a work group to receive data and  
6 input, to discuss, consider and evaluate options and to otherwise pro-  
7 vide needed expertise concerning the issues specified in subsection (2)  
8 of this section. The report the director submits must consist of the  
9 director’s independent summary of the data and recommendations  
10 based on the evidence and input the director collects from the work  
11 group, along with the director’s own research and evaluations, and  
12 may not consist only of a summary of the work group’s proceedings  
13 and discussions.

14 “(4) The work group described in subsection (3) of this section must  
15 include representation from at least these groups or interests:

16 “(a) Physicians, physician assistants, nurse practitioners, practi-  
17 tioners of naturopathic medicine and other health care professionals;

18 “(b) The Oregon Medical Board, the Oregon State Board of Nursing  
19 and the Oregon Board of Naturopathic Medicine;

20 “(c) Business entities that employ or contract with licensed profes-  
21 sionals to provide health care services in this state;

22 “(d) Attorneys with expertise in corporate governance issues; and

23 “(e) Other health care policy experts or researchers that the direc-  
24 tor determines would provide needed information or expertise.

25 **“SECTION 2. Section 1 of this 2024 Act is repealed on December 31,  
26 2024.**

27 **“SECTION 3. This 2024 Act being necessary for the immediate  
28 preservation of the public peace, health and safety, an emergency is  
29 declared to exist, and this 2024 Act takes effect on its passage.”.**

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