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SENATE COMMITTEE ON HEALTH CARE

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AGENDA

Revision 1 Posted: MAY 07 02:34 PM

TUESDAY

Date: **May 13, 2025**
Time: **3:00 PM**
Room: **HR B**

Work Session

HB 2143 A
Defines "five-needle protocol.

HB 2211 A
Defines a "dental subcontractor.

HB 2385 A
Prohibits drug manufacturers from interfering directly or indirectly with a pharmacy or drug outlet acquiring 340B drugs, delivering 340B drugs to certain health care providers or dispensing 340B drugs.

HB 2594
Requires a dental laboratory to register with the Health Licensing Office.

HB 2789
Prohibits the Oregon Health Authority under specified circumstances from requiring, as a condition of reimbursing the cost of the service, a primary care provider to order a covered care management service provided by a licensed registered nurse to a medical assistance recipient.

HB 3042 A
Specifies additional reasons for which the Oregon Board of Naturopathic Medicine may impose discipline.

HB 3226 A
Includes pharmacy services administrative organizations within the definition of pharmacies for the purpose of ensuring that pharmacy benefit managers are subject to laws regulating their activities even if their contracts are with pharmacy services administrative organizations.

HB 3942 A
Allows a person or government unit to use an expedited licensure process to operate a health care facility, if the license is to operate a health care facility in the same physical location and of the same type as a health care facility that previously operated at the location and the previously operated health care facility closed within the last 24 months voluntarily or due to financial hardship.

AGENDA (cont.)
May 13, 2025

Public Hearing

HB 2940 A

Directs the Oregon Health Authority to implement a program for providing to emergency departments in real time notifications that identify patients with hemoglobinopathies and provide information on how to contact a hematologist.

HB 3409 A

Allows insurers offering policies or certificates of health insurance and pharmacy benefit managers to require that a claim for reimbursement of a prescription drug include a modifier or other indicator that the drug is a 340B drug unless certain requirements are met.

Note change: HB 2385 A and HB 3409 A added.

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