

SB 716 -4 STAFF MEASURE SUMMARY

Senate Committee On Health Care

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Sub-Referral To: Joint Committee On Ways and Means

Meeting Dates: 3/20, 4/8

WHAT THE MEASURE DOES:

The measure defines urgent care centers, directs the Oregon Health Authority (OHA) to establish a registration system for urgent care centers, sets standards for urgent care center operation, and requires certain health insurers to reimburse services provided at registered urgent care centers at a higher rate than services provided at an unregistered urgent care center. Takes effect on the 91st day following adjournment sine die.

Detailed Summary:

Directs OHA to create rules for registering urgent care centers.

- Defines “urgent care center” as a medical clinic that accepts walk- in patients and is equipped to provide care for illnesses or injuries that require prompt attention but do not require emergency-level services.
- Requires centers to be certified or accredited, to have extended office hours, to offer a wide range of non-emergency medical services, and to meet accessibility standards set in the Americans with Disabilities Act of 1990 (ADA).
- Requires registered centers to have on-site radiology, lab services, and emergency equipment.
- Allows OHA to revoke registrations for noncompliance and set registration fees based on size and complexity.

Directs health insurance policies to reimburse registered urgent care centers for services at a rate 20 percent higher than for similar services provided by a medical clinic associated with a hospital or at an unregistered urgent care center.

- Applies reimbursement requirement to coverage offered by the Public Employees' Benefit Board (PEBB) and Oregon Educators Benefit Board (OEBB).
- Exempts coverage requirement from automatic sunset.

Becomes operative January 1, 2026.

Fiscal impact: Fiscal impact issued

Revenue impact: No revenue impact

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

-4 Replaces the measure. Increases reimbursement for services rendered at eligible urgent care centers.

Detailed Summary:

Requires health insurance plans to reimburse services provided at eligible urgent care centers 20 percent higher than reimbursement for the same services provided by an urgent care center.

- Defines "eligible urgent care center" as an urgent care center with onsite radiology and laboratory services in a rural area.
- Defines urgent care center as a facility offering walk-in medical care for acute, non-life-threatening conditions.
- Directs the Department of Consumer and Business Services (DCBS) to adopt rules establishing requirements for qualifications as an eligible urgent care center.
- Exempts reimbursement from the sunset provision.

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- Sunsets January 2, 2033.

Requires the Oregon Health Authority (OHA), coordinated care organizations (CCOs), and health benefit plans provided by the Public Employees' Benefit Board (PEBB) and Oregon Educators Benefit Board (OEBB) to reimburse services provided at eligible urgent care centers 20 percent higher than reimbursement for the same services provided by an urgent care center.

- Sunsets January 2, 2033.

Directs OHA and DCBS to submit an implementation report to the Legislative Assembly by January 1, 2031, that includes:

- Requires the report to include a cost and benefit analysis, a summary of patient demographics and reasons for visiting an eligible urgent care center, and an analysis of reimbursement type.
- Sunsets reporting requirement January 2, 2031.

Applies to health benefit plans, health care service contracts, medical assistance provided, and CCO contracts issued, renewed, or extended after January 1, 2027.

BACKGROUND:

Individuals may access health care services in different ways depending on the severity of their illness or injury. Where an emergency room provides services for sudden and potentially life-threatening situations, urgent care facilities offer services for acute illness or injury that does not rise to the level of needing emergency services but cannot wait for an appointment with a primary care provider. Given that wait times for emergency room services may be long, urgent care centers can offer a more expedient alternative when used appropriately. Urgent care centers typically have set hours, an established list of conditions treated, can order basic labs and imaging tests, and offer same day services.

The Oregon Health Authority (OHA) is responsible for the regulation and licensing of certain non-long term health care facilities and the administration of Oregon's medical assistance program. The Oregon Department of Consumer and Business Services (DCBS) is the regulatory and consumer protection authority in Oregon. DCBS regulates insurance markets, including commercial health insurance policies sold in Oregon, and reviews proposed health insurance rates.

Senate Bill 716 establishes a registration system for urgent care centers in Oregon and requires certain health insurers to reimburse services provided at registered urgent care centers at a higher rate.

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