

## HB 2212 -2 STAFF MEASURE SUMMARY

### House Committee On Behavioral Health and Health Care

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**Sub-Referral To:** Joint Committee On Ways and Means

**Meeting Dates:** 4/3, 4/8

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#### WHAT THE MEASURE DOES:

The measure establishes the Task Force on the Prioritized List of Health Services staffed by the Legislative Policy and Research Office (LPRO) and the Oregon Health Authority (OHA).

#### Detailed Summary

- Establishes the Task Force on the Prioritized List of Health Services.
- Specifies Task Force size, membership, focus, and goals.
- Directs the Task Force to meet at least quarterly through June 30, 2027.
- Directs LPRO and OHA to provide staff support to the Task Force.
- Requires the Task Force to submit a report to the Legislative Assembly by March 15, 2026.
- Sunsets January 2, 2028.
- Declares an emergency, takes effect July 1, 2025.

#### ISSUES DISCUSSED:

- The need to determine necessary changes to comply with instruction from CMS

#### EFFECT OF AMENDMENT:

##### -2 Makes changes to provisions of the measure.

- Makes changes to Task Force membership, size, focus, and goals.
- Changes the frequency of Task Force meetings from quarterly to monthly or as determined by the co-chairs and a majority of voting members.
- Changes the date of the report due to the Legislative Assembly from March 15, 2026 to February 1, 2026.
- Changes sunset date for the Task Force from January 2, 2028 to January 2, 2027.

*Fiscal impact: Fiscal impact issued*

*Revenue impact: No revenue impact*

#### BACKGROUND:

Oregon's Health Evidence Review Commission (HERC) is a commission of individuals with varied expertise that determines the medical necessity and cost effectiveness of treatments covered by the state medical assistance program, the Oregon Health Plan (OHP). Created through legislation in 1989, HERC determines which medical procedures, devices, and tests included on Oregon's Prioritized List of Health Services will be covered by OHP. In accomplishing this task, HERC utilizes the best available information and evidence on clinical and cost effectiveness. The Prioritized List is unique to Oregon where it has used since 1994; the list is revised every two years as part of the biennial budget process.

Both the HERC and the Prioritized list have been permitted through an 1115 demonstration waiver with the Centers for Medicare and Medicaid Services (CMS), a five-year waiver intended to allow for testing innovations to the state Medicaid program. With approval of the 1115 Waiver for 2022-2027, CMS notified the state that the Prioritized List will no longer be included in future waivers. Beginning in 2027, OHA will follow federal regulations used to govern all state Medicaid plans. Under this process, OHA will group services into categories set by the

federal government, including some categories that are mandatory and some that are optional. Within mandatory categories, OHA will cover all medically necessary services, while OHA will determine which services will be covered within optional categories based on continued guidance from HERC.

House Bill 2212 establishes the Task Force on the Prioritized List of Health Services staffed by the Legislative Policy and Research Office and the Oregon Health Authority.