

Legislative Fiscal Office 83<sup>rd</sup> Oregon Legislative Assembly 2025 Regular Session

Prepared by:MaryMichelle SosneReviewed by:Amanda Beitel, Emily Coates, Gregory Jolivette, Matt StaynerDate:June 11, 2025

**Bill Title:** Relating to perinatal services.

**Government Unit(s) Affected:** Counties, Department of Consumer and Business Services, Department of Human Services, Oregon Health Authority

# **Summary of Fiscal Impact**

2025-27 Biennium	General Fund	Lottery Funds	Other Funds	Federal Funds	Total Funds	Positions	FTE
Oregon Health Authority	\$ 3,800,677	\$ -	\$ 1,174,868	\$ 2,171,903	\$ 7,147,448	9	6.50
Department of Human Services	\$ 33,627	\$-	\$ 1,252	\$ 31,034	\$ 65,913	2	0.45
Total Fiscal Impact	\$ 3,834,304	\$ -	\$ 1,176,120	\$ 2,202,937	\$ 7,213,361	11	6.95

2027-29 Biennium	General Fund	Lottery Funds	Other Funds	Federal Funds	Total Funds	Positions	FTE
Oregon Health Authority	\$ 3,722,107	\$ -	\$ 311,563	\$ 3,027,480	\$ 7,061,150	9	9.00
Department of Human Services	\$ 33,627	\$-	\$ 1,252	\$ 31,034	\$ 65,913	2	0.45
Total Fiscal Impact	\$ 3,755,734	\$ -	\$ 312,815	\$ 3,058,514	\$ 7,127,063	11	9.45

- Grant funding is assumed to be one-time in nature.
- The table does not include duplicate Other Funds necessary to pay for expenses through the Department of Human Services' and the Oregon Health Authority's Shared Services budget structure.

# **Measure Description**

The measure directs the Oregon Health Authority (OHA) to establish a community-based perinatal services access program to expand access to culturally competent, community-based perinatal services. It also establishes the Community-Based Perinatal Services Access Fund and appropriates \$1 million General Fund to the Fund for grants to eligible entities. OHA is permitted to either manage the program directly or contract a third party for its administration.

Additionally, the measure requires the development of qualifications for doulas, the regulation of lactation counselors and lactation educators and regular review of reimbursement rates for these providers. OHA and the Traditional Health Workers Commission must biennially submit to the Legislature a report on the status of doulas in Oregon. Lastly, the measure requires the state medical assistance program and health benefit plans to provide a minimum of 24 hours of doula or lactation services. The Department of Consumer and Business Services (DCBS) will annually adjust the minimum dollar amount of coverage for commercial health plans based on inflation. DCBS must also issue guidance on implementation of these provisions for commercial health plans.

# **Fiscal Analysis**

### FISCAL IMPACT OF PROPOSED LEGISLATION

The fiscal impact of this measure in the 2025-27 biennium is \$7.3 million total funds and nine positions (6.95 FTE). Costs decrease in the 2027-29 biennium to \$7.2 million total funds and nine positions (9.45 FTE) due to the removal of the one-time grant appropriation and consultant costs.

### **Oregon Health Authority**

The fiscal impact of the measure on the Oregon Health Authority is \$7.2 million total funds and nine positions (6.50 FTE). Of the total, \$3.2 million total funds represents the increased cost to coordinated care organizations (CCOs) and Fee-For-Service (FFS) programs to increase coverage for doula and lactation services to medical assistance recipients. Additionally, \$1 million General Fund is appropriated to the Community-Based Perinatal Services Access Fund for grants, this funding is one-time in nature only.

To implement the measure, OHA will require nine permanent full-time positions with an estimated cost of \$1.7 million total funds. New positions include:

- One Operations and Policy Analyst 4 position to support the Traditional Health Workers Commission to develop new rules, policies and procedures for doula certification and training.
- One Operations and Policy Analyst 4 position to lead Medicaid rate development, identify scope of practice during policy development and coordinate cross-agency coordination.
- One Operations and Policy Analyst 3 position to ensure CCO quality assurance and create and implement CCO guidance for reporting, monitoring, and compliance.
- One Public Service Representative 4 position to provide customer service support for Medicaid reimbursements.
- One Public Service Representative 4 position to assist with an increase in Medicaid provider applications.
- One Operations and Policy Analyst 4 position to serve as the subject matter expert of the Perinatal Services Access Program, as well as establish, and administer the grant program.
- One Operations and Policy Analyst 3 position to support the grant program and manage contracts.
- One Operations and Policy Analyst 3 position to support the expansion of the licensing base for lactation counselors and lactation educators.
- One Operations and Policy Analyst 2 position for project management.

Additional costs include \$150,000 total funds to contract with a vendor to assist the Traditional Health Workers Commission with developing legislative reports and a one-time cost of \$47,750 total funds to modify the Commission's current database to capture and store new data elements. OHA will also have \$39,035 in statewide assessment and enterprise costs for shared services positions budgeted within the Department of Human Services (DHS).

# **Department of Human Services**

The fiscal impact of this measure on DHS is \$65,913 total funds for 2 permanent part-time positions (0.45 FTE). This amount does not include the duplicate Other Funds expenditure limitation of \$94,870 required to appropriately pay for positions budgeted within Shared Services. The new positions include one Accountant 1 position to manage contract payables and establish grant profiles for eligible grant recipients and one Operations and Policy Analyst 1 position to perform record management duties for records management.

#### **Other Entities**

The measure has an indeterminate impact on counties but is anticipated to be minimal. The fiscal impact on the Department of Consumer and Business Services is minimal.

#### **Relevant Dates**

The measure takes effect on January 1, 2026, and applies to all health insurance plans and state medical assistance coverage issued, renewed, or extended as of this date.

Every even-numbered year, OHA and the Traditional Health Worker Commission must review reimbursement rates for doulas and OHA must review the reimbursement rates for lactation counselors and lactation educators.

By September 15 of each even-numbered year, OHA and the Traditional Health Worker Commission must submit a report on the status of doulas to the state Legislature.

The provision requiring DCBS to issue guidance is repealed on January 2, 2027.