SB 1033 A STAFF MEASURE SUMMARY

Senate Committee On Early Childhood and Behavioral Health

03/20/25
Do pass with amendments and requesting referral to Ways and Means. (Printed
A-Engrossed.)
4-0-1-0
4 - Anderson, Gorsek, Patterson, Reynolds
1 - Linthicum
Fiscal impact issued
No revenue impact
Katie Hart, LPRO Analyst
2/27, 3/20

WHAT THE MEASURE DOES:

The measure exempts a county or other entity with a nurse-family partnership program from paying the nonfederal share of the costs for targeted case management services given to Medicaid members enrolled in the program.

Detailed Summary:

Defines a nurse family partnership program as a program run by a county or other entity that provides home visiting to expectant parents and parents of children from infancy to two years of age. Defines nonfederal share of costs as expenditures on targeted case management services that are matched by the federal government. Declares an emergency, effective on passage.

ISSUES DISCUSSED:

• Impact of the measure.

EFFECT OF AMENDMENT:

Expands the measure to apply to counties or other entities that run nurse-family partnership programs.

BACKGROUND:

Nurse-family partnership (NFP) programs are home visiting programs that start early in pregnancy and continue until the child's second birthday. NFP programs began nationally in 1996 and expanded to Oregon in 1999. NFP programs are available in Multnomah, Jackson, Lane, Lincoln, Umatilla, Morrow, Washington, and Yamhill Counties, and the program is currently funded for a maximum capacity of 842 families (Oregon State Profile, 2024).

In Oregon, NFP programs are funded through the federal <u>Maternal, Infant, and Early Childhood Home Visiting</u> grant and Medicaid reimbursement for services. The remaining costs are covered by county funds. In 2024, the Legislative Assembly provided one-time funding from the state to NFP programs to cover county shares of program costs.

Senate Bill 1033 A exempts a county or other entity operating a nurse-family partnership program from paying the nonfederal share of the costs of the program for services provided to Medicaid members.