

## HB 2270 A STAFF MEASURE SUMMARY

### House Committee On Behavioral Health and Health Care

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**Action Date:** 04/03/25

**Action:** Do pass with amendments and be referred to Ways and Means by prior reference.  
(Printed A-Eng.)

**Vote:** 8-1-0-0

**Yeas:** 8 - Harbick, Isadore, Javadi, McIntire, Munoz, Nelson, Nosse, Pham H

**Nays:** 1 - Diehl

**Fiscal:** Fiscal impact issued

**Revenue:** No revenue impact

**Prepared By:** Alexandra Kihn-Stang, LPRO Analyst

**Meeting Dates:** 3/13, 4/3

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#### WHAT THE MEASURE DOES:

The measure directs the Oregon Health Authority (OHA) to increase reimbursement rates for addiction services for certain providers by 30 percent, establishes the Task Force on Addiction Medicine Reimbursement Rates, and creates an annual review and revision process for addiction service reimbursement rates paid by the state medical assistance program.

#### Detailed Summary

- Directs OHA to increase reimbursement rates for addiction services by 30 percent by January 1, 2026.
- Specifies that reimbursement rate increase applies to addiction medicine billing codes when used by a board-certified addiction medicine physician providing drug, alcohol, or behavioral health services, or general medicine billing codes when used by a board-certified addiction medicine physician for a primary diagnosis of substance use disorder.
- Sunsets the rate increases on July 1, 2027.
- Establishes the Task Force on Addiction Medicine Reimbursement Rates. Specifies Task Force membership, guidelines, focus, and goals. Stipulates that the Alcohol and Drug Policy Commission (ADPC) shall provide staff support for the Task Force. Directs the Task Force to submit a report to an interim committee of the Legislative Assembly related to health care by December 15, 2026.
- Directs the ADPC to conduct an annual review of addiction service reimbursement rates and to report by September 1 each year to the Legislative Assembly on findings of the review, including any recommended rate increases. Directs OHA to review the ADPC report annually by July 1 of the following year, and to review and revise reimbursement rates paid by the state medical assistance program as needed.
- Takes effect on the 91st day following adjournment sine die.

#### ISSUES DISCUSSED:

- The need to increase the entire behavioral health workforce, including physicians providing addiction medicine services
- Limitations imposed by current reimbursement rates and the potential to improve standard of care by expanding access to addiction medicine service providers
- Settings impacted by rate increases
- Impact of rate increase on coordinated care organizations

#### EFFECT OF AMENDMENT:

The amendment clarifies services for which 30 percent rate increase applies. It further expands Task Force membership and modifies its goals.

#### BACKGROUND:

## HB 2270 A STAFF MEASURE SUMMARY

The Alcohol and Drug Policy Commission (ADPC) is an independent state agency created by the legislature through House Bill 3353 (2009). The ADPC is tasked with improving the effectiveness and efficiency of state and local substance use disorder (SUD) prevention, treatment, and recovery services across Oregon.

The ADPC published a statewide [strategic plan](#) for 2020-2025 which included four goals and related objectives: implement a statewide system that ensures that substance misuse policies, practices, investments, and efforts are effective and result in healthy and thriving individuals and communities (Goal 1); increase the impact of substance misuse prevention strategies across the lifespan (Goal 2); increase rapid access to effective SUD treatment across the lifespan (Goal 3); and, increase access to recovery supports across the lifespan (Goal 4). One objective in support of Goal 1 related to increasing system capacity was a percentage increase in reimbursement rates by category.

House Bill 2270 A directs the Oregon Health Authority to increase reimbursement rates for addiction services for certain providers until July 1, 2027 and creates an annual review and revision process that begins in 2026 for addiction service reimbursement rates paid by the state medical assistance program. The measure also establishes the Task Force on Addiction Medicine Reimbursement Rates.