

HB 3554 A STAFF MEASURE SUMMARY

House Committee On Behavioral Health and Health Care

Action Date: 04/03/25

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

Vote: 9-0-0-0

Yeas: 9 - Diehl, Harbick, Isadore, Javadi, McIntire, Munoz, Nelson, Nosse, Pham H

Fiscal: Fiscal impact issued

Revenue: No revenue impact

Prepared By: Alexandra Kihn-Stang, LPRO Analyst

Meeting Dates: 3/11, 4/3

WHAT THE MEASURE DOES:

The measure directs the Oregon Health Authority (OHA) to establish a primary care provider loan repayment program and a financial incentive program for primary care practices. The measure directs OHA to provide low-interest loans to primary care practices to implement and upgrade certain electronic health record systems. OHA and the Department of Consumer and Business Services (DCBS) are directed to establish an online reporting portal for health outcome and quality measures; a task force is created to assist with the development and implementation of the centralized online portal. OHA and DCBS are directed to study the suspension of the health care practitioner centralized credentialing system.

Detailed Summary

- Directs OHA to establish a primary care provider loan repayment program to provide loan repayment subsidies for primary care providers who meet specific criteria, including serving patients in urban and suburban areas determined by OHA to have a primary care provider shortage; and who work for a practice that meets eligibility requirements.
- Directs OHA to establish a primary care incentive program to provide financial incentives to increase the primary care capacity in Oregon, including but not limited to short-term low-interest loans for certain purposes.
- Specifies eligibility criteria for a primary care practice.
- Directs OHA to provide low-interest loans to primary care practices to support implementation and upgrading of electronic health record systems.
- Establishes the Primary Care Incentive Fund within the State Treasury. Specifies that OHA may receive financial contributions from any source and that all funds received will be deposited into the Primary Care Incentive Fund.
- Directs OHA and the Department of Consumer and Business Services (DCBS) to establish an online reporting portal for health outcome and quality measures. Specifies portal requirements. Stipulates that a coordinated care organization may not require a provider to report data using a second system beyond the portal. Requires OHA and DCBS to submit a report on the implementation of online reporting portal to the interim legislative committees related to health by December 31, 2026.
- Establishes a task force for assisting with the development and implementation of the centralized online portal. Specifies that the task force shall be staffed by OHA and DCBS. Specifies task force size, membership, and goals. Requires a report to the Legislative Assembly by December 31, 2026.
- Directs OHA and DCBS to study the suspension of the health care practitioner centralized credentialing system. Specifies what must be included in the study. Requires OHA to report on study findings to the interim legislative committees related to health by September 15, 2026.

ISSUES DISCUSSED:

HB 3554 A STAFF MEASURE SUMMARY

- Consolidation of private health care practices and what is needed to maintain small, independent practices
- Reasons for loss of small, private medical practices in communities
- How the Primary Care Incentive Fund would be funded and used
- Health insurer access to and reporting of health quality data related to the portal provision of the measure

EFFECT OF AMENDMENT:

The amendment replaces the measure. Adds and makes changes to provisions in the measure as introduced. Adds the requirement that OHA ensure that data from the centralized online portal for reporting data on health outcome and quality measures is available to both health care providers and third-party payers. Requires OHA and DCBS to ensure that the portal protects patient confidentiality around protected health information. Establishes a task force for assisting with the development and implementation of the centralized online portal. Changes the deadline for OHA and DCBS to report to the Legislative Assembly related to implementation of the centralized online portal to December 31, 2026. Specifies that the portal may not become operational before the task force completes a transition plan for phased implementation.

BACKGROUND:

House Bill 3261 ([2017](#)) created the Health Care Provider Incentive Program (HCPIP) and established the Health Care Provider Incentive Fund within the Oregon Health Authority (OHA) to offer incentives to providers who commit to serving patients in Oregon's underserved areas. The [HCPIP](#) is comprised of several programs, including the Health Care Provider Incentive Loan Repayment Program ([HCPLR](#)) and Primary Care Loan Forgiveness ([PCLF](#)).

The HCPLR program offers loan repayment funds to providers who meet specific criteria and provide services at a qualifying practice site for at least three years. The PCLF program currently incentivizes primary care providers to practice in rural Oregon by offering forgivable loans to cover one or more years of tuition and fees in a health care education program. PCLF awards may not exceed the highest resident tuition rates of Oregon's publicly funded health professional training programs and students must commit to begin their primary care practice at an approved rural Oregon practice site within 90 days of graduation or medical residency.

House Bill 3554 A directs OHA to establish a primary care provider loan repayment program to provide loan repayment subsidies to primary care providers working in areas determined to have a primary care provider shortage and establishes the Primary Care Incentive Fund. The measure establishes an online reporting portal for health outcome and quality measures and establishes a task force for assisting with the development and implementation of the centralized online portal. OHA is required to study the suspension of the health care practitioner centralized credentialing system.