SB 716 A STAFF MEASURE SUMMARY

Senate Committee On Health Care

Action Date:	04/08/25
Action:	Do pass with amendments. Refer to Ways and Means by prior reference. (Printed A-Eng).
Vote:	3-2-0-0
Yeas:	3 - Campos, Patterson, Reynolds
Nays:	2 - Hayden, Linthicum
Fiscal:	Fiscal impact issued
Revenue:	No revenue impact
Prepared By:	Katie Hart, LPRO Analyst
Meeting Dates:	3/20, 4/8

WHAT THE MEASURE DOES:

The measure increases reimbursement for services rendered at eligible urgent care centers.

Detailed Summary:

Requires health insurance plans to reimburse services provided at eligible urgent care centers 20 percent higher than reimbursement for the same services provided by an urgent care center.

- Defines "eligible urgent care center" as an urgent care center with onsite radiology and laboratory services in a rural area.
- Defines urgent care center as a facility offering walk-in medical care for acute, non-life-threatening conditions.
- Directs the Department of Consumer and Business Services (DCBS) to adopt rules establishing requirements for qualifications as an eligible urgent care center.
- Exempts reimbursement from the sunset provision.
- Sunsets January 2, 2033.

Requires the Oregon Health Authority (OHA), coordinated care organizations (CCOs), and health benefit plans provided by the Public Employees' Benefit Board (PEBB) and Oregon Educators Benefit Board (OEBB) to reimburse services provided at eligible urgent care centers 20 percent higher than reimbursement for the same services provided by an urgent care center.

• Sunsets January 2, 2033.

Directs OHA and DCBS to submit an implementation report to the Legislative Assembly by January 1, 2031, that includes

- Requires the report to include a cost and benefit analysis, a summary of patient demographics and reasons for visiting an eligible urgent care center, and an analysis of reimbursement type.
- Sunsets reporting requirement January 2, 2031.

Applies to health benefit plans, health care service contracts, medical assistance provided, and CCO contracts issued, renewed, or extended after January 1, 2027.

ISSUES DISCUSSED:

- Access to care in rural Oregon.
- Reimbursement rates in different health care settings.
- Impacts of the measure.

EFFECT OF AMENDMENT:

Replaces the measure.

BACKGROUND:

This summary has not been adopted or officially endorsed by action of the committee.

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Individuals may access health care services in different ways depending on the severity of their illness or injury. Where an emergency room provides services for sudden and potentially life-threatening situations, urgent care facilities offer services for acute illness or injury that does not rise to the level of needing emergency services but cannot wait for an appointment with a primary care provider. Given that wait times for emergency room services may be long, urgent care centers can offer a more expedient alternative when used appropriately. Urgent care centers typically have set hours, an established list of conditions treated, can order basic labs and imaging tests, and offer same day services.

The Oregon Health Authority (OHA) is responsible for the regulation and licensing of certain non-long term health care facilities and the administration of Oregon's medical assistance program. The Oregon Department of Consumer and Business Services (DCBS) is the regulatory and consumer protection authority in Oregon. DCBS regulates insurance markets, including commercial health insurance policies sold in Oregon, and reviews proposed health insurance rates.

Senate Bill 716 A increases reimbursement for services rendered at eligible urgent care centers.

Analysis prepared by Aleysa García Rivas, LPRO Graduate Intern