

HB 2211 B STAFF MEASURE SUMMARY**Carrier:** Sen. Linthicum**Senate Committee On Health Care****Action Date:** 05/13/25**Action:** Do pass with amendments to the A-Eng bill. (Printed B-Eng.)**Vote:** 5-0-0-0**Yeas:** 5 - Campos, Hayden, Linthicum, Patterson, Reynolds**Fiscal:** Has minimal fiscal impact**Revenue:** No revenue impact**Prepared By:** Katie Hart, LPRO Analyst**Meeting Dates:** 4/29, 5/13**WHAT THE MEASURE DOES:**

The measure establishes a statutory definition for "dental subcontractor" and directs the Oregon Health Authority (OHA) to create requirements for dental subcontractors to contract with coordinated care organizations (CCOs). Takes effect on the 91st day following adjournment sine die.

Detailed Summary

- Defines a dental subcontractor.
- Directs OHA to adopt rules to establish requirements for a dental subcontractor that contracts with a CCO.
 - Directs OHA to include the requirements in agency's contract with a CCO.
 - Prohibits OHA from requiring a dental subcontractor that contracts with a CCO to produce any report unless the report is required by state or federal law or rule or included in a contract between OHA and a CCO.
 - Applies to contracts between OHA and a CCO entered into, amended, or renewed after the operative date of January 1, 2026.

ISSUES DISCUSSED:

- Subcontractors and managed care organizations.
- Reporting requirements.

EFFECT OF AMENDMENT:

Clarifies reporting requirements.

BACKGROUND:

The Oregon Health Plan (OHP), Oregon's state Medicaid program, was first implemented in 1994 and has continued to evolve in response to health systems reform efforts in the years since. The OHP coordinated care organization (CCO) model was established in 2012 through the passage of House Bill 3650 ([2011](#)) and Senate Bill 1580 ([2012](#)). The CCO model features a focus on primary care and prevention, providing a range of health services to their members, including physical, oral, and behavioral health care, either directly or through local and regional partnerships. Currently, there are 16 CCOs operating regionally across Oregon, serving more than 92 percent of Oregon's nearly 1.5 million OHP members.

All OHP members have access to diagnostic and preventive [dental care](#) as part of their plan benefits. CCO members receive dental coverage in two primary ways: either through a local dental plan delivered through a dental care organization (DCO) or as fee-for-service coverage. Beginning in 2023, OHP has transitioned away from contracting directly with DCOs, instead requiring CCOs to contract with DCOs and manage dental care for their members.

House Bill 2211 B provides a statutory definition for "dental subcontractor" and directs OHA to create requirements for dental subcontractors to contract with CCOs.

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