

# Senate Bill 1033

Sponsored by Senators REYNOLDS, ANDERSON, Representative LEVY B; Senators GELSER BLOUIN, PATTERSON, WEBER, Representatives GRAYBER, LIVELY, NGUYEN H, NOSSE, SCHARF, SMITH G

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: The Act changes the funding for programs in which nurses visit families while a parent is pregnant and for two years after that. (Flesch Readability Score: 62.1).

Exempts a county that operates a nurse-family partnership program from paying the nonfederal share of the costs of targeted case management services provided by the program to medical assistance recipients.

Declares an emergency, effective on passage.

## A BILL FOR AN ACT

1  
2 Relating to programs providing targeted case management nursing services to perinatal families; and  
3 declaring an emergency.

4 **Be It Enacted by the People of the State of Oregon:**

### **SECTION 1. (1) As used in this section:**

6 (a) **“Home visit” means a visit to a nurse-family partnership program participant’s place  
7 of residence or acceptable alternative location in the community.**

8 (b) **“Medical assistance” has the meaning given that term in ORS 414.025.**

9 (c) **“Nonfederal share” means the expenditures on targeted case management services  
10 that are matched by the federal government with funds under Title XIX or XXI of the Social  
11 Security Act.**

12 (d) **“Nurse-family partnership program” means a program operated by a county that:**

13 (A) **Deploys registered nurses to support expectant parents, parents and children from  
14 newborn to two years of age;**

15 (B) **Provides access to individualized health and educational services through weekly or  
16 monthly home visits to promote healthy birth outcomes and positive child health and devel-  
17 opment outcomes;**

18 (C) **Conforms to a nurse home visiting services model that:**

19 (i) **Is research-based and grounded in relevant empirically-based knowledge;**

20 (ii) **Has demonstrated program-determined outcomes;**

21 (iii) **Is associated with a national organization, institution of higher education or other  
22 organization that has comprehensive home visiting program standards that ensure high-  
23 quality service delivery and continuous program quality improvement; and**

24 (iv) **Meets the criteria for evidence of effectiveness prescribed by the United States De-  
25 partment of Health and Human Services; and**

26 (D) **Maintains voluntary participation.**

27 (e) **“Targeted case management services” means case management services furnished to  
28 a specific target group of eligible clients under the Medicaid state plan to gain access to**

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 needed medical, social, educational or other services.

2 (2) A county that operates a nurse-family partnership program is not responsible for the  
3 nonfederal share of the costs of targeted case management services provided by the program  
4 to medical assistance recipients.

5 SECTION 2. This 2025 Act being necessary for the immediate preservation of the public  
6 peace, health and safety, an emergency is declared to exist, and this 2025 Act takes effect  
7 on its passage.

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