

A-Engrossed
Senate Bill 283

Ordered by the Senate April 15
Including Senate Amendments dated April 15

Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President (at the request of Senate Interim Committee on Health Care)

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. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: The Act tells OHA and DHS to make certain payments to support the health care workforce. (Flesch Readability Score: 79.5).

[Digest: The Act requires a study of the health care workforce in Oregon. The Act requires a report to be submitted by September 15 of next year. (Flesch Readability Score: 65.7).]

[Requires the Oregon Health Authority to study matters relating to the health care workforce in this state. Directs the authority to submit findings to the interim committees of the Legislative Assembly related to health care not later than September 15, 2026.]

Directs the Oregon Health Authority and the Department of Human Services to provide certain payments to hospitals, long term care facilities, residential care facilities and federally qualified health centers to support the health care workforce. Requires the authority to report to the Legislative Assembly on the authority's progress in implementing the payments.

Directs the authority to convene a task force to make recommendations about the Oregon Essential Workforce Health Care Program. Requires the task force to report to the Legislative Assembly. Sunsets the task force on December 31, 2026.

Declares an emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to the health care workforce; creating new provisions; amending ORS 676.476 and 676.479;
3 and declaring an emergency.

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

5 **SECTION 1.** ORS 676.476 is amended to read:

6 676.476. (1)(a) The Oregon Health Authority shall provide reimbursements to support clinical
7 education at hospitals, **as defined in ORS 442.015.** *[and health care facilities.]*

8 **(b) The Department of Human Services shall provide reimbursements to support clinical**
9 **education at long term care facilities, as defined in ORS 442.015, and residential care facili-**
10 **ties, as defined in ORS 443.400, including facilities with a memory care endorsement under**
11 **ORS 443.886 and assisted living facilities.**

12 **(2) To receive reimbursement under this section, a hospital, long term care facility or**
13 **residential care facility must offer clinical placements, as defined by the authority by rule,**
14 **that include the provision of clinical instruction, supervision and health care professional**
15 **training services.**

16 **SECTION 2.** ORS 676.479 is amended to read:

17 676.479. The Oregon Health Authority shall provide:

18 (1) Reimbursements to *[employers]* **hospitals** participating in a labor-management training trust
19 to expand on-the-job training, apprenticeship opportunities and other programs that support the de-

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 velopment of health care professionals, including medical technicians, certified nursing assistants
2 and phlebotomists.

3 **(2) Incentive payments to federally qualified health centers to support workforce**
4 **recruitment, retention and training. The incentive payments:**

5 **(a) Shall be designed to:**

6 **(A) Enhance the quality of services provided by federally qualified health centers to eli-**
7 **gible patients; and**

8 **(B) Increase the financial sustainability of the services provided by federally qualified**
9 **health centers.**

10 **(b) To the extent permitted by federal law, may not be considered in determining pro-**
11 **spective payment rates for federally qualified health centers.**

12 **SECTION 3. (1) As used in this section:**

13 **(a) “Eligible employer” has the meaning given that term in ORS 735.520.**

14 **(b) “Essential Workforce Health Care Fund” means a jointly administered employee**
15 **welfare benefit plan, as defined in 29 U.S.C. 1002, that has been established:**

16 **(A) For the purpose of providing health benefits and related benefits to employees of el-**
17 **igible employers and their beneficiaries; and**

18 **(B) Under the conditions required by ORS 735.520.**

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

20 **(2) The Oregon Health Authority shall convene a task force to:**

21 **(a) Make recommendations for ensuring the availability of high-quality, affordable health**
22 **benefits for essential workers under the Oregon Essential Workforce Health Care Program**
23 **established under ORS 735.520, including recommendations about:**

24 **(A) Funding models for long-term financial sustainability; and**

25 **(B) The costs of covering current program participants and other essential workers in**
26 **the future.**

27 **(b) Review the performance of the program and its impact on care settings, including:**

28 **(A) Impact on the workforce;**

29 **(B) Impact on patients and residents, especially medical assistance recipients;**

30 **(C) Alternative options for high-quality health insurance available to essential workers**
31 **who are currently covered by the program; and**

32 **(D) Comparison of quality and affordability relative to other commercial health care**
33 **coverage.**

34 **(3) The task force consists of seven members appointed by the Governor as follows:**

35 **(a) One representative of the Oregon Health Authority.**

36 **(b) One representative of the Department of Consumer and Business Services.**

37 **(c) One representative of the Department of Human Services.**

38 **(d) One representative of eligible employers.**

39 **(e) One representative of essential workers who participate in the program.**

40 **(f) One representative of a labor-management training trust who administers the Es-**
41 **sential Workforce Health Care Fund.**

42 **(g) One member who has expertise in Medicaid supplemental payments and labor-**
43 **management training trusts.**

44 **(4) A majority of the members of the task force constitutes a quorum for the transaction**
45 **of business.**

1 (5) Official action by the task force requires the approval of a majority of the members
2 of the task force.

3 (6) The task force shall select one member of the task force to serve as chairperson and
4 another to serve as vice chairperson, for the terms and with the duties and powers necessary
5 for the performance of the functions of the offices as the task force determines.

6 (7) If there is a vacancy for any cause, the Governor shall make an appointment to be-
7 come immediately effective.

8 (8) The task force shall meet at times and places specified by the call of the chairperson
9 or of a majority of the members of the task force.

10 (9) The task force may adopt rules necessary for the operation of the task force.

11 (10)(a) No later than February 15, 2026, the task force shall submit a preliminary report
12 in the manner provided in ORS 192.245, and may include recommendations for legislation, to
13 the Governor and the committees or interim committees of the Legislative Assembly related
14 to health care and ways and means.

15 (b) No later than June 1, 2026, the task force shall submit a final report in the manner
16 provided in ORS 192.245, and may include recommendations for legislation, to the Governor
17 and the interim committees of the Legislative Assembly related to health care and ways and
18 means.

19 (11) The Legislative Fiscal Officer and the Oregon Health Authority shall provide staff
20 support to the task force.

21 (12) Members of the task force serve as volunteers on the task force and are not entitled
22 to compensation or reimbursement for expenses.

23 (13) All agencies of state government, as defined in ORS 174.111, are directed to assist
24 the task force in the performance of the duties of the task force and, to the extent permitted
25 by laws relating to confidentiality, to furnish information and advice the members of the task
26 force consider necessary to perform their duties.

27 (14) The task force shall have its first meeting on or before September 15, 2025.

28 **SECTION 4.** Section 3 of this 2025 Act is repealed on December 31, 2026.

29 **SECTION 5.** No later than September 30, 2026, the Oregon Health Authority shall submit
30 a report, in the manner provided in ORS 192.245, to the interim committees of the Legislative
31 Assembly related to health on the authority's progress in implementing the reimbursements
32 and incentive payments provided under the amendments to ORS 676.476 and 676.479 by
33 sections 1 and 2 of this 2025 Act, including any federal approval sought under section 6 of this
34 2025 Act.

35 **SECTION 6.** The Oregon Health Authority may seek any necessary approval from the
36 Centers for Medicare and Medicaid Services to receive federal financial participation in the
37 costs of the reimbursements and incentive payments provided under the amendments to ORS
38 676.476 and 676.479 by sections 1 and 2 of this 2025 Act.

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

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