

A-Engrossed
Senate Bill 529

Ordered by the Senate March 31
Including Senate Amendments dated March 31

Sponsored by Senator PATTERSON (Pre-session filed.)

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 makes changes to laws about certain health workers. (Flesch Readability Score: 78.2).

Directs the Oregon Health Authority [*and coordinated care organizations*] to contract directly with [*traditional health workers,*] community health registered nurses and community-based organizations to provide services to medical assistance recipients. Directs the authority to establish comprehensive billing codes for traditional health workers and community health registered nurses. Directs the authority to modify the requirements for the supervision of traditional health workers. Directs the authority to adopt requirements for the regulation of community health registered nurses. **Directs a coordinated care organization to inform community health registered nurses and community-based organizations that provide health care services through traditional health workers or community health registered nurses about the process for requesting to contract with the coordinated care organization as an in-network provider and directs a coordinated care organization to respond to a request to contract within 90 days.**

Declares an emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to community health; creating new provisions; amending ORS 414.665, 414.667, 414.668 and
3 414.669; and declaring an emergency.

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

5 **SECTION 1.** ORS 414.667 is amended to read:

6 414.667. As used in ORS [*414.667, 414.668 and 414.669,*] **414.665 to 414.669:**

7 (1) **“Community-based organization” means a community-based organization that pro-**
8 **vides health care services through traditional health workers or community health regis-**
9 **tered nurses.**

10 (2) **“Community health registered nurse” means a registered nurse licensed under ORS**
11 **678.010 to 678.410 who engages in the practice of nursing, as that term is defined in ORS**
12 **678.010, to provide patient care outside of a health care facility and in a setting that combines**
13 **primary care and public health.**

14 (3) **“Doula” means an individual who meets criteria for a doula adopted by the Oregon Health**
15 **Authority in accordance with ORS 414.665.**

16 (4) **“Traditional health worker” includes any of the following:**

17 (a) **A community health worker.**

18 (b) **A personal health navigator.**

19 (c) **A peer wellness specialist.**

20 (d) **A peer support specialist.**

21 (e) **A doula.**

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 **(f) A tribal traditional health worker.**

2 **SECTION 2.** ORS 414.665 is amended to read:

3 414.665. [(1) As used in this section, “traditional health worker” includes any of the following:]

4 [(a) A community health worker.]

5 [(b) A personal health navigator.]

6 [(c) A peer wellness specialist.]

7 [(d) A peer support specialist.]

8 [(e) A doula.]

9 [(f) A tribal traditional health worker.]

10 [(2)] (1) In consultation with the Traditional Health Workers Commission established under ORS
11 413.600, the Oregon Health Authority, for purposes related to the regulation of traditional health
12 workers, shall adopt by rule:

13 (a) The qualification criteria, including education and training requirements, for the traditional
14 health workers utilized by coordinated care organizations;

15 (b) Appropriate professional designations for supervisors of the traditional health workers; and

16 [(c) Processes by which other occupational classifications may be approved to supervise the tradi-
17 tional health workers.]

18 **(c) Requirements for the supervision of traditional health workers.**

19 **(2) The requirements for the supervision of traditional health workers under this section
20 must:**

21 **(a) Create processes to allow other occupational classifications to be approved by the
22 authority to supervise traditional health workers;**

23 **(b) Allow individuals who are not licensed but who have sufficient professional experi-
24 ence, as determined by the authority, to supervise traditional health workers; and**

25 **(c) Establish a level and frequency of supervision of traditional health workers that will
26 allow for group supervision and remote supervision.**

27 (3) The criteria and requirements established under [subsection (2) of] this section:

28 (a) Must be broad enough to encompass the potential unique needs of any coordinated care or-
29 ganization;

30 (b) Must meet requirements of the Centers for Medicare and Medicaid Services to qualify for
31 federal financial participation; and

32 (c) May not require certification by the Home Care Commission.

33 **SECTION 3.** Sections 4 and 5 of this 2025 Act are added to and made a part of ORS 414.665
34 to 414.669.

35 **SECTION 4.** (1) The Oregon Health Authority shall adopt rules related to the regulation
36 of community health registered nurses. The rules adopted under this section must include
37 qualification criteria, including training and education requirements, for community health
38 registered nurses utilized by coordinated care organizations.

39 **(2) The criteria and requirements established under subsection (1) of this section:**

40 **(a) Must be broad enough to encompass the potential unique needs of any coordinated
41 care organization;**

42 **(b) Must meet requirements of the Centers for Medicare and Medicaid Services to qualify
43 for federal financial participation; and**

44 **(c) May not require supervision of community health registered nurses.**

45 **SECTION 5.** The Oregon Health Authority shall contract directly with community health

1 **registered nurses and community-based organizations to provide services to medical assist-**
2 **ance recipients.**

3 **SECTION 6.** ORS 414.668 is amended to read:

4 **414.668. (1) A coordinated care organization may provide reimbursement on a fee-for-**
5 **service basis or using alternative payment methodologies to:**

- 6 **(a) Traditional health workers;**
- 7 **(b) Community health registered nurses; and**
- 8 **(c) Community-based organizations.**

9 **(2) A coordinated care organization shall provide information to community health reg-**
10 **istered nurses and community-based organizations about the process for requesting to con-**
11 **tract with the coordinated care organization as an in-network provider. A coordinated care**
12 **organization shall approve or deny a request to contract submitted by a community health**
13 **registered nurse or community-based organization within 90 days.**

14 **(3) A coordinated care organization shall make information about how to access [doula] services**
15 **from traditional health workers and community health registered nurses available on a**
16 **website operated by or on behalf of the coordinated care organization and shall provide the infor-**
17 **mation in print whenever a printed explanation of benefits is available.**

18 **SECTION 7.** ORS 414.669 is amended to read:

19 **414.669. (1) The Oregon Health Authority shall establish comprehensive billing codes to**
20 **include reimbursement for the costs of a wide range of preventive and social support services**
21 **provided by traditional health workers and community health registered nurses to medical**
22 **assistance recipients. To be eligible for reimbursement, services provided by a traditional**
23 **health worker or community health registered nurse must be medically necessary and med-**
24 **ically appropriate, as determined by the authority.**

25 **(2) [The Oregon Health authority, in coordination with the Traditional Health Workers Commis-**
26 **sion, shall in each even-numbered year review, and revise if necessary, any rates of reimbursement for**
27 **doulas.] In each even-numbered year the authority shall:**

28 **(a) In coordination with the Traditional Health Workers Commission, review and revise**
29 **if necessary any rates of reimbursement for traditional health workers.**

30 **(b) Review and revise if necessary any rates of reimbursement for community health**
31 **registered nurses.**

32 **(3) When reviewing and revising rates of reimbursement under this section, the authority shall**
33 **consider factors including retention of [doulas] traditional health workers and community health**
34 **registered nurses, administrative costs to support traditional health workers and community**
35 **health registered nurses, access to culturally specific [doulas] traditional health workers and**
36 **community health registered nurses and evidence-based factors and empirical studies related to**
37 **the cost-effectiveness of services provided by [doulas] traditional health workers and community**
38 **health registered nurses.**

39 **(4) The authority may not require a medical diagnosis as a condition of reimbursing the**
40 **cost of a service provided by a traditional health worker or a community health registered**
41 **nurse to a medical assistance recipient when the service is provided outside of a health care**
42 **facility.**

43 **SECTION 8.** Sections 4 and 5 of this 2025 Act and the amendments to ORS 414.665,
44 414.667, 414.668 and 414.669 by sections 1, 2, 6 and 7 of this 2025 Act become operative on
45 **January 1, 2026.**

1 **SECTION 9.** The Oregon Health Authority may take any action before the operative date
2 specified in section 8 of this 2025 Act that is necessary to enable the authority to exercise,
3 on and after the operative date specified in section 8 of this 2025 Act, all of the duties,
4 functions and powers conferred on the authority by sections 4 and 5 of this 2025 Act and the
5 amendments to ORS 414.665, 414.667, 414.668 and 414.669 by sections 1, 2, 6 and 7 of this 2025
6 Act.

7 **SECTION 10.** The amendments to ORS 414.668 by section 6 of this 2025 Act apply to new,
8 amended or renewed contracts between a coordinated care organization and the Oregon
9 Health Authority that take effect on or after the operative date specified in section 8 of this
10 2025 Act.

11 **SECTION 11.** This 2025 Act being necessary for the immediate preservation of the public
12 peace, health and safety, an emergency is declared to exist, and this 2025 Act takes effect
13 on its passage.

14 _____