SB 1575-4
(LC 151)
2/16/26 (RH/ps)

Requested by Senator PATTERSON

PROPOSED AMENDMENTS TO SENATE BILL 1575

On page 1 of the printed bill, delete lines 12 through 25 and delete pages 2 through 5 and insert:

"**SECTION 1.** ORS 443.860 is amended to read:

"443.860. (1) A person may not establish, [*conduct*] **operate** or maintain a hospice program providing hospice services, or hold itself out to the public as a hospice program, without obtaining a license from the Oregon Health Authority.

"[*(2) The authority:*]

"[*(a) Shall adopt rules to carry out the provisions of ORS 443.850 to 443.869, including but not limited to rules for licensure that require an in-person site inspection of each licensed hospice program at least once every three years.*]

"[*(b) May accept certification by a federal agency or accreditation by an accrediting organization approved by the authority as evidence of compliance with the requirements for licensure adopted under paragraph (a) of this subsection if:*]

"[*(A) The certification or accreditation meets standards and conditions established for hospice programs by the Centers for Medicare and Medicaid Services;*]

"[*(B) The hospice program invites the authority to participate in any exit interview conducted by the agency or organization; and*]

"[*(C) The hospice program provides the authority with copies of all documentation requested by the authority concerning the certification or accreditation.*]

"[*(3) The fee to obtain or renew a hospice program license is $1,140.*]

"[*(4) The authority shall prescribe by rule the form and manner for application for or renewal of a license. The authority shall issue a license to an applicant that has the necessary qualifications, meets all requirements established by the authority by rule and has paid the fee.*]

"[*(5) A license issued under this section is valid for one year and is not transferable. A license may be renewed by payment of the fee and demonstration of compliance with requirements for renewal established by the authority by rule.*]

"**(2) The authority shall prescribe the form and manner for applying for an initial license or renewal of a license.**

"(3) The authority shall establish by rule fees for initial and renewal license applications, not to exceed the costs of administering ORS 443.850 to 443.869. In establishing application fees under this section, the authority may:

"(a) Adopt a graduated fee structure based on factors such as annual patient census or total revenue; and

"(b) Include the costs of completing the criminal records checks required under this section.

"(4) An application for an initial license shall include:

"(a)(A) Any negative performance history of the applicant in Oregon or another state, including:

"(i) Any hospice or other health care license suspension or revocation, adverse regulatory finding or other sanction;

"(ii) Any determination, adjudication or settlement related to health care fraud or abuse; and

"(iii) Any exclusion from Medicare, Medicaid or any other federal

or state health care program.

"(B) As used in this paragraph, 'applicant' includes any entity managed by the proposed administrator or proposed medical director of the applicant and any entity in which an owner of the applicant holds a five percent or greater ownership interest, but does not include an individual health care practitioner;

"(b) Documentation demonstrating that the proposed administrator and proposed medical director of the applicant meet minimum training and qualification requirements, as established by the authority by rule; and

"(c) The tax status of the applicant.

"(5) Upon receipt of an application and fee for an initial license, the authority shall:

"(a) Complete a criminal records check under ORS 181A.195 on:

"(A) The proposed administrator;

"(B) The proposed medical director; and

"(C) If the applicant is a privately owned entity, any individual who holds a five percent or greater ownership interest in the applicant entity; and

"(b) Review the information submitted under subsection (4) of this section.

"(6) The authority may deny an application for an initial license:

"(a) Based on the severity, frequency or timing of the applicant's negative performance history, as described in subsection (4) of this section;

"(b) If the authority determines that the hospice program knowingly provided false information, as described in subsection (11) of this section; and

"(c) For other reasons established by the authority by rule.

"(7) The authority shall issue an initial license to an applicant that:

"(a) Meets all requirements under ORS 443.850 to 443.869 and rules adopted under ORS 443.850 to 443.869; and

"(b) Has paid the application fee.

"(8) A license issued under this section is valid for one year and is not transferable.

"(9) A license may be renewed by payment of the application fee established under subsection (3) of this section and demonstration of compliance with requirements for renewal established by the authority by rule.

"(10) The authority may accept certification by a federal agency or accreditation by an accrediting organization approved by the authority as evidence of compliance with the requirements for license renewal adopted under this section if:

"(a) The certification or accreditation meets standards and conditions established for hospice programs by the Centers for Medicare and Medicaid Services;

"(b) The hospice program invites the authority to participate in any exit interview conducted by the agency or organization; and

"(c) The hospice program provides the authority with copies of all documentation requested by the authority concerning the certification or accreditation.

"(11) The authority may deny an application for an initial license or renewal of a license and may suspend or revoke a hospice program's license if the authority determines that the hospice program knowingly provided false information under this section or section 3 of this 2026 Act.

"(12) A person may not hold an ownership interest in a hospice program licensed under this section if the person has been:

"(a) Excluded from participation in the Medicare or Medicaid programs; or

"(b) Found liable for health care fraud or abuse in any jurisdiction.

"(13) The authority shall adopt rules to carry out the provisions of ORS 443.850 to 443.869, including but not limited to rules that require an in-person site inspection of each licensed hospice program at least once every three years.

"SECTION 2. Section 3 of this 2026 Act is added to and made a part of ORS 443.850 to 443.869.

"SECTION 3. (1) As used in this section, 'consumer assessment survey' means a survey developed by the Centers for Medicare and Medicaid Services that assesses the experiences of patients who died while receiving hospice care and the experiences of the patients' informal primary caregivers.

"(2) The Oregon Health Authority may require an applicant for an initial license or renewal of a license under ORS 443.860 to submit the performance history from other states, including past licensing survey results, of:

"(a) The hospice program applying for a license;

"(b) A person holding a five percent or greater ownership interest in the hospice program;

"(c) The administrator or proposed administrator of the hospice program; and

"(d) The medical director or proposed medical director of the hospice program.

"(3) If an applicant operates a hospice program in this state or any other state, to be eligible for an initial or renewal license under ORS 443.860, the applicant must have submitted the consumer assessment survey results for the previous year to the Centers for Medicare and Medicaid Services, unless the applicant received an exemption from the Centers for Medicare and Medicaid Services.

"SECTION 4. The Oregon Health Authority shall complete

rulemaking required under the amendments to ORS 443.860 by section 1 of this 2026 Act no later than 24 months after the effective date of this 2026 Act.

"**SECTION 5. (1) As used in this section:**

"(a) 'Hospice program' and 'hospice services' have the meanings given those terms in ORS 443.850.

"(b) 'Underserved area' means a geographic area of this state in which residents do not have adequate access to hospice services, including:

"(A) An area with no hospice program currently serving residents;

"(B) An area in which existing hospice programs lack capacity to meet community need; and

"(C) An area designated by state or federal laws or regulations as rural, frontier or medically underserved.

"(c) 'Underserved population' means a group of individuals that experience barriers to accessing hospice services, including:

"(A) Residents of rural or frontier counties;

"(B) Members of the nine federally recognized Indian tribes in this state;

"(C) Individuals with limited English proficiency;

"(D) Individuals with disabilities;

"(E) Members of racial or ethnic minority communities; and

"(F) Individuals with low incomes or inadequate health care coverage.

"(2) Except as provided in subsection (3) of this section, until the Oregon Health Authority has completed rulemaking required under the amendments to ORS 443.860 by section 1 of this 2026 Act, the authority may not issue any new initial licenses under ORS 443.860.

"(3) During the time frame specified in subsection (2) of this section, the authority may issue a new initial license under ORS 443.860

to the following:

"(a) A hospice program licensed under ORS 443.860 that is seeking a new initial license to operate a hospice program in a new service area;

"(b) A hospice program licensed under ORS 443.860 that is seeking a new initial license based on a change of ownership;

"(c) A health care provider licensed in this state, long term care facility as defined in ORS 442.015 or residential care facility as defined in ORS 443.400 that is seeking to provide hospice services to patients or residents of the provider or facility; and

"(d) An applicant that proposes to serve an underserved area or an underserved population.

"<u>SECTION 6.</u> Section 5 of this 2026 Act is repealed on January 2, 2029.

"<u>SECTION 7.</u> This 2026 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2026 Act takes effect on its passage.".