LEGISLATIVE UPDATE

Prepared for OAHU

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SB 409 – Wholesale Importation of Prescription Drugs

Sen. Dennis Linthicum (R-Klamath Falls) says he and his daughter have been insulin dependent diabetics since their teens, and have seen the cost increase year after year. “The United States currently spends 18% of GDP on health care, and will soon be 20%, and soon be 25%, and where does it end?” says Linthicum.

He, along with Sen. Elizabeth Steiner Hayward (D-Beaverton) and Rep. Rob Nosse (D-Portland) are proposing a bill that would direct the Board of Pharmacy to import lower cost prescription drugs of equal efficacy from Canadian wholesalers.

Representatives from the pharmaceutical industry argue that though this bill has good intentions, there is no way for it to be fully implemented.

HB 2693 – Telehealth Reimbursement for Texting and Email Services

ZoomCare wants to require private insurers to reimburse chat, texting and email services. They say that they currently offer services via online chat, but that only about half of insurers will reimburse for those services.

Stakeholders took issue with the broad expansion of services, and particularly with the set amounts of reimbursement prescribed in the bill—80% of the in-person reimbursement for a physical health service, 90% for a behavioral health service.

Testimony was broadly supportive of telemedicine, but OCHIN was the only other group to testify in support of the bill with some changes.

Providence and the hospital association were opposed to the bill. The Oregon Medical Association and the Oregon Academy of Family Physicians were neutral, but raised concerns about how the doctor-patient relationship ought to be established, and how this bill serves to perpetuate a fee-for-service model.

SB 526 – Universal Home Visiting

The Governor’s Children’s Cabinet, made up of legislators, state agencies, and early childhood advocates is proposing to create a universally offered home-visiting program for new parents. The program would utilize the evidence-based Family Connects model. Advocates say the program has a 2:1 return on investment simply based on reduced ER visits in the first year of life.

Sen. Elizabeth Steiner Hayward (D-Beaverton) is working with commercial insurers to fund the program for their members and amendments are forthcoming.

Some parent rights advocates are against the bill due to concern about pressure and/or coercion from health care providers to vaccinate, these visits being used as child welfare checks, and that the bill should be opt-in rather than opt-out.

SB 140 – ED Boarding Pilot Project

Hospitals say that emergency departments (ED) often become the de facto treatment location for patients experiencing a mental health crisis. Some are assessed and sent

home, but many remain in the hospital for longer than 24 hours, and in some cases, more than two weeks waiting for an appropriate placement.

This bill provides pilot funding for community partnership programs, and would create a task force to look at the problem and come up with long term solutions for the 2021 Session.

Robin Henderson, Providence, says they have four hospitals with psychiatric treatment centers that are all inundated. “It is not just housing or the lack of community services, or the backlog at the State Hospital that is to blame for these systemic issues. The bill not only provides pilots, but also creates a task force to look at those drivers.”

Advocates are working on technical amendments.

SB 141 – Mental Health Crisis Line

The hospital association is proposing $4 million in state funding for hospitals to create or contract out a system for following up with suicidal patients.

HB 3090, passed in 2017, requires hospitals to provide a “caring contact” with all behavioral health patients after they leave the emergency department. Suicidal patients are to receive that “caring contact” within 48 hours.

Andi Easton, representing the hospital association, said, “that is not an insignificant task for hospitals.” Oregon hospital emergency departments see about 75,000 patients each year who are in a behavioral health crisis. Of those, approximately 10 percent are suicidal.

Funding in SB 141 would help hospitals create a system to provide the follow up care called for in HB 3090.

SB 130 – Telehealth for school-based health centers

SB 130 would allow nurses in school-based health centers to use telehealth to expand the services offered in their clinics. There are currently 78 school-based health centers in Oregon, providing health services to more than 64,000 children.

The School Based Health Alliance says this would help, “Better integrate health with the education system.”

Telehealth services require specialized equipment and training, so schools may need grants to help pay for staffing, equipment and technical assistance.

The Telehealth Alliance of Oregon supports SB 130 saying telehealth could allow school-based health centers to provide a broader array of health care services to students.

SB 571 – Tax Credit for New Employees

Sen. Tim Knopp (R-Bend) proposed a $1,000 per employee tax credit for businesses with less than 100 employees that add 10 or more FTE jobs in one tax year. “We are looking to people who are growing their business to help us grow our economy,” Knopp told the Senate Business Committee.

To qualify, the new employees would have to be on the payroll for at least 12 months and be paid more than the median income in the local community.

Sen. Knopp said he’s open to amending the bill to require a percentage increase in a company’s employment, rather than 10 FTE.

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