



Legislative Report

January 31st, 2023

Overview & Major Highlights

Oregon's 82nd Legislative Session kicked off on Tuesday, January 17th. The first week was largely organizational with a number of informational hearings in all committees. The second week focused on Pharmacy Benefit Manager (PBM) reform in the House Committee on Behavioral Health and Health Care, with witnesses testifying to the importance of ending what is termed "white-bagging" and instituting limiters to PBM reach. This included limitations to claw-backs that PBMs can make on claims, and prohibitions of certain fees and other discriminatory practices which negatively impact patient care, access to medication, and provider reimbursement. On the Senate Health Care side, time was spent on bills concerned with nurse and physician licensing, as well as intrastate scope of work agreements

This week, the Senate Committee on Health Care, chaired by Senator Deb Patterson (D – SD 10), will be focusing on dentistry, regional health equity councils, and the Oregon State Hospital Board. The House Committee on Behavioral Health and Health Care, chaired by Representative Rob Nosse (D – HD 42), will be shifting focus to behavioral health. In her inaugural address, Governor Tina Kotek stated that behavioral health care reform was one of her priorities and the importance of reform carries through to the bills being seen this session.

Representative Maxine Dexter (D – HD 33) and many other lawmakers are sponsoring legislation which would impact the behavioral health workforce pipeline, education, service and program types, funding, and data collection. Many of these bills work in conjunction with those being introduced in committees on housing in both the House and Senate. Via informational sessions and witness testimony, clear connections are being drawn between the importance of bolstering housing availability and affordability and creating access to behavioral health care, including programs and supportive treatments for people using substances.

Key Session Deadlines



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OPCA Policy Team Action

The first two weeks of the legislative session, the OPCA policy team focused on relationship building with new and veteran lawmakers alike. In addition to sorting through more than 200 pieces of legislation, the policy team met with 12 legislators across all parties and supported One Community Health in hosting Representative Jeff Helfrich (R – HD 52) for a site visit.

In addition, OPCA's Legislative Liaisons hit the ground running, providing vital feedback on over a dozen bills in the first weeks of session, with more to come. We are grateful for the advocacy support of our health center members! If you are interested in lending your expertise to the Legislative Liaison Program, reach out to Marris Alden at malden@orpca.org.

If you would like to invite a lawmaker from your district to your health center, reach out to Marty Carty at mcarty@orpca.org.

[Find Your Representative Here](#)

OPCA Policy Priority Areas

In addition to other topics that rise to the surface, OPCA has four priority areas going into the 82nd Legislative Session, including PBM reform, housing, behavioral health, and community information exchange.



We urge lawmakers to address Oregon's chronic workforce shortages at Community Health Centers and within the health care delivery system more broadly. Health centers must recruit, train, and retain an integrated, multi-disciplinary workforce to provide high-quality care. Investments in the primary care workforce are needed to ensure health centers can keep pace with the evolving needs in their communities. Workforce solutions must also be equitably and holistically applied across the health care sector. Narrowly applied solutions only serve to widen the health equity gap in our state and have the greatest impact on underserved communities including people of color.



We urge lawmakers to support a pilot program included in House Speaker Dan Rayfield's (D – HD 16) omnibus bill that would allow Federally Qualified Health Centers to expand comprehensive reproductive health care services into areas of our state where services are currently not available.

78% of Oregon counties do not have a comprehensive reproductive health care provider, and some Oregonians must travel >100 miles to access comprehensive care. Oregon has health centers in 33 of 36 counties, and in many cases, they are the only health care providers available to rural Oregon communities.



We support an increase in professional/pharmacy dispensing fees which reflect today's costs by increasing fees \$2 and directing the Oregon Health Authority to reassess the adequacy of those fees in 3-year intervals. Federal Medicaid rules require state Medicaid fee-for-service programs to pay fees that cover pharmacies' costs of dispensing prescription medications and providing related benefit and coverage services.

In Oregon, fees have not changed since 2017, but the cost of dispensing prescription medication has skyrocketed. This bill would provide a transparent and regular process by which pharmacists can expect fee increases, and immediately increase the dispensing fee in response to our current economic landscape.



We support the Bridge/Basic Health Plan as an opportunity to implement a long-term solution to Oregon's continual gaps in health insurance coverage, specifically for those experiencing economic insecurity and other social determinants of health.

We support the Bridge Plan Task Force's recommendations in their September and December 2022 reports to the Legislature which include access to no-cost coverage, provider reimbursement above Medicaid rates, and cost-based reimbursement for Federally Qualified Health Centers who provide care to a disproportionate number of those who will be eligible for the Basic Health Plan.

OPCA's Policy Team



Danielle Sobel
Policy & Regulatory
Affairs Sr. Director
dsobel@orpca.org
Pronouns: She/her/hers



Marty Carty
Governmental Affairs
Director
mcarty@orpca.org
Pronouns: He/him/his



Marris Alden
Health Policy Analyst
malden@orpca.org
Pronouns: She/her/hers

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Touch



Oregon Primary Care Association | 623 SW Oak St., Suite 300, Portland, OR 97204

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