House Bill 4108

Introduced and printed pursuant to House Rule 12.00. Presession filed (at the request of House 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 as introduced.

Requires Oregon Health Authority to contract with community-based organizations to operate pilot project to provide used durable medical equipment to medical assistance recipients. Appropriates moneys to Oregon Health Authority for grants to community-based organizations operating pilot project.

Sunsets pilot project January 2, 2018.

Declares emergency, effective on passage.

A BILL FOR AN ACT

2 Relating to durable medical equipment; appropriating money; and declaring an emergency.

3 Be It Enacted by the People of the State of Oregon:

SECTION 1. (1) As used in this section: 4

(a) "Coordinated care organization" has the meaning given that term in ORS 414.025. 5

(b) "Durable medical equipment" means equipment that is primarily and customarily 6

used for a medical purpose, can withstand repeated use and is appropriate for use in the 7 home. 8

(c) "Equipment" means durable medical equipment that was donated by an individual or 9 10 organization.

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(d) "Medical assistance" has the meaning given that term in ORS 414.025.

(2) The Oregon Health Authority shall contract with one or more community-based or-12 ganizations to operate a pilot project to test whether the authority and coordinated care 13organizations can achieve good outcomes for individuals who receive medical assistance by 14 reusing durable medical equipment, in conjunction with the purchase of new durable medical 15equipment, in a safe, functionally appropriate and cost-effective manner. The pilot project 16 shall serve recipients of medical assistance who reside in the areas of Washington, 17 18 Multnomah, Clackamas, Marion and Polk Counties that are served by coordinated care organizations. The pilot project may be expanded, as appropriate, to other areas. 19

- (3) The pilot project must have all of the following elements: 20
- 21(a) The capacity to receive, store and transport used equipment.

22(b) A web-based, searchable and regularly updated inventory of the equipment that is 23 available for reuse.

- (c) A strategy to facilitate sufficient and appropriate equipment donations. 24
- 25(d) Procedures, adopted by the authority by rule, to ensure that:
- (A) Reused equipment is safe and functionally appropriate; 26

27(B) Reused equipment is properly cleaned, sanitized, repaired, refurbished and reconfig-28 ured;

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(C) There is a streamlined and user-friendly process for requesting equipment, processing
the requests, checking the status of requests and maintaining records of requests and distributions of equipment;
(D) The community-based organizations properly dispose of equipment or salvage parts
from equipment if the equipment is unsuitable for reuse; and

6 (E) Assistive technology professionals or other appropriately licensed or certified pro-7 viders:

8 (i) Assess each individual's needs for equipment, consult with and advise the individual 9 and the individual's care provider in the selection of equipment and continue to be available 10 after the delivery of reused equipment to provide support, repairs and adjustments; and

(ii) Inspect, adjust, refurbish and fit the reused equipment.

(4) The authority shall develop, collect and analyze data necessary to assess the success
of the pilot project and report the results of the assessment to the Seventy-eighth Legislative
Assembly no later than February 1, 2016. The authority shall continue to report annually to
the Legislative Assembly until the end of the pilot project.

(5) The authority shall reimburse the community organizations operating the pilot project, on a fee-for-service basis, for the costs of providing, delivering and servicing each item of equipment provided to individuals eligible for medical assistance who are not members of coordinated care organizations. The authority shall adopt the reimbursement rates by rule.

(6) The authority shall take all actions necessary to implement the pilot project no later
 than October 1, 2014.

(7) The authority may apply for and receive gifts or grants from any public or private
 source for the purpose of carrying out this section.

25 <u>SECTION 2.</u> There is appropriated to the Oregon Health Authority, for the biennium be-26 ginning July 1, 2013, out of the General Fund, the amount of \$50,000 for providing grants to 27 community organizations operating the pilot project described in section 1 of this 2014 Act.

28 SECTION 3. Section 1 of this 2014 Act is repealed January 2, 2018.

29 <u>SECTION 4.</u> This 2014 Act being necessary for the immediate preservation of the public 30 peace, health and safety, an emergency is declared to exist, and this 2014 Act takes effect 31 on its passage.

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