A-Engrossed Senate Bill 492

Ordered by the Senate April 6 Including Senate Amendments dated April 6

Sponsored by Senators PATTERSON, GELSER BLOUIN (Presession 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.

[Imposes new requirements on the determination of health services to be provided in state medical assistance program.]

Requires Oregon Health Authority to study policies and practices governing provision of and payments for health services in state medical assistance program. Specifies areas to be assessed. Requires report to interim committees of Legislative Assembly related to health by September 15, 2024.

Sunsets January 2, 2025.

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A BILL FOR AN ACT

- Relating to health services provided in the medical assistance program.
 - Be It Enacted by the People of the State of Oregon:
 - <u>SECTION 1.</u> (1) The Oregon Health Authority shall study policies and practices governing the provision of and payments for health services in the medical assistance program under ORS chapter 414, including an assessment, at a minimum, of the following issues:
 - (a) The Health Evidence Review Commission and its use of research and analysis, including research that:
 - (A) Studies health outcomes that are priorities for persons with disabilities who experience specific diseases or illnesses, through surveys and other methods of identifying priority outcomes for individuals who experience the diseases or illnesses;
 - (B) Studies subgroups of patients who experience specific diseases or illnesses, to ensure consideration of any important differences and clinical characteristics applicable to the subgroups; and
 - (C) Considers the full range of relevant, peer-reviewed evidence and avoids harm to patients caused by undue emphasis on evidence that is deemed inconclusive of clinical differences without further investigation.
 - (b) The use of the prioritized list of health services, developed by the commission under ORS 414.690, and the impact of the prioritized list on access to medically necessary treatment and services by recipients of medical assistance, including members of coordinated care organizations.
 - (c) The impact of the prioritized list on the authority's policy initiatives, including the goal to achieve equitable access to health care by 2030, and the implementation of policy objectives included in the demonstration project approved by the Centers for Medicare and Medicaid Services under 42 U.S.C. 1315.

- (d) The use of any quality of life measures, either directly or by considering research or analysis that takes into account a measure of an individual's quality of life, in determining whether a service is cost-effective, whether a service is recommended, or the value of a service.
- (e) The use of prior authorization or other utilization management procedures and their impact on access to medically necessary treatment and services, specifically among persons with disabilities or chronic illnesses.
- (f) The use of vendors to provide or compile research and analysis that is considered by the commission, including the vendors' funding sources, and any conflicts of interest that a vendor may have with respect to the research and analysis provided.
- (g) The opportunity for public participation and engagement with the commission's review process, including timely public notice of actions, use of executive sessions to hear evidence from advisory committees, subcommittees or panels of experts and the applicability of ORS 192.610 to 192.690 to meetings of the advisory committees or subcommittees described in ORS 414.689.
- (2) The authority shall submit a report, in the manner provided by ORS 192.245, of the authority's study and assessments under subsection (1) of this section, and shall include recommendations for legislation, to the interim committees of the Legislative Assembly related to health no later than September 15, 2024.

SECTION 2. Section 1 of this 2023 Act is repealed on January 2, 2025.