

## Definition of Oregon's Health Care Safety Net

As developed by the NGA Health Care Safety Net Policy Team and the Safety Net Advisory Council.

*The **health care safety net** is a community's response to meeting the needs of people who experience barriers that prevent them from having access to appropriate, timely, affordable and continuous health services.*

*The following is the statutory definition of the Health Care Safety Net, resulting from the Healthy Oregon Act (SB 329).*

- **Section 2 (8)** "Safety net provider" means providers that deliver health services to persons experiencing cultural, linguistic, geographic, financial or other barriers to accessing appropriate, timely, affordable and continuous health care services. "Safety net providers" includes health care safety net providers, core health care safety net providers, tribal and federal health care organizations and local nonprofit organizations, government agencies, hospitals and individual providers.
- **Section 2 (2)** "Core health care safety net provider" means a safety net provider that is especially adept at serving persons who experience significant barriers to accessing health care, including homelessness, language and cultural barriers, geographic isolation, mental illness, lack of health insurance, and financial barriers, and that has a mission or mandate to deliver services to persons who experience barriers to accessing care and serves a substantial share of persons without health insurance and persons who are enrolled in Medicaid or Medicare, as well as other vulnerable or special populations.
- **Statement of Principle:**  
**Section 3 (16)** The health care safety net is a key delivery system element for the protection of the health of Oregonians and the delivery of community-based care.