

Oregon Health Authority (OHA): Duties and Reporting

Duties

- Carry out policies adopted by the Oregon Health Policy Board;
- Develop policies for and the provision of publicly funded medical care and medical assistance in Oregon;
- Ensure the promotion and protection of public health and the licensing of health care facilities
- Develop the policies for and the provision of mental health treatment and treatment for substance abuse disorders;
- Be the state Medicaid agency for administration of Title XIX and XXI funds and administer medical assistance under ORS 414;
- Administer Public Employees Benefit Board (PEBB) and Oregon Educators Benefit Board (OEBB);
- Administer the Oregon Prescription Drug Program (OPDP);
- Administer the Family Health Insurance Assistance Program (FHIAP);
- Administer the Oregon Medical Insurance Program (OMIP);
- Responsibility for the Office for Oregon Health Policy and Research (OHPR)

Activities

- Guide and support, with authorization of the Board, **community-centered health initiatives**, especially those designed to address chronic disease;
- Guide and support **community three-share agreements**—local public/private initiatives designed to expand insurance coverage or access to health care with costs often shared between the employer, employee and the community (“three-share plan”);
- **Structure reimbursement rates** for medical assistance providers to reward comprehensive management of diseases, quality outcomes and the efficient use of resources and to promote cost-effective procedures, services and programs;
- Develop, in collaboration with the Department of Consumer and Business Services (DCBS), one or more insurance products designed to provide more **affordable options for the small group market**;
- Create an all-payer, all-claims database (APAC) to **monitor and evaluate health care reform** in Oregon and to **provide comparative cost and quality information to consumers, providers and purchasers** of health care in Oregon;
- Develop **uniform contracting standards** that include:
 - uniform quality standards and performance measures;
 - evidence-based guidelines for major chronic disease management and health care services with unexplained variation in frequency or cost;
 - evidence-based effectiveness guidelines for select new technologies and medical equipment; and
 - a statewide drug formulary that may be used by publicly funded health benefit plans

Reporting

- With the Department of Consumer and Business Services (DCBS), review and recommend to the Legislature standards and methodologies for:
 - Review of administrative expenses of health insurers,
 - Approval of rates
 - Enforcement of rating rules adopted by DCBS;
- Provide **regular reports to the OHPB with respect to the performance of health services contractors** serving recipients of medical assistance, including reports of trends in health services and enrollee satisfaction;

New statutory authorizations: Submit to LC requests for measures needed to provide statutory authorization to implement any of the authority's duties or HPB's recommendations;

- *Deadline: Oct 1 of each even numbered year*

Transfer of functions:

- *Deadline: June 30, 2011* - All changes necessary to accomplish transfer of functions in section 19, including delivery of records and property and transfer of employees, shall be completed by June 30, 2011.

Oregon Health Policy Board (OHPB): Duties and Reporting

The Oregon Health Policy Board is a nine member, Governor-appointed, Senate-confirmed, citizen-led Board that serves as the policy-making and oversight body for the Health Authority and all of the Authority's departmental divisions.

Duties of the Board:

- Establish **cost containment mechanisms** to reduce health care costs;
- Establish and refine **uniform, statewide health care quality standards** for use by all purchasers, third party payers and providers as quality performance benchmarks;
- Develop and submit a plan to the Legislative Assembly to provide and fund **access to affordable, quality health care for all Oregonians by 2015**; (*Deadline: Dec. 31, 2010*)
- Develop and submit a plan to the Legislative Assembly for the **Oregon Health Insurance Exchange**; (*Deadline: Dec. 31, 2010*);

Note: OHA (Section 17): in consultation with the Director of the DCBS, shall develop a plan for the staffing, funding and administration of the Oregon Health Insurance Exchange within the OHA (see list in Section 17).

- OHA: shall submit the plan developed under this section to the OHPB for approval.
 - OHPB: *Deadline: Oct. 1, 2010*: the HPB shall submit a request to Legislative Counsel for a measure to implement the plan.
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- Establish a **health benefit package** to be used as a baseline for all plans offered through the Exchange;
 - Develop and submit a plan to the Legislative Assembly for the development of a **publicly owned health benefit plan** within the Exchange; (*Deadline: Dec. 31, 2010*)
 - Investigate and report to the Legislative Assembly on the feasibility and advisability of **future changes to the health insurance market** including: (*Deadline: Dec. 31, 2010*)
 - **Individual mandate,**
 - **Payroll tax,**
 - **Expansion of the exchange** to include premium assistance program and advance reforms of the insurance market
 - Statewide implementation of **interoperable electronic health records**;
 - Ensure **health care workforce** sufficient in number and training;
 - Oversee expenditure of **Health Care Workforce Strategic Fund** to support grants to primary care providers and rural health practitioners to increase number of primary care educators and support efforts to create and develop career ladder opportunities;

September 2009

- Work with the **Public Health Benefit Purchasers Committee**, administrators of medical assistance program, and Department of Corrections to identify uniform contracting standards;
- Develop **uniform contracting standards** for the purchase of health care, including the following:
 - Uniform quality standards and performance measures (OHPB)
 - Evidence-based guidelines for major chronic disease management and health care services with unexplained variations in frequency or cost (OHPB)
 - Evidence-based effectiveness guidelines for select new technologies and medical equipment (OHPB); and
 - **A statewide drug formulary** that may be used by publicly funded health benefit plans.
- Develop health insurance premium assistance program to all low and moderate income Oregonians;
- Work with Oregon congressional delegation on federal law/policy changes to promote Oregon's comprehensive reform plan;

New statutory authorizations: Submit to LC requests for measures needed to provide statutory authorization to implement any of the HPB's duties or recommendations (*Oct 1 of each even numbered year*).

Permanent Committees of the Board

Public Health Benefit Purchasers Committee

Includes individuals who purchase healthcare for PEBB, OEBB, PERS, a city government, a county government, a special district, any private nonprofit organization that receives the majority of its funding from the state and requests to participate.

Duties:

- Identify and make specific recommendations to achieve uniformity across all public health benefit plan designs;
- Continuous review/report to OHPB on progress;
- Develop action plan for ongoing collaboration to implement benefit design;
- Identify uniform provisions for state and local public contracts for health benefit plans (in collaboration w/OHPB) including:
 - steps to implement joint contract provisions;
 - schedule for implementation of contract changes;
 - review process to protect against unintended cost shifts.
- *Deadlines:*
 - *Oct 1, 2010: proposals & plans completed;*
 - *Dec 31, 2010: proposals & plans due to OHPB for possible referral to Legislature*

Health Care Workforce Committee

Includes individuals who have the collective expertise, knowledge and experience in a broad range of health professions, health care education and health care workforce development initiatives.

Duties:

- Coordinate efforts to recruit, educate, retain quality workforce;
- Conduct inventory of all grants and other state resources available for expanding workforce;
- Establish goals to guide grants awarded from the Healthcare Workforce Strategic Fund.