

**73rd Legislative Assembly
Oregon Health Policy & Research
Health Policy Summary - 2005**

| BILL | TOPIC | SUMMARY |
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| OHPR | | |
| SB623 | OHPR | Repeals requirement that Legislative Assembly approve rules adopted by DHS for the Oregon Prescription Drug Program. Requires DHS to give notice to individual members of any interim or session committee with authority over the program if DHS proposes to adopt program rules. Sunsets the notice requirement on January 2, 2008. Declares emergency, effective on passage. 07/07 (S) - Chapter 314, 2005 Laws. Effective date, June 28, 2005. |
| SB1076 | OHPR | Modifies terms of office for members of OHPC. Removes two OHPC representatives from the Oregon Health Advisory Board. Declares emergency, effective on passage. |
| DHS | | |
| HB2500 | DHS | Requires that state operated drug and alcohol treatment programs comply with standards promulgated by DHS. 06/20 (H) – Chapter 271, (2005 Laws): Effective date January 1, 2006. |
| HB3108 | DHS - OHP | The measure includes four main provisions: (1) Sections 1-7 attempt to assist the DHS in its efforts to resolve issues with the federal CMS concerning Type A and B hospital reimbursement; (2) Section 8 allows DHS to adopt rules adjusting timelines for executing managed care contracts; (3) Section 9 directs DHS to adopt rules to adjust OHP services funded under ORS 414.705 (1) to comport with the 2005-07 Legislatively Adopted Budget; (4) Sections 10-12 establish a program to regulate cross connections and backflow assemblies that are part of a water system and allow DHS to assess fees to support the program. |
| HB5148 | DHS | Appropriates moneys from General Fund to DHS for certain biennial expenses. Limits biennial expenditures from fees, moneys or other revenues, including Miscellaneous Receipts, tobacco tax receipts and certain federal funds, but excluding lottery funds and other federal funds, collected or received by department for certain purposes. Limits biennial expenditures by department from certain lottery moneys. Limits biennial expenditures by department from certain federal funds. Authorizes specified non-limited expenditures. Limits biennial expenditures by department from Tobacco Settlement Funds Account. Appropriates moneys from |

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| | | General Fund to Emergency Board for allocation to department for certain purposes. Declares emergency, effective July 1, 2005. |
| SB510 | DHS | Extends an existing moratorium on the building of new residential care facilities. In addition, developers who submitted residential care facility project plans to the DHS before the moratorium was established will be required to pay an annual fee of \$5,000 for each fiscal year during which construction on the submitted project has not begun. The measure establishes the Residential Care Facility Licensing Moratorium Fee account and allows for the continuous appropriation of fee revenue in the account to DHS. |
| SB781 | DHS/Rx | Establishes that county mental health and developmental disability programs, subject to the availability of funds, include preventive mental health services and early identification of problems for older adults. Defines early identification and primary prevention. Establishes that specific mental health needs of older adults are documented and provided through local planning and monitoring. Establishes that local plans include outreach to older adults. Requires DHS, subject to the availability of funds, to develop guidelines for the development, maintenance and continuation of older adult mental health programs with professionals trained in geriatrics. Requires that community mental health and developmental disability programs, subject to available funds, include the potential for suicide in their assessment of at risk when determining priority for services. Directs DHS and Department of Corrections (DOC) to dispense mental health prescription drugs “as written” for persons in the custody of an institution until a health care professional with prescriptive authority becomes responsible for person’s treatment. Provides support for mental health and addiction services for seniors and persons with disabilities. Declares an emergency, effective July 1, 2005. |
| SB782 | DHS - OHP | Directs DHS to inform former recipients of public assistance who have been terminated from programs due to ineligibility or termination of program that former recipient may reapply if circumstances affecting eligibility change. Applies only to notices of termination that are revised or developed by DHS on or after effective date of Act. Exempts medical assistance recipients whose family income is no more than 10 percent of the federal poverty guidelines from the requirement to pay a monthly premium. Directs DHS to establish six month grace period for payment of overdue premiums for those recipients required to pay monthly premium. Directs DHS |

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| | | to apply for approval from the CMS for the six month grace period and the reapplication process. Allows DHS to pay a pharmacy for a brand name drug when cost, after discounts, is equal to or less than the generic version of the same drug. Declares emergency, effective on passage. |
| SB913 | DHS - OHP | Directs DHS to suspend medical assistance for certain persons while persons are residing in public institutions. Declares emergency, effective on passage. Directs the DHS to suspend, as opposed to terminate, medical assistance for a person with serious mental illness who becomes an inmate in a public institution. Specifies criteria for suspension. Effective on passage. |
| SB1088 | DHS - OHP | Directs DHS to adopt rules to modify the Medicaid drug benefit for persons who are eligible for both Medicare and Medicaid (“dual eligibles”) in response to provisions of the Medicare Modernization Act (MMA). The bill requires DHS to report to appropriate interim legislative committees with oversight of health care or human services programs on the adoption of the rules and the implementation of the MMA for persons who are dually eligible. Allows DHS to place claims against the estates of dually eligible persons for whom a MMA “clawback” payment has been made. |
| SB5576 | DHS/ IPGB - FHIAP | Relating to state financial administration; appropriating money; limiting expenditures; and declaring an emergency. |
| SB5610 | DHS | Requires DAS to transfer certain amounts from Tobacco Settlement Funds Account for certain purposes. Declares emergency, effective July 1, 2005. |
| DCBS | | |
| SB311 | DCBS | Requires the DCBS to regulate medical exams for workers’ compensation claims and to maintain a list of providers authorized to perform independent medical exams. Requires the agency by rule to set standards for certification, to develop and approve training, to develop a process for investigation of complaints, and to set |

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| | | criteria for sanctions under the medical exam program. Requires creation of an expedited process for a worker to appeal the insurer's choice of a medical examiner based on location. Provides an other funds expenditure limitation for implementation of the program in the 2005-07 biennium. |
| SB670 | DCBS | Requires the Director of the DCBS to "review and approve", instead of "prescribe", treatment standards for injured workers in managed care organizations. Specifies that managed care plans may not prohibit an attending physician from acting as an advocate for an injured worker's medical services or temporary disability benefits as supported by the medical record. 07/11 (S) -Chapter 364, 2005 Laws. Effective date, January 1, 2006. |
| IPGB | | |
| HB2062 | IPGB | Authorizes the IPGB to offer a health benefit plan to a small employer that contributed to a health benefit plan solely for the benefit of the employee or the employee's dependents. Defines small employer as employing two to 50 employees. Specifies that the employer pay a contribution toward the premium. Authorizes the board to establish residency requirements by administrative rule. Authorizes the IPGB to impose assessments between March 1, 2006 and January 1, 2008 on health insurance companies who have contracted with the board to offer certified plans to small employers. Specifies that the assessment not be greater than one percent of the premiums received by the carrier or a flat rate per health benefit plan sold by the carrier. Declares emergency and takes effect July 1, 2005. |
| HB2063 | IPGB - FHIAP | Clarifies terminology in the FHIAP statutes. Deletes obsolete definition and reference to 'Medical Savings Account'. Replaces term 'applicant' with 'bidder' when referring to a company applying to be a third-party contractor. Corrects statutory references and separates definitions between separate sections of law. |
| HB2064 | IPGB - FHIAP | Allows applicants for the FHIAP to include dependent elderly relatives and dependent disabled adult children living in their home as part of the family when applying for the benefit subsidy. Also clarifies which income and investments are counted for purposes of determining a family's financial eligibility. Authorizes the IPGB to establish residency requirements by rule. |

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| SB117 | IPGB - OMIP | Creates an additional category of eligibility under the OMIP for individuals who meet the qualifications of the federal Health Coverage Tax Credit and other criteria to be established by the OMIP Board. Declares emergency; takes effect July 1, 2005. |
| SB122 | IPGB - OMIP | Modifies the Assessment Reduction Program for insurers under the OMIP by allowing, instead of requiring, its application and allowing adjustment of the assessment based on the insurer's contribution to reducing enrollment in OMIP. 07/07 (S) - Chapter 304, 2005 Laws. Effective date, January 1, 2006. |
| SB123 | IPGB - OMIP | Changes the date for determining an insurer's assessment by the OMIP. Allows OMIP to establish and maintain maximum benefit limits that are compatible with current commercial insurance market offerings and establish certain specific exception criteria to the 12-month reenrollment waiting period via administrative rule. Allows OMIP to sign contracts with third party administrators or other vendors to provide services such as disease management and pharmacy service management. Provides the OMIP Board with the means to develop benefit designs for medical eligible enrollees. Declares emergency, effective on passage. |
| SB130 | IPGB - OMIP | Modifies the definition of "adverse underwriting decision" for purposes of qualifying individuals for eligibility in the OMIP program. Allows the OMIP Board to adopt a list of medical conditions that will automatically qualify individuals for OMIP. 07/07 (S) - Effective date, January 1, 2006. |
| SB303 | IPGB | Creates the Office of Private Health Partnerships (OPHP). Transfers functions and duties of IPGB to OPHP. Abolishes IPGB. Establishes that OPHP is under supervision of an Administrator and authorized to administer and reorganize the office as necessary. Requires Administrator to appoint a Deputy Director and all subordinate officers. Allows Administrator to adopt rules necessary for administration of laws necessary for carrying out laws that OPHP is charged with administering. Requires IPGB to transfer all records and property to OPHP and for Administrator to take possession of all property and charge of all employees. Requires Governor to resolve any dispute between IPGB and OPHP. Transfers moneys available to IPGB for biennium beginning July 1, 2005 for carrying out duties, functions and powers to OPHP for biennium beginning same date. Maintains all expenditure limitation for IPGB applicable to expenditures by OPHP. Allows Administrator to establish an advisory committee and to determine the representation of committee. Establishes that references to IPGB are |

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| | | to be considered a reference to OPHP. Requires Governor to appoint administrator on or before November 1, 2005. Defines “resident” as someone who meets residency based on rules established by OPHP. Allows office to establish, by rule, procedure for publication or release of aggregate data on applicants to the FHIAP or other agency programs. Declares an emergency effective upon passage. |
| SB5576 | IPGB– FHIAP/ DHS | Relating to state financial administration; appropriating money; limiting expenditures; and declaring an emergency. |
| INSURANCE | | |
| HB2192 | Insurance | Exempts state employer from continuing health coverage for an employee on military leave if the employee’s leave is with the Active Guard Reserve Program. Extends time period for agency health plan coverage for public employees subject to involuntary military call-up, from up to 12 months to up to 24months. 05/13 - Chapter 38, (2005 Laws): Effective date January 1, 2006. |
| HB2497 | Insurance/ Public Health | Eliminates sunset of required health insurance coverage for pregnancy and childbirth expenses; mammograms; pelvic examinations; and. Pap smear examinations. Declares emergency, effective on passage. 05/18 (H) - Chapter 69, (2005 Laws): Effective date May 18, 2006. |
| HB2498 | Insurance/ Public Health | Establishes that health insurance coverage include a physical examination of the breast, which may include but is not limited to, a clinical breast examination or at the recommendation of the primary care provider, for women age 18 years and older. Clarifies that an insurance policy covers physical breast examinations regardless of whether the health care provider performs other women’s health examinations. Exempts clinical breast examination coverage from existing sunset provisions. |
| HB2772 | Insurance | Allows insurance carriers to offer health benefit plans to 500 or more members of a “guaranteed association,” defined as a statewide nonprofit organizations of licensed individuals in a specified profession or industry. Requires the coverage to be offered without regard to health status of any member. Requires that for the first |

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| | | year, premium rates be blended and calculated as under the small employer health benefit plan. Allows using claims experience for rating in subsequent years. Requires members of the guaranteed association to apply for coverage only during annual periods of open enrollment. |
| HB3329 | Insurance | Requires group health insurance policies that cover hospital, medical or surgical costs to make payment for service to registered nurse first assistants. Directs State Board of Nursing to recognize by rule registered nurse first assistants who have been certified by a national organization. |
| HB3465 | Insurance | Repeals sunset, making permanent the requirement that insurers offering a health benefit plan offer coverage for emergency services without prior authorization. Declares emergency; effective upon passage. |
| SB1 | Insurance | Requires group health insurance policies to cover expenses for treatment of chemical dependency, mental or nervous conditions at the same level as and subject to limitations no more restrictive than those imposed on coverage or reimbursement of expenses for treatment of other medical conditions. Defines terms used in the Act. Prohibits coverage from treatment limitation, limits on payments for treatment, or limits on duration of treatment unless similar limitations exist for coverage of other medical conditions. Allows coverage to be limited to treatment that is medically necessary as determined under the policy for other medical conditions. Establishes that coverage is not required for educational, correctional or sheltered living provided by school or a halfway house; long term in a residential program that last more than 45 days; psychoanalysis or psychotherapy as part of an educational or training program; court-ordered sex offender treatment; or a screening interview or treatment program. Allows insured, under some circumstances, to receive outpatient services under terms of the insured's policy while living temporarily in a sheltered living situation. Removes maximum dollar amounts of treatment expenses for mental health and chemical dependency services that health insurance policies are required to cover for children and adults. Establishes that insurers may manage benefits by using contracted provider panels, differential designs, preadmission screenings, prior authorization, utilization review and other mechanisms. Removes nurse practitioners from list of those who can perform utilization reviews. Requires that utilization reviews adhere to standards set by National Committee for Quality Assurance or Medicare. Requires non-contracting providers to cooperate with same standards as contracting |

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| | | providers in utilization review procedures. Allows health maintenance organizations and health care service contractors to create substantive plan benefit and reimbursement differentials at the same level of and no more restrictive than those for other medical conditions. Specifies that DCBS adopt rules to administer provisions. Repeals statute related to DHS' rulemaking on insurance reimbursement, application and certification fees for nongovernmental, outpatient services. Applies Act to group health insurance policies issued or renewed on or after January 1, 2007. Declares January 1, 2007 as effective date of Act. |
| SB151 | Insurance | Increases current maximum personal injury protection (PIP) benefit payment limits for child care expenses. Restricts payment for essential services for injured non-working person who has been disabled for at least two weeks to services performed by person not related to injured person or residing in a person's household. Allows insurers to exclude coverage of PIP benefits to any injured person who willfully conceals or misrepresents facts in connection with claim for PIP benefits. Modifies method hospital services provider uses to determine amount to charge person who receives PIP benefits or that person's insurer. Applies to motor vehicle liability policies issued or renewed on or after effective date of this Act. 07/11 (S) - Chapter 341, 2005 Laws. Effective date, January 1, 2006. |
| SB501 | Insurance | Requires that insurance carriers provide an annual report to Department of Consumer and Business Services on total number of members, total premium, and total amount of costs for claims, medical loss ratio, average premium amount paid by each member per month, and percentage of change between premiums from the previous year. Requires that the report include aggregate financial information from preceding years of total amount of general administrative expenses, surplus maintained, reserves maintained for unpaid claims, new underwriting gains or losses, and net income after taxes. Requires the carriers to submit the information electronically. Requires the Health Insurance Reform Advisory Committee to evaluate information by each health plan, small employer plans, insurance plans for affiliated groups, and large employers. Requires the department to make reports available to public through a searchable Internet web site. Establishes July 1, 2006 as the deadline for carriers to submit information to the department. Directs carriers to report percentage changes in average premium per member per month, beginning with the carrier's 2007 annual report. Requires |

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| | | that, for an insured over 50 years of age, a health insurance policy must cover an annual fecal occult blood test plus one sigmoidoscopy every five years, a colonoscopy every 10 years or one double contrast barium enema every five years. Requires that colorectal screening examinations be covered by insurers for any high risk person regardless of age. Removes from definition of “high risk” a person who has an appropriate recognized gene marker for colorectal cancer. Stipulates that provisions related to sigmoidoscopy and colonoscopy apply to health insurance policies issued or renewed on or after January 1, 2006. Declares an emergency and takes effect upon passage. |
| SB573 | Insurance | Prohibits an insurance company from re-rating an existing insurance policy based on the credit history of the policy holder when the marital status of the policy holder changes due to death or divorce 07/14 (S) - Chapter 464, 2005 Laws. Effective date, January 1, 2006. |
| SB1026 | Insurance/ Public Health | Requires an insurer that covers hospital, medical or surgical expenses to provide biennial, or upon a physician’s recommendation, prostate cancer screening examinations including a digital rectal examination and prostate-specific antigen test. Requires coverage of the tests for men who are 50 years of age or older, and for men younger than 50 who at risk for prostate cancer as determined by the treating physician, including African American men and men with a family history of prostate cancer. Establishes that health care contractors and multiple employer welfare arrangements are subject to provide coverage. Applies to policies issued on or after the effective date of the Act (January 1, 2006) and sunsets after six years. 07/14 (S) - Chapter 477, 2005 Laws. Effective date, January 1, 2006. |
| WORKFORCE | | |
| HB2426 | Workforce | Authorizes limited access permit dental hygienists to provide dental hygiene services at specified locations and populations. Allows Board of Dentistry to add populations and locations as needed. Permits limited access permit dental hygienists to apply sealants and prescribe fluoride. Declares emergency, effective upon passage. 05/13 (H) - Chapter 52, (2005 Laws): Effective date May 13, 2005. |

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| HB2490 | Workforce | Expands BME to include member who has degree of Doctor of Podiatric Medicine. Limits voting authority of member who has degree of Doctor of Podiatric Medicine to matters involving podiatric physician and surgeon. Abolishes Advisory Council on Podiatry. Modifies definition of “dispensing physician,” for purposes of prescription drugs, to include podiatric physician and surgeon. |
| HB2754 | Workforce | Creates the Oregon Center for Health Professions within the Department of Higher Education to be administered by the OIT. |
| HB2800 | Workforce | Changes mandatory overtime rules for registered nurses, licensed practical nurses or certified nursing assistants. Decreases the number of hours that nurses, licensed practical nurses or certified nursing assistants may be required to work. Clarifies attendance at meetings, education, or training as time worked. Clarifies oncall time for nurses, licensed practical nurses and certified nursing assistants. Clarifies staffing requirements for nurses. Requires hospitals to create staffing committees composed of nurse managers, and direct care registered nurses. Adds “on call or standby at the premises” and “receiving education or training” as time at work. Establishes criteria for hospital staffing plans. Clarifies that committee to manage staffing does not preempt, modify or create a collective bargaining agreement. Requires that duties of a circulating nurse in a Type I ambulatory surgical center or hospital bed performed by a licensed register nurse and that center or hospital be allowed to request that DHS grant a variance to requirements. |
| HB3050 | Workforce | Authorizes students studying dentistry and dental hygiene at education institution outside Oregon to engage in clinical studies in Oregon. |
| HB3219 | Workforce | Authorizes Health Licensing Office (HLO) to establish criteria for reciprocal licensure of denturists. Requires out-of-state applicants to fulfill certain requirements, including, possession of a valid denturist license from another U.S. jurisdiction whose licensure requirements are not less than those required under Oregon law, completion of certain educational and practical requirements, and passing marks on a written and practical examination that is “substantially similar to the examination required for licensure in this state.” Expands subject matter on Oregon licensure examination by adding topics that are based on changes in industry technology, health care delivery systems, client safety, or scientific infection control techniques. 06/29 (H) - |

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| | | Chapter 415, (2005 Laws): Effective date January 1, 2006. |
| HB3260 | Workforce | Creates the Physical Therapy Practice Act. Defines physical therapist aide for professional classification. Clarifies physical therapist assistant, licensing and renewal process. Modifies Physical Therapist Licensing Board authority to impose, restrict or limit a physical therapist license. Specifies actions that the board may issue sanctions and licensure exemptions. Modifies board membership and duties. Allows the board to determine continuing education requirements. Allows physical therapists to accept referrals from veterinarians. |
| SB224 | Workforce | Increases members on the Board of Radiologic Technology to nine. Identifies board membership. Requires annual election of vice chairperson of board. Increases number of affirmative votes for the board to take action. 07/07 (S) - Chapter 307, 2005 Laws. Effective date, January 1, 2006. |
| SB404 | Workforce | Modifies criteria for participation in the Rural Health Services Program. Expands the program to include pharmacists. Provides loan repayments on behalf of physicians, physician assistants, nurse practitioners and pharmacists who agree to participate in the program by practicing in rural hospitals, rural health clinic or in a medically underserved rural community. Allows Oregon Student Assistance Commission (OSAP) to enter into agreements with no more than 10 prospective pharmacists to participate in program. Adds pharmacy school to list of qualifying institutions for loan repayments. Adds that in five years following completion of pharmacy residency or five years from the date of executing an agreement to serve in the area, whichever comes later, a pharmacist agrees to practice for at least three years in a rural hospital or rural clinics or a pharmacy that is located in a medically underserved rural community or a federally designated health professional shortage area. Adds that pharmacist serving in rural areas between three and five years is eligible for OSAP repayment of 20 percent of total of all qualifying loans. Defines pharmacist for Act. Declares emergency effective July 1, 2005. 07/11 (S) - Chapter 357, 2005 Laws. Effective date, July 1, 2005 |
| SB443 | Workforce/ Safety Net | Allows BME to require a physician or surgeon who volunteers at a health clinic and whose application is based on a license issued in another state or certification to take an examination if the person has ceased practice of medicine for 24 or more consecutive months prior to applying. Requires BME to make the application and examination for volunteer physicians and surgeons available on the Internet, and to charge a fee as determined |

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| | | by the BME. Defines “health clinic” as a public health clinic or health clinic operated by a charitable corporation that provides physical, dental or mental health services to low-income patients without charge or using a sliding fee scale. 07/11 (S) - Chapter 359, 2005 Laws. Effective date, January 1, 2006. |
| SB458 | Workforce | Requires Oregon Board of Dentistry to accept results of regional testing agencies or other state clinical board examinations for requirements of licensure to practice dentistry or dental hygiene in Oregon. Requires that board must accept regional testing agency or state clinical board examinations of applicants who have received a passing score on the test or examination or have practiced in other states, the military, Public Health Services or Department of Veteran’s Affairs for at least 3,500 hours in five years immediately preceding application to practice dentistry or dental hygiene in Oregon. 06/21 - Chapter 229, 2005 Laws. Effective date, January 1, 2006. |
| SB460 | Workforce | Allows clinical nurse specialists (CNSs) to prescribe and dispense prescription drugs in formulary developed by the Oregon State Board of Nursing. Specifies educational requirements for clinical nurse specialists to apply for prescriptive authority. Limits liability of clinical nurse specialists in certain circumstances. Directs the Oregon State Board of Nursing to report to the 74th Legislative Assembly on the implementation of CNS prescriptive authority. |
| SB490 | Workforce/ Public Health | Directs the Board of Pharmacy to develop rules that allows pharmacists to administer vaccines and immunizations to persons who are at least 18 years of age and influenza vaccines to persons who are at least 15 years of age. Changes name of Immunization Advisory Committee to Immunization and Vaccination Advisory Committee. 07/07 (S) - Chapter 312, 2005 Laws. Effective date, January 1, 2006 |
| SB512 | Workforce | Renames Pharmacists Diversion Program Diversionary Council. Changes registration system for pharmacy technicians to a licensing system. Removes language on specific arrest and disciplinary actions as a basis for the State Board of Pharmacy to refuse issuance of a pharmacy technician license. Allows Board to refuse issuing a pharmacy technician license based on existing disciplinary statutes. Applies modifications of disciplinary provisions of this Act to actions that occur on or after the effective date |

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| | | of the Act. Allows Board of Pharmacy to renew, suspend, revoke or restrict as well as issue a license for certain disciplinary violations. Allows a registered pharmacy technician to be considered a licensed pharmacy technician upon effective date of Act. Declares an emergency, effective upon passage. 07/07 (S) Chapter 313, 2005 Laws. Effective date, June 28, 2005. |
| SB576 | Workforce | Adds licensed registered nurses to list of health care providers who may sign to verify eligibility for an employee under the family leave law. Clarifies that a professional verifying eligibility is required to be working within the scope of their license. 06/14 (S) - Chapter 171, 2005 Laws. Effective date, January 1, 2006. |
| SB605 | Workforce/ Safety Net | Directs DHS to establish program informing retired physicians and health care providers about laws intended to increase volunteer participation at clinics providing primary care services. Extends immunity provided to volunteer health care providers to certain health clinics. Declares an emergency, effective July 1, 2005. 07/11 (S) - Chapter 362, 2005 Laws. Effective date, July 1, 2005 |
| SB620 | Workforce | Requires a health care practitioner working at a health care facility and providing direct care to patients to wear and visibly display an identification badge indicating the person's name and professional title. Requires a health care facility to adopt policies that specify the size and content of the badge. Specifies a "health care facility" to mean a hospital, long-term care facility, ambulatory surgical center and similar facilities, and mental health and drug treatment facilities. 06/21 - Chapter 231, 2005 Laws. Effective date, January 1, 2006. |
| SB697 | Workforce | Allows a physician to supervise four physician assistants (PA) with any population group or in any area of the state after January 2, 2006. Removes requirement that when a PA provides services where a physician does not regularly practice, that setting must be in a federally designated underserved, health professional shortage or medically underserved/disadvantaged area. Adds PAs to punitive damage exemption statute. 07/11 (S) - Chapter 366, 2005 Laws. Effective date, January 1, 2006. |
| SB880 | Workforce | Allows nurse practitioners (NP) to report to the courts, be notified about mechanical restraints and serve notice of observation as potential evidence during the involuntarily hospitalization of someone with mental illness. Allows NPs to issue a health certificate. Allows NPs to report to and interact with the court or act as expert |

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| | | <p>witness in matters involving involuntary custody of someone due to a public health issue. Allows any licensed health care provider who comes into contact with an individual's blood during the course of that person's practice to have the individual tested for various infectious diseases, and for an NP to receive the test results. Requires nurses to use precautionary measures to prevent the spread of communicable diseases. Allows a NP to maintain death records of institutionalized individuals. Allows NP to give provide advice to individuals regarding sterilizations. Requires correctional facilities to have written policies that include NPs as reviewers of facility's medical and dental plans, and to prescribe special diets. Allows a NP to provide birth control information and advice without regard to person's age. Allows a NP to advise the parent or legal guardian of a minor regarding diagnosis and treatment without consent of the minor, and not being subject to liability for advising the parent or guardian without the consent of the patient. Allows a NP to be recipient of a referral of a patient from a hearing aid specialist whose patient is exhibiting acute health care problems. Allows a NP to be present during a punishment by lethal injection. Allows a NP to sign a statement for a denturist that has not received endorsement from the Board of Denture Technology that a patient's oral cavity is of sufficient health for dentures. Allows a NP to sign hardship driver permit in situations where family members requires medical treatment on regular basis. Allows a NP to conduct a diagnostic examination of an individual seeking a probationary driver's permit. Allows a NP to certify a person is disabled for consideration of being a person with a disability under wildlife laws through the State Fish and Wildlife Commission. Exempts a NP who is seeking authority to dispense drugs at an institution of higher education from requirement that NP's practice area demonstrates a lack of readily available access to pharmacy services. Allows the Oregon State Board of Nursing to adopt rules allowing a NP with prescriptive authority to dispense drugs to a patient of that NP by a person acting under direction and control of the NP. 07/14 (S) - Chapter 471, 2005 Laws. Effective date, January 1, 2006.</p> |
| SB882 | Workforce | <p>Directs the Employment Department to perform statewide and regional needs assessment for health care occupations to be used by the Joint Boards of Education to inform higher education providers and health care industry employers of identified needs. Requires education boards, when approving health care education</p> |

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| | | programs, to use statewide needs assessment for the purposes of coordinating programs and facilitating student access to programs. 06/14 (S) - Chapter 202, 2005 Laws. Effective date, January 1, 2006. |
| SB936 | Workforce | Authorizes, under rules adopted by the Board of Medical Examiners, practitioners from outside Oregon to demonstrate practice of acupuncture within state as part of recognized and limited duration educational program, lecture or event. 07/11 (S) - Chapter 370, 2005 Laws. Effective date, January 1, 2006. |
| PUBLIC HEALTH | | |
| HB2497 | Public Health/ Insurance | Eliminates sunset of required health insurance coverage for pregnancy and childbirth expenses; mammograms; pelvic examinations; and. Pap smear examinations. Declares emergency, effective on passage. 05/18 (H) - Chapter 69, (2005 Laws): Effective date May 18, 2006 |
| HB2498 | Public Health/ Insurance | Establishes that health insurance coverage include a physical examination of the breast, which may include but is not limited to, a clinical breast examination or at the recommendation of the primary care provider, for women age 18 years and older. Clarifies that an insurance policy cover physical breast examinations regardless of whether the health care provider performs other women's health examinations. Exempts clinical breast examination coverage from existing sunset provisions. |
| HB2706 | Public Health | Expands ORS 433.017, the statute governing informed consent for prenatal blood tests for infectious condition, to include testing for HIV. Exempts women from additional informed consent provisions for HIV testing when the test is conducted as part of routine prenatal blood draw. |
| HJM8 | Public Health | Expresses support for participation by Taiwan in the World Health Organization. 05/09 (H) *Filed with Secretary of State |
| SB225 | Public Health | Modifies the scope of immunization registry maintained by the DHS. Modifies requirements for documentation of immunizations necessary for attendance at educational institutions in Oregon. Clarifies that all full-time students coming from outside the United States to attend classes have to provide immunization documentation before attending classes. 07/11 (S) - Chapter 343, 2005 Laws. Effective date, January 1, 2006. |
| SB490 | Public Health/ | Directs the Board of Pharmacy to develop rules that allows pharmacists to administer vaccines and |

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| BILL | TOPIC | SUMMARY |
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| | Workforce | immunizations to persons who are at least 18 years of age and influenza vaccines to persons who are at least 15 years of age. Changes name of Immunization Advisory Committee to Immunization and Vaccination Advisory Committee. 07/07 (S) - Chapter 312, 2005 Laws. Effective date, January 1, 2006 |
| SB618 | Public Health | Allows employers to provide unpaid rest periods to accommodate employees who are nursing and wish to express milk. Requires employee to, if feasible, take the same rest period as other employees. Allows employer to permit an employee to make up time before or after her shift if she uses an unpaid rest period to express milk. Allows an employer to not compensate an employee for the unpaid rest time when the employee does not work to make up the amount of time used. Allows employers to make reasonable accommodation for a room or location, other than a rest room or toilet stall, in close proximity to the employee's work area or a child care facility in close proximity to employee's work location where employee can express milk in private. Applies provisions to employee nursing a child age 18 months or younger. Allows employer to temporarily change job duties if an employee's regular duties do not allow her to express milk. Applies to employers who employ 25 or more persons. 07/14 (S) - Chapter 466, 2005 Laws. Effective date, January 1, 2006. |
| SB855 | Public Health | Requires DHS to contract for providing children and family health services with any federally recognized tribe that requests funding to deliver services under the Title V Maternal and Child Health Services Block Grant. Establishes that the contract must specify a per capita or other equitable payment formula; that the tribe must provide comparable services to other local public health authorities; and the tribe must comply with any state or federal requirements for public health authorities. |
| SB1026 | Public Health/ Insurance | Requires an insurer that covers hospital, medical or surgical expenses to provide biennial, or upon a physician's recommendation, prostate cancer screening examinations including a digital rectal examination and prostate-specific antigen test. Requires coverage of the tests for men who are 50 years of age or older, and for men younger than 50 who at risk for prostate cancer as determined by the treating physician, including African American men and men with a family history of prostate cancer. Establishes that health care contractors and multiple employer welfare arrangements are subject to provide coverage. Applies to policies issued on or after the effective date of the Act (January 1, 2006) and sunsets after six years. 07/14 (S) - Chapter 477, 2005 |

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| | | Laws. Effective date, January 1, 2006. |
| SB1076 | Public Health/ OHPR – HPC | Modifies terms of office for members of OHPC. Removes two OHPC representatives from the PHAB. Declares emergency, effective on passage. |
| SCR7 | Public Health | Recognizes and endorses collaborative work of industry, education and agency partners to develop and implement health care education initiative toward health care education. 06/22 (S) - *Filed With Secretary of State. |
| Rx | | |
| HB2480 | Rx | Prohibits DHS from limiting prescription drugs used to treat Hepatitis C in connection with the OHP. Declares emergency; effective upon passage. |

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| HB2485 | Rx | <p>Expands list of places declared to be public nuisances subject to enjoinder and abatement. Expands crimes of Arson in the First and Second Degrees to include starting fire or causing explosion while engaging in manufacture of methamphetamine. Creates crime of Possessing or Disposing of methamphetamine manufacturing waste (Class C felony; maximum 5 years imprisonment, \$125,000 fine, or both). Creates crime of Distribution of Equipment, Solvent, Reagent or Precursor Substance with intent to facilitate manufacture of methamphetamine (Class B felony; maximum 10 years imprisonment, \$250,000 fine, or both). Creates crime of Unlawful Possession of Lithium Metal or Sodium Metal (Class A misdemeanor; maximum 1 year imprisonment, \$6250 fine, or both). Expands crime of Theft in the First Degree to include theft of precursor substance. Modifies crimes of possession and distribution of ephedrine, pseudoephedrine, and phenylpropanolamine. Directs Board of Pharmacy to adopt rules classifying products containing ephedrine, pseudoephedrine, and phenylpropanolamine as Schedule III controlled substance by July 1, 2006. Creates affirmative defense for pseudoephedrine possession under certain circumstances. Modifies crime of unlawful possession of iodine in its elemental form to prohibit possession of any amount. Expands recording requirements for sales or transfers of iodine in its elemental form and iodine matrix. Increases punishment for failure to comply with requirements (Class A misdemeanor). Creates crimes of Unlawful Distribution of Iodine in its Elemental Form and Iodine Matrix (Class A misdemeanors). Directs State Department of Agriculture to certify brands of nontoxic dye or other additive that distributor may add to anhydrous ammonia. Requires Director of Agriculture appoint Anhydrous Ammonia Additive Review Committee. Authorizes Department of Human Services, under certain conditions and upon recommendation of probation, parole or post-prison supervision agency, to suspend food stamp benefits of person who has been convicted of manufacture or delivery of controlled substance. Directs Oregon Criminal Justice Commission to receive grant applications to start or continue drug court programs. Declares an emergency, effective on passage.</p> |

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| BILL | TOPIC | SUMMARY |
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| SB781 | Rx/ DHS | Establishes that county mental health and developmental disability programs, subject to the availability of funds, include preventive mental health services and early identification of problems for older adults. Defines early identification and primary prevention. Establishes that specific mental health needs of older adults are documented and provided through local planning and monitoring. Establishes that local plans include outreach to older adults. Requires DHS, subject to the availability of funds, to develop guidelines for the development, maintenance and continuation of older adult mental health programs with professionals trained in geriatrics. Requires that community mental health and developmental disability programs, subject to available funds, include the potential for suicide in their assessment of at risk when determining priority for services. Directs DHS and Department of Corrections (DOC) to dispense mental health prescription drugs “as written” for persons in the custody of an institution until a health care professional with prescriptive authority becomes responsible for person’s treatment. Provides support for mental health and addiction services for seniors and persons with disabilities. Declares an emergency, effective July 1, 2005. |
| SAFETY NET | | |
| HB3443 | Safety Net | Creates 2-1-1 as statewide telephone number for access to health and human services information. Directs the Office of Emergency Management (OEM) to establish 2-1-1 system and system criteria. Allows the OEM to accept federal or other source moneys and that OEM provide grants to 2-1-1 providers. Declares emergency, effective on passage. |
| SB443 | Safety Net/ Workforce | Allows BME to require a physician or surgeon who volunteers at a health clinic and whose application is based on a license issued in another state or certification to take an examination if the person has ceased practice of medicine for 24 or more consecutive months prior to applying. Requires BME to make the application and examination for volunteer physicians and surgeons available on the Internet, and to charge a fee as determined by the BME. Defines “health clinic” as a public health clinic or health clinic operated by a charitable corporation that provides physical, dental or mental health services to low-income patients without charge or using a sliding fee scale. 07/11 (S) - Chapter 359, 2005 Laws. Effective date, January 1, 2006. |

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| SB605 | Safety Net/ Workforce | Directs DHS to establish program informing retired physicians and health care providers about laws intended to increase volunteer participation at clinics providing primary care services. Extends immunity provided to volunteer health care providers to certain health clinics. Declares an emergency, effective July 1, 2005. 07/11 (S) - Chapter 362, 2005 Laws. Effective date, July 1, 2005. |
| CONFIDENTIALITY | | |
| HB2442 | Confidentiality | Specifies that a person designated as a health care representative under an Advanced Directive for Health Care/LivingWill is considered a personal representative under state and federal laws governing the disclosure of protected personal health information. |
| SB278 | Confidentiality | Defines who may act as a personal representative of deceased for purpose of access to protected health information records. Applies in cases where no personal representative has been appointed by the court, and where personal representative has previously been appointed but was subsequently discharged. 06/29 (S) - Chapter 253, 2005 Laws. Effective date, June 20, 2005. |
| SB332 | Confidentiality | Extends physician-patient privilege to confidential communications between patients and dentists. 07/11 (S) - Chapter 353, 2005 Laws. Effective date, January 1, 2006. |
| MISCELLANEOUS | | |
| HB2147 | Miscellaneous | Deletes suspense accounts related to provider tax assessments. Clarifies that a purpose of the Hospital Quality Assurance Fund, Long Term Care Facility Quality Assurance Fund, Medical Care Quality Assurance Fund and Pace Quality Assurance Fund is paying refunds to health providers. Allows long-term care facilities to pay the provider tax electronically. Modifies the definition of patient day for the long-term care provider tax to eliminate imposition of tax on the day of discharge, Unless the patient is admitted and discharged on the same day. Changes and clarifies the requirements necessary to qualify as a wavered long term care facility. Requires the DHS to refund any provider tax under ages assessed prior to the effective date of this Act for any assessment period beginning earlier than July 1, 2004. Restricts the DHS from assessing any provider tax under |

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| | | ages beginning fiscal year 2005-06 so future provider taxes will be based on projected long-term care facilities' revenue and not actual revenue of these health facilities. Extends the sunset on the long term care provider tax, one year, to July 1, 2008. Specifies that this Act is revenue raising and requires a 3/5 majority vote to approve. Takes effect 90 days after the end of legislative session. |
| HB3318 | Miscellaneous | Increases the amount employers may pay for medical services in non-disabling claims from \$500 to \$1,500. |
| HJM18 | Miscellaneous | Urges Congress to change veterans' health care funding from discretionary spending funded by annual appropriation to direct spending funded by permanent appropriation. 07/12 (H)* Filed with Secretary of State |
| SB585 | Miscellaneous | Prohibits motor vehicle liability insurers from contracting for managed care services to beneficiaries. Permits insurers to contract for evaluation services. Clarifies hospital and medical services lien provisions payable under automobile insurance policies. 07/14 (S) - Chapter 465, 2005 Laws. Effective date, January 1, 2006. |
| SB853 | Miscellaneous | Authorizes state public universities to establish venture development funds to provide capital grants for entrepreneurial programs and "proof of concept" funding for commercially viable products and services. Allows taxpayers who contribute to such funds to claim 60 percent of the contribution as a personal or corporate tax credit, up to \$50,000. Spreads the credit allowance over three tax years by limiting it to 20 percent of the contribution in any one tax year. Caps total venture development fund contributions eligible for tax credits at \$10 million to the Oregon University System and \$4 million to OHSU. Requires a university to transfer 20 percent of the income received from funded activities to the state General Fund until the total amount of credits claimed due to contributions to the fund is reimbursed. Requires grant recipients to remain in the state for five years or to repay the grant. Requires the State Treasurer to set up the development funds and to invest moneys deposited in the funds. Applies the credit to contributions on or after January 1, 2006. |

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