

July 27, 2022

Pat Allen, Director, Oregon Health Authority
500 Summer Street NE, E-20
Salem, OR 97301

Delivered electronically to: hcmo.info@dhsosha.state.or.us

RE: Rules Advisory Committee for the Health Care Market Oversight Program

Dear Director Allen,

We appreciate OHA's work to update the rules to ensure the program continues to reflect its original legislative intent. The Health Care Market Oversight Program is an essential complement to Oregon's Sustainable Health Care Cost Growth Target and a critical tool to advance the agency's goal of achieving health equity.

First, we are supportive of the four categories of services essential to achieving health equity included in the sub-regulatory documents being enshrined in rule as written. We believe these categories provide specificity, but also the flexibility to ensure that transactions are examined on the dimensions that affect health equity across diverse communities throughout our state.

In addition, the inclusion of this language takes on new importance in the wake of recent federal decisions that weaken access to care in other states. Without these types of protections that ensure patients have access to the full range of reproductive care, it is possible to see further eroding in Oregon as well.

While we would like to argue that any negative impact to essential services should trigger review, we are comfortable with codifying the one-third reduction currently in the sub-regulatory documents into rule in Section 409-070-0010(3). Given that the protection and advancement of access to essential services is at the core of HCMO, the threshold for what requires notification should be at or near the minimum of what is acceptable and believe strongly this threshold should not be raised any further. If there is a valid reason for a significant change to the availability of services, then there is a process to share that rationale and proceed with the transaction after an initial review.

We are also happy to see the new provisions OHA has put in place here related to per-diems and travel allowances for community review board members who qualify; these funds will allow for more full participation by community members who may be affected by transactions.

The only addition we urge the agency to reconsider is shortening the timeline outlined in section 409-070-0022(8) related to when OHA will publish the entity names and type of emergency transactions that the Authority exempts from review. We understand that some previous RAC members were concerned that disclosing these transactions as they happen could potentially create a destabilizing effect in our healthcare market; however, 24 months before the public learns that a transaction did not require review seems excessive. We recommend shortening this window to 6 months after a transaction has consummated or closed, given that OHA can use its discretion to delay public disclosure if it deems market destabilization to be a significant risk.

In addition, this timeframe is to establish the very earliest OHA may choose to disclose information about these transactions.

We believe the program will be well-positioned for success in 2023 and beyond, and we thank the agency for its continued commitment to the implementation of HCMO.

Please do not hesitate to reach out if you should require further clarification on any of the points outlined below.

Sincerely,
Planned Parenthood Advocates of Oregon
Pro-Choice Oregon
Basic Rights Oregon

