



## NOTICE OF PROPOSED RULEMAKING INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 409  
OREGON HEALTH AUTHORITY  
HEALTH POLICY AND ANALYTICS

**FILED**

12/21/2021 9:18 AM  
ARCHIVES DIVISION  
SECRETARY OF STATE

FILING CAPTION: Oregon Health Authority's review of health care entities' proposed material change transactions

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 01/24/2022 5:00 PM

*The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.*

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Filed By:  
Pete Edlund  
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### HEARING(S)

*Auxiliary aids for persons with disabilities are available upon advance request. Notify the contact listed above.*

DATE: 01/19/2022

TIME: 1:00 PM - 3:00 PM

OFFICER: Pete Edlund

ADDRESS: Remote Meeting Only

421 SW Oak St

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Portland, OR 97204

### SPECIAL INSTRUCTIONS:

Due to the ongoing COVID-19 public health danger this meeting is REMOTE ONLY. Please contact peter.m.edlund@dhsosha.state.or.us for the Zoom registration link.

To call in, dial by your location:

+1 669 254 5252 US (San Jose)

+1 646 828 7666 US (New York)

Meeting ID: 160 776 8972

Passcode: 537461

### NEED FOR THE RULE(S)

OHA is creating the Health Care Market Oversight Program to conduct the reviews and analyses mandated in HB 2362. The new program will sit in the Oregon Health Authority's Health Policy & Analytics Division. The new program is charged with reviewing proposed material change transactions involving health care entities in Oregon. These rules establish the parameters of the program and its operations.

### DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

The program website is <https://www.oregon.gov/oha/HPA/HP/Pages/health-care-market-oversight.aspx>

This website hosts all publicly shared documents including multiple drafts of rules, the list of rules advisory committee members, summaries of changes, and additional documents.

## FISCAL AND ECONOMIC IMPACT:

The program is designed to have a positive economic impact on people living in Oregon. The statute specifies that a health care entity may engage in a material change transaction if, after a review conducted by the Oregon Health Authority, the Authority determines that the transaction will, among other things, reduce the growth of patient costs. Moreover, after every approved material change transaction, the Authority is tasked with analyzing the transaction one, two, and five years later, focusing on, among other things, the cost trends and cost growth trends of the parties to the transaction.

The program will also have a fiscal impact on the entities proposing transactions. There are fees associated with the program and depending on the size of the entities, the level of review required, and if outside experts are needed, a given entity could face a significant fiscal impact. There also may be economic impacts from the new 180-day notice requirement, as specified in statute.

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## COST OF COMPLIANCE:

*(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).*

1: The new program will sit in Oregon Health Authority Health Policy & Analytics Division and will include four new positions. When necessary, the program may collaborate with other state agencies such as the Department of Consumer & Business Services, the Department of Justice, and other agencies.

There may be an impact to local governments for those hospitals or health care entities that are a part of a local health authority, if those entities engage in a proposed material change transaction.

The program is designed to have a positive impact on the public. For emergency situations in which there is an immediate threat to health care services, the program will exempt an entity from the 180-day notice requirement.

2a: The statute limits the number of entities subject to the new requirements. Only transactions that involve one entity with an average revenue of \$10 million or more and another entity with an average revenue of \$25 million or more are subject to the requirements of the program. It is possible that a small business with 50 or fewer staff could be subject to the requirements in this program, depending on the average revenue of the business. Only transactions involving a health care entity are subject to review under this program. Historical data regarding industry, average revenue, and involvement in a material change transaction are not available.

Health care entities are defined in the statute as individual health professionals, hospitals, carriers, coordinated care organizations, and other entities that have a primary function of providing health care items or services.

2b: As a result of this program there is an increase in administrative burden for qualifying entities proposing a qualifying transaction because they will be required to submit forms and materials to the program. Entities will also be required to furnish information after a transaction is completed, so that the Oregon Health Authority can conduct the required analyses after each approved transaction. Therefore, entities may need to keep records regarding the transaction and any conditions imposed by OHA.

The statute also specifies that the party or parties to a transaction shall bear the reasonable and actual cost of professionals who are retained by the Oregon Health Authority or the Department of Justice.

The program may impose conditions on the approval of a transaction, and those conditions may affect the business. The program also has the statutory authority to reject a proposed transaction, and such an action may affect the business.

2c: As a result of the program there may be an increase in labor associated with completing the required forms and exhibits. There are no anticipated significant costs associated with increases in equipment or supplies to comply with the new requirements.

DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

The Oregon Health Authority invited all organizations that provided testimony on HB 2362 as well as other entities to send representatives to participate in the Rules Advisory Committee process. The Oregon Health Authority accepted all individuals who requested to be a member and a total of 35 individuals comprise the Rules Advisory Committee. The program website also solicited input from the general public, and listed the program email address to which input should be sent. During every Rules Advisory Committee meeting, agency staff solicited public comment.

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WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? YES

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RULES PROPOSED:

409-070-0000, 409-070-0005, 409-070-0010, 409-070-0015, 409-070-0020, 409-070-0022, 409-070-0025, 409-070-0030, 409-070-0035, 409-070-0040, 409-070-0042, 409-070-0045, 409-070-0050, 409-070-0055, 409-070-0060, 409-070-0065, 409-070-0070, 409-070-0075, 409-070-0080, 409-070-0085

ADOPT: 409-070-0000

RULE SUMMARY: Section OAR 409-070-0000 is the Scope and Purpose and outlines the key goals of the program.

CHANGES TO RULE:

409-070-0000

Scope and Purpose

(1) OAR 409-070-0000 through OAR 409-070-0085 are adopted pursuant to authority in section 2 of the 2021 Act. OAR 409-070-0000 through OAR 409-070-0085 govern the procedure for filing notices of material change transactions and the criteria and procedure for review of material change transactions.¶

(2) Pursuant to Section 2(1) of the 2021 Act, the purpose of these rules is to promote the public interest and to advance the goals of the Authority and the Oregon Integrated and Coordinated Care Delivery System described in ORS 414.018 and ORS 414.620.¶

(3) The Authority and the Department shall aim to achieve the following goals when reviewing proposed material change transactions: ¶

(a) Improving health, increasing the quality, reliability, availability and continuity of care and reducing the cost of care for people living in Oregon.¶

(b) Achieving health equity and equitable access to care.¶

(c) A process that is transparent, robust and informed by the public, including the local community, through meaningful engagement.¶

(d) Using resources wisely and in collaboration with the Department when applicable.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

RULE SUMMARY: Section OAR 409-070-0005 lists the definitions used in these rules.

CHANGES TO RULE:

409-070-0005

Definitions

OAR 409-070-0005. MATERIAL CHANGE TRANSACTIONS: Definitions¶¶

When used and not otherwise defined in OAR 409-070-0000 through OAR 409-070-0085, the following terms shall have the meaning given in this section:¶¶

(1) "2021 Act" means 2021 Oregon Laws Ch. 615 (H.B. 2362).¶¶

(2) "Administrative services" means support and administration services, outsourced and subcontracted services and other equivalent services and servicing arrangements relating to, supporting or facilitating the provision of patient care and services.¶¶

(3) "Authority" means the Oregon Health Authority.¶¶

(4) "AVP methodologies" means the advanced value-based payment models (3A and higher) described in the Oregon Value-Based Payment Compact (June 28, 2021). ¶¶

(5) "Carrier" means:¶¶

(a) a carrier as defined in ORS 743B.005 (but excluding subsection (d) thereof); or¶¶

(b) any person that offers Medicare Advantage plans in this state.¶¶

(6) "Charitable organization" has the meaning given in ORS 128.620.¶¶

(7) "Comprehensive management services" means a person provides all or substantially all the personnel, or manages all or substantially all the operations, of a health care entity.¶¶

(8) "Control" means the direct or indirect power to manage a legal entity or set the legal entity's policies, whether by owning voting securities, by contract other than a commercial contract for goods or nonmanagement services, or otherwise, unless the power is the result of an official position or corporate office. ¶¶

(9) "Coordinated care organization" has the meaning given in ORS 414.025.¶¶

(10) "Corporate affiliation" means a health care entity controls, is controlled by, or is under common control with another legal entity. ¶¶

(11) "Covered transaction" means a transaction described in OAR 409-070-0010.¶¶

(12) "Department" means the Department of Consumer and Business Services.¶¶

(13) "Domestic health insurer" means an insurer as defined in ORS 731.106 or a health care service contractor as defined in ORS 750.005 that is formed under the laws of this state and has a certificate of authority from the Department to insure personal health risks, or pay for or provide health care services, whether in the form of indemnity insurance, managed care products or any other form or type of individual or group health insurance or health care service contract.¶¶

(14) In accordance with Section 1 of the 2021 Act, "essential services" means:¶¶

(a) Services that are funded on the prioritized list of health services described in ORS 414.690, as in effect at the time of notice submission; and¶¶

(b) Services that are essential to achieve health equity.¶¶

(15) In accordance with Section 1 of the 2021 Act, "health benefit plan" has the meaning given in ORS 743B.005.¶¶

(16) In accordance with Section 1 of the 2021 Act, "health care entity" includes all of the following:¶¶

(a) An individual health professional licensed or certified in this state.¶¶

(b) A hospital, as defined in ORS 442.015.¶¶

(c) A hospital system.¶¶

(d) A carrier that offers a health benefit plan or Medicare Advantage plan in this state.¶¶

(e) A coordinated care organization or a prepaid managed care health services organization, as the term is defined in ORS 414.025.¶¶

(f) Any other entity that has as a primary function the provision of health care items or services, including physical, behavioral or dental health items or services.¶¶

(g) Any other entity that has control over, is controlled by, or is under common control with, an entity that has as a primary function the provision of health care items or services. ¶¶

(17) In accordance with Section 1 of the 2021 Act, "health care entity" does not include:¶¶

(a) Long term care facilities, as defined in ORS 442.015.¶¶

(b) Facilities licensed and operated under ORS 443.400 through 443.455.¶¶

(18) "Health equity" means a health system having and offering infrastructure, facilities, services, geographic coverage, affordability and all other relevant features, conditions and capabilities that will provide all people with the opportunity and reasonable expectation that they can reach their full health potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, age, gender, gender identity, sexual orientation,

social class, intersections among these communities or identities, or their socially determined circumstances.¶

(19) "Hospital" has the meaning given in ORS 442.015.¶

(20) "Independent practice association" has the meaning given in ORS 743B.001.¶

(21) "Material change transaction" means a covered transaction that is material under the materiality standards set forth in OAR 409-070-0015.¶

(22) In accordance with Section 1 of the 2021 Act, "net patient revenue" means the total amount of income, after allowance for contractual amounts, charity care and bad debt, received for patient care and services, including: ¶

(a) Value-based payments, incentive payments, capitation payments, payments under any similar contractual arrangement for the prepayment or reimbursement of patient care and services; and¶

(b) Any payment received by a hospital to reimburse a hospital assessment under ORS 414.855.¶

(23) "Person" has the meaning given in ORS 731.116. ¶

(24) "Program website" means the Authority's website for the Health Care Market Oversight Program, currently at <https://www.oregon.gov/oha/HPA/HP/Pages/health-care-market-oversight.aspx>. ¶

(25) "Provider" means a person licensed, certified or otherwise authorized or permitted by laws of Oregon to administer or provide medical or mental health services in the ordinary course of business or practice of a profession. ¶

(26) In accordance with Section 1 of the 2021 Act, "revenue" means net patient revenue and the gross amount of premiums received by a health care entity that are derived from health benefit plans.¶

(27) "Term sheet" means a memorandum of understanding or letter of intent setting forth the negotiated terms and conditions of the proposed transaction in reasonable detail, signed by the parties to a proposed transaction, or any other equivalent document that sets forth an agreement in principle for a proposed transaction.¶

(28) "These rules" means the rules set forth in OAR 409-070-000 through OAR 406-070-0085.¶

(29) "Voting security" means a security that entitles the owner or holder of the security to vote at a meeting of shareholders, a membership interest having voting rights in a limited liability company or nonprofit corporation, a partnership interest having voting rights in a limited or general partnership or any other type of instrument that confers on the holder of the instrument voting rights in the governance of a legal entity. A "voting security" also includes a security that is convertible into a voting security or that is evidence of a right to acquire a voting security.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

RULE SUMMARY: Section OAR 409-070-0010 outlines the covered transactions that are subject to review under the new program.

CHANGES TO RULE:

#### 409-070-0010

##### Covered Transactions

(1) Pursuant to Section 1(6) and (10) of the 2021 Act and subject to the materiality standards under OAR 409-070-0015, transactions that are subject to review under these rules are the following:¶

(a) A merger or consolidation of a health care entity with another entity;¶

(b) An acquisition of a health care entity by another entity; ¶

(c) A transaction to form a new contract, new clinical affiliation or new contracting affiliation between or among health care entities that will eliminate or significantly reduce essential services; ¶

(d) Formation of a corporate affiliation involving at least one health care entity; or¶

(e) A transaction to form a new partnership, joint venture, accountable care organization, parent organization or management services organization between or among health care entities that will:¶

(A) Eliminate or significantly reduce essential services;¶

(B) Consolidate or combine providers of essential services when contracting payment rates with payers, insurers, or coordinated care organizations; or¶

(C) Consolidate or combine insurers when establishing health benefit premiums.¶

(2) An acquisition of a health care entity occurs when: ¶

(a) Another person acquires control of the health care entity including acquiring a controlling interest as described in OAR 409-070-0025;¶

(b) Another person acquires, directly or indirectly, voting control of more than fifty percent (50%) of any class of voting securities of the health care entity other than a domestic insurer as described in OAR 409-070-0025(1)(c);¶

(c) Another person acquires all or substantially all of the health care entity's assets and operations; ¶

(d) Another person undertakes to provide the health care entity with comprehensive management services; or¶

(e) The health care entity merges tax identification numbers or corporate governance with another entity.¶

(3) The Authority shall develop and issue a guidance document to assist health care entities in determining whether a transaction will significantly reduce essential services for purposes of being a covered transaction under this rule. In developing the guidance, the Authority shall include consideration of whether any significant impacts arise from:¶

(a) An increase in time or distance for community members to access essential services, particularly for historically or currently underserved populations or community members using public transportation;¶

(b) A reduction in the number of providers, including the number of culturally competent providers, health care interpreters, or traditional healthcare workers, or a reduction in the number of clinical experiences or training opportunities for individuals enrolled in a professional clinical education program;¶

(c) A reduction in the number of providers serving new patients, providers serving individuals who are uninsured, or providers serving individuals who are underinsured;¶

(d) Any restrictions on providers regarding rendering, discussing, or referring for any essential services;¶

(e) A decrease in the availability of essential services or the range of available essential services;¶

(f) An increase in appointment wait times for essential services;¶

(g) An increase in any barriers for community members seeking care, such as new prior authorization processes or required consultations before receiving essential services; or¶

(h) A reduction in the availability of any specific type of care such as primary care, behavioral health care, oral health care, specialty care, pregnancy care, inpatient care, outpatient care, or emergent care as relates to the provision of essential services.¶

(4) Any change in the guidance document under paragraph (3) of this rule that the Authority publishes after the effective date of these rules shall be effective no less than 180 calendar days after publication.¶

(5) The foregoing standards in paragraph (3) of this rule do not alter any regulatory standards that may otherwise apply to a health care entity.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

ADOPT: 409-070-0015

RULE SUMMARY: Section OAR 409-070-0015 describes the materiality standard and answers the question what is a material change transaction.

CHANGES TO RULE:

409-070-0015

Materiality Standard

(1) Pursuant to Section 1(6) and (9) and Section 2(4) of the 2021 Act, a covered transaction under OAR 409-070-0010 is a material change transaction and shall be subject to review under these rules if:

(a) At least one party to the transaction had average annual revenue of \$25 million or more in the party's three most recent fiscal years; and

(b) Another party to the transaction:

(A) had average annual revenue of \$10 million or more in that party's three most recent three fiscal years; or

(B) if such party is a newly organized legal entity, is projected to have at least \$10 million in revenue over its first full year of operation at normal levels of utilization or operation.

(2) A covered transaction under OAR 409-070-0010 that qualifies as material under paragraph (1) of this rule shall be subject to review under these rules notwithstanding that the transaction involves a health care entity located in this state and an out-of-state entity if the transaction may increase the price of health care services or limit access to health care services in this state.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

RULE SUMMARY: Section OAR 409-070-0020 lists the types of transactions that are excluded from this program and are therefore not subject to review.

CHANGES TO RULE:

409-070-0020

Excluded Transactions

(1) Pursuant to Section 1(6)(b) and (7) of the 2021 Act, the following transactions are not material change transactions subject to review under these rules:¶

(a) A clinical affiliation of health care entities formed to collaborate on clinical trials or graduate medical education programs.¶

(b) A medical services contract or an extension of a medical services contract as described in paragraph (2) of this rule.¶

(c) An affiliation that, pursuant to Section 1(6)(b)(C) of the 2021 Act:¶

(A) Does not impact the corporate leadership, governance or control of a health care entity; and ¶

(B) Is necessary to adopt AVP methodologies to meet the health care cost growth targets under ORS 442.386.¶

(d) Contracts under which one health care entity, for and on behalf of a second health care entity, provides patient care and related services or provides administrative services relating to, supporting or facilitating the provision of patient care and services, if the second health care entity:¶

(A) Maintains responsibility, oversight and control over the patient care and related services; ¶

(B) Bills and receives reimbursement for the patient care and related services; and¶

(C) Does not provide comprehensive management services.¶

(e) Transactions in which a participant that is a health center as defined in 42 U.S.C. 254b, while meeting all of the participant's obligations, acquires, affiliates with, partners with or enters into any agreement with another entity unless the transaction would result in the participant no longer qualifying as a health center under 42 U.S.C. 254b.¶

(f) A transaction that consists solely of a change in the immediate or intermediate ownership of a health care entity but which (i) does not change the ultimate ownership or control of the health care entity, and (ii) does not result in the acquisition of control of the health care entity by any person not previously affiliated with the health care entity. ¶

(g) Agreements between an affiliate and a health care entity that are subject to ORS 732.574(2)(d)(D).¶

(2) For purposes of paragraph (1)(b) of this rule: ¶

(a) A "medical services contract" means a contract to provide medical or mental health services, including physical, behavioral or dental health services, entered into by:¶

(A) A carrier or coordinated care organization and an independent practice association;¶

(B) A carrier, coordinated care organization, independent practice association or network of providers and one or more providers;¶

(C) An independent practice association and an individual health professional or an organization of providers;¶

(D) A medical, dental, vision or mental health clinic; or¶

(E) A medical, dental, vision or mental health clinic and an individual health professional to provide medical, dental, vision or mental health services.¶

(b) A "medical services contract" does not include a contract of employment or a contract creating a legal entity and ownership of the legal entity that is authorized under ORS chapter 58, 60 or 70 or under any other law authorizing the creation of a professional organization similar to those authorized by ORS chapter 58, 60 or 70.¶

(3) Upon review of a complete notice of material change transaction submitted in accordance with OAR 409-070-0030(1)(a) and OAR 409-070-0045(5), the Authority may determine that the transaction qualifies as an excluded transaction under this rule. The Authority shall provide the parties with written notice of that determination, following which the notice shall be deemed withdrawn and all further proceedings in respect of the notice shall be terminated and ended. The Authority's written notice to the parties under this paragraph (3) shall be accompanied by a refund of the filing fee, if any, that was paid upon, or in connection with, submission of the notice of material change transaction.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)



RULE SUMMARY: Section OAR 409-070-0022 outlines the circumstances under which an emergency exemption would apply. Transactions that meet the standards outlined in this rule would not be subject to review.

CHANGES TO RULE:

#### 409-070-0022

##### Emergency Transactions

(1) Pursuant to Section 2(8)(a) of the 2021 Act, the Authority, for good cause shown, may exempt an otherwise covered transaction from review if the Authority finds that:¶

(a) There is an emergency situation, including but not limited to a public health emergency, which immediately threatens health care services; and¶

(b) The transaction is urgently needed to protect the interest of consumers and to preserve the solvency of an entity other than a domestic health insurer. ¶

(2) If a proposed transaction would otherwise be subject to review because it involves a change in control of a domestic health insurer, the Department, in consultation with the Authority, for good cause shown, may exempt the transaction from review if the Department finds that:¶

(a) There is an emergency situation, including but not limited to a public health emergency, which immediately threatens health care services; and¶

(b) The transaction is urgently needed to protect the interest of consumers and to preserve the solvency of the domestic health insurer. ¶

(3) An applicant for emergency exemption under paragraph (1) of this rule shall provide the Authority, and an applicant for emergency exemption under paragraph (2) of this rule shall provide the Department, with the following: ¶

(a) A detailed explanation of the grounds for the application, including a complete statement of the facts, circumstances and conditions which justify emergency exemption and the conditions necessitating immediate relief;¶

(b) A detailed explanation of all the terms, conditions and agreements that comprise the transaction and the manner in which such terms, conditions and agreements will respond to the conditions necessitating expedited consideration of the exemption application;¶

(c) A detailed explanation of the reasons why the transaction is in the public interest and in the interest of those consumers and markets that are or will be served by the parties following closing of the transaction; ¶

(d) If the application for emergency exemption requires or otherwise is based upon, in whole or in part, a disclaimer of a rebuttable presumption of control, the application shall include a disclaimer of control meeting the requirements of OAR 409-070-0025;¶

(e) Such additional information, documents and analysis as the Authority or the Department, as applicable, may require in order to evaluate the application and the asserted grounds for emergency exemption;¶

(f) An undertaking by the parties to make such further filings with, and submit such further information to, the Authority or the Department, as applicable and to cooperate with and assist the Authority or the Department, as applicable, in conducting such further investigations, hearings and examinations, as may be required following the allowance of emergency exemption for the transaction;¶

(g) Payment of a filing fee in accordance with Table 1; and¶

(h) An undertaking by the parties to reimburse the Authority for expenses described in OAR 409-070-0050.¶

(4) The Authority with respect to an application filed under paragraph (1) of this rule, and the Department with respect to an application filed under paragraph (2) of the rule, shall:¶

(a) Provide a period for the filing of comments in respect of the application unless the Authority or the Department, as applicable, determines that:¶

(A) The public interest in providing comments is outweighed by the interest in confidentiality of the applicant for emergency exemption; or ¶

(B) the nature of the emergency situation presented and the urgency of the need for emergency exemption will not allow time for the filing and consideration of comments. ¶

(b) Provide the applicant with ten calendar days' advance notice prior to posting the application for public comment.¶

(5) The Department shall promptly provide an application filed under paragraph (2) of this rule to the Authority, and such an application shall be deemed to include an express consent to the sharing between the Authority and the Department of such application and all material in connection therewith.¶

(6) The Authority will publish from time to time a list of other categories or types of transactions that shall be exempt from review under these rules. ¶

(7) An applicant for emergency exemption may contest the Authority's determination as provided in OAR 409-

070-0075. Unless otherwise ordered in the course of such proceedings, the time periods for preliminary and comprehensive review of the transaction under OAR 409-070-0055 or OAR 409-070-0060 shall remain applicable, without abatement or reduction, in the event a preliminary or comprehensive review of the transaction is thereafter required.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

RULE SUMMARY: Section OAR 409-070-0025 describes the concept of acquisition of control of an entity. This rule also describes when control will be presumed and when a person or entity may rebut the presumption of control.

CHANGES TO RULE:

409-070-0025

Acquisition of Control; Presumptions and Disclaimers

(1) The following presumptions will apply in determining whether a transaction involving a health care entity results in the acquisition of direct or indirect control of that health care entity: ¶

(a) A transaction shall be rebuttably presumed to involve an acquisition of control of a health care entity that is a domestic health insurer or a coordinated care organization if a person, directly or indirectly, acquires voting control of ten percent (10%) or more of any class of voting securities of the domestic health insurer or the coordinated care organization.¶

(b) For a health care entity other than a domestic health insurer or coordinated care organization, a transaction shall be rebuttably presumed to involve an acquisition of control of the health care entity if a person, directly or indirectly, acquires voting control of twenty-five percent (25%) or more of any class of voting securities of the health care entity.¶

(c) For any health care entity, a transaction shall be irrebuttably presumed to involve an acquisition of control of the health care entity if a person, directly or indirectly, acquires voting control of more than fifty percent (50%) of any class of voting securities of the health care entity.¶

(2) A person seeking to rebut the presumption described in paragraph (1)(b) of this rule shall apply to the Authority for a disclaimer of control determination. Such application must show that the proposed transaction does not (or would not) in fact result in control of the health care entity, or that control would not be changed by the proposed transaction, and must fully disclose all material relationships and bases for control between the disclaimer applicant and the person(s) to which the disclaimer applies, as well as the basis for disclaiming control or change of control. The Authority may determine, after giving persons that have an interest in the Authority's determination notice and opportunity to be heard and after making specific findings of fact to support the determination, that control exists (or would exist) in fact or would be changed by a proposed transaction.¶

(3) A disclaimer application filed under paragraph (2) of this rule is effective unless, within thirty calendar days after the Authority receives the disclaimer application, the Authority notifies the disclaimer applicant that the disclaimer has been disallowed.¶

(4) Paragraphs (2) and (3) of this rule do not apply to transactions involving a domestic health insurer or a coordinated care organization. For a domestic health insurer, the disclaimer of affiliation procedure is in ORS 732.568. For a coordinated care organization, the disclaimer of affiliation procedure is in OAR 410-141-5315.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

ADOPT: 409-070-0030

RULE SUMMARY: Section OAR 409-070-0030 describes the requirement to file a notice of material change transaction and what state entity shall receive the notice.

CHANGES TO RULE:

409-070-0030

Requirement to File a Notice of Material Change Transaction

(1) Any health care entity shall: ¶

(a) Submit to the Authority a notice of material change transaction not involving an activity described in ORS 732.521 with respect to a domestic health insurer. The notice shall contain the information required under OAR 409-070-0045. ¶

(b) Submit to the Department a notice of material change transaction for an activity described in ORS 732.521 with respect to a domestic health insurer. The notice shall be submitted as an addendum to filings required by ORS 732.517 to ORS 732.546 or ORS 732.576. The Department shall promptly provide to the Authority the notice submitted under this subsection to enable to the Authority to conduct its review in accordance with OAR 409-070-0035. ¶

(2) The notice of material change transaction required under paragraph (1) of this rule shall be filed not fewer than 180 calendar days prior to the proposed effective date of the material change transaction. For purposes of OAR 409-070-0000 to OAR 409-070-0085, the effective date of a material change transaction is the date when the proposed transaction will be consummated or closed. If the Authority determines that a health care entity has failed to timely file a notice of material change transaction pursuant to this subsection, the Authority may refer the health care entity to the Oregon Department of Justice. ¶

(3) An initial filing fee in accordance with Table 1 shall be paid to the Authority together with the submission of a notice of material change transaction pursuant to paragraph (1) of this rule.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

RULE ATTACHMENTS DO NOT SHOW CHANGES. PLEASE CONTACT AGENCY REGARDING CHANGES.

Health Care Market Oversight Program  
409-070-0030 Table 1

**Table 1: HCMO Fee Schedule**

**Fee associated with review from notice submitted March 1, 2022 through December 31, 2022**

For the first ten months of the program, proposed material change transactions will be subject to an expedited review, with the exception of proposed transactions that raise serious concerns for OHA.

Note: If OHA determines that a submitted notice is not subject to review, no fee will be charged.

| Expedited Review  | Flat fee     |
|---|--------------|
| Material change transactions subject to the expedited process due with submission | <b>\$200</b> |

*If serious concerns, plus:*

| Preliminary Review (not expedited) of transaction | Flat fee       |
|---|----------------|
| Preliminary review material change transactions   | <b>\$2,000</b> |

*or*

| Comprehensive Review (not expedited)              | Flat Fee       |
|---|----------------|
| Comprehensive review material change transactions | <b>\$5,000</b> |

Note: Max fee is \$5,200

OHA is deliberately charging a reduced fee during the first ten months of the program to account for the expedited review process. Starting January 2023 the program fee structure differs. See below.

**Fee associated with reviewing submitted notice January 1, 2023 through June 30, 2023**

Note: Before June 30, 2023 the Health Care Market Oversight Program will publish a fee schedule for the 2023-2025 biennium.

Note: If OHA determines that a submitted notice is not subject to review, following application pursuant to OAR 409-070-0042 or otherwise, no fee will be charged.

| Emergency or Preliminary Review   | Fee is         |
|---|----------------|
| Emergency/Preliminary review material change transactions due with submission | <b>\$2,000</b> |

*or*

| Comprehensive Review |  |  |
|----------------------|--|--|
|----------------------|--|--|

For material change transactions involving two entities, the fee below shall be based on the revenue or projected revenue, as applicable, of the smaller of the two entities engaged in the transaction, determined in accordance with OAR 409-070-0015(1). For transactions involving more than two entities, the fee below shall be based on the revenue of the entity with the second largest average annual revenue or projected revenue, as applicable. A single fee may not exceed \$100,000.

| Revenue of the Smaller of the two Entities | and Less than  | Fee is           | Plus                        | Maximum fee in this range: |
|--|----------------|------------------|-----------------------------|----------------------------|
| \$10,000,000                               | \$100,000,000  | <b>\$25,000</b>  | 0.06% above \$10,000,000    | \$79,000                   |
| \$100,000,000                              | \$300,000,000  | <b>\$80,000</b>  | 0.0045% above \$100,000,000 | \$89,000                   |
| \$300,000,000                              | \$500,000,000  | <b>\$89,000</b>  | 0.003% above \$300,000,000  | \$95,000                   |
| \$500,000,000                              | not applicable | <b>\$100,000</b> | \$0                         | \$100,000                  |

ADOPT: 409-070-0035

RULE SUMMARY: Section OAR 409-070-0035 describes details specific to material change transactions involving a domestic health insurer.

CHANGES TO RULE:

#### 409-070-0035

##### Material Change Transaction Involving a Domestic Health Insurer

(1) The Authority shall review a proposed material change transaction for an activity described in ORS 732.521 with respect to a domestic health insurer pursuant to the procedures set forth in OAR 409-070-0055 (preliminary review) and, if applicable, OAR 409-070-0060 (comprehensive review). ¶

(a) At the conclusion of the preliminary review period provided in OAR 409-070-0055, the Authority shall report to the Department:¶

(A) the results of the Authority's review under OAR 409-070-0055; or¶

(B) that the Authority intends to review the proposed material change transaction under OAR 409-070-0060, including whether the Authority intends to appoint a community review board pursuant to these rules. ¶

(b) If the Authority reviews the proposed material change transaction under OAR 409-070-0060, it shall promptly provide to the Department the results of its review not later than the period specified in OAR 409-070-0060. ¶

(c) The periods for review under OAR 409-070-0055 and OAR 409-070-0060 shall begin running upon the Authority's receipt from the Department of a complete notice of material change transaction as required under OAR 409-070-0030(1)(b) and subject to OAR 409-070-0045(5). ¶

(2) The Department shall receive and consider the results of the Authority's review prior to entering its decision on the proposed material change transaction. The Department shall coordinate with the Authority to incorporate the results of the Authority's review into the final determination issued by the Department pursuant to ORS 732.528 or ORS 732.542, as applicable. ¶

(3) The filing of a notice of material change transaction that is subject to review by each of the Authority and the Department under this rule shall be deemed to include an express consent to the sharing between the Authority and the Department of confidential material submitted in connection with such proposed material change transaction. Confidential material provided by any party in connection with such proposed material change transaction shall be maintained as confidential material in accordance with ORS 705.137 and Section 13 of the 2021 Act, and OAR 409-070-0070, and may be shared between the Authority and the Department pursuant to ORS 705.137(3)(b)&(c) and (4), and ORS 192.355(1), (9), (10) and (31), as applicable. Such sharing shall not constitute a waiver of the confidential status of such materials.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

ADOPT: 409-070-0040

RULE SUMMARY: Section OAR 409-070-0040 describes details specific to material change transactions involving a charitable organization or hospital.

CHANGES TO RULE:

409-070-0040

Material Change Transaction Involving a Charitable Organization or Hospital

(1) The parties shall provide a copy of any notice of a material change transaction involving a health care entity that is, controls, or is controlled by a charitable organization to the Charitable Activities Section of the Oregon Department of Justice in addition to the notice submitted to the Authority in accordance with OAR 409-070-0030(1)(a). ¶

(2) To the extent applicable, a health care entity involved in a material change transaction remains subject to the charitable registration and reporting requirements contained in ORS 128.610 et seq. and to the Attorney General notification and other provisions contained in ORS Chapter 65, the Nonprofit Corporations Act, including Attorney General review and approval of hospital transfers within the scope of ORS 65.803. ¶

(3) The filing of a notice of material change transaction that is subject to review by each of the Authority and the Charitable Activities Section of the Oregon Department of Justice under this rule shall be deemed to include an express consent to the sharing between the Authority and the Department of Justice of confidential material submitted in connection with such proposed material change transaction. The Authority may consult with the Department of Justice regarding the potential effects of a proposed material change transaction on the charitable organization or its assets or charitable assets held by a health care entity. Confidential material provided by any party in connection with such proposed material change transaction shall be maintained as confidential material in accordance with OAR 409-070-0070. Such sharing shall not constitute a waiver of the confidential status of such materials. ¶

(4) The Authority may condition its approval of a material change transaction involving a health care entity that is, controls, or is controlled by a charitable organization on a required filing with, and approval by, the Charitable Activities Section of the Oregon Department of Justice.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

ADOPT: 409-070-0042

RULE SUMMARY: Section OAR 409-070-0042 outlines an optional process in which an entity may apply for a determination of covered transaction status from the Oregon Health Authority.

CHANGES TO RULE:

409-070-0042

Optional Application for Determination of Covered Transaction Status

(1) Any party to a proposed transaction may, but shall not be required to, submit a written application to the Authority requesting a determination whether such transaction is a covered transaction pursuant to these rules. The Authority shall notify the applicant in writing of its determination within 30 calendar days following receipt of the application and any additional information requested by the Authority. If the Authority determines that the proposed transaction is a covered transaction, and the parties desire to pursue the transaction, the parties shall file a notice in accordance with these rules.¶¶

(2) An application for determination pursuant to paragraph (1) of this rule shall contain:¶¶

(a) A detailed explanation of the transaction, including the parties to such transaction and all relevant terms, conditions and agreements that comprise the transaction;¶¶

(b) A detailed explanation of the reasons the parties to the proposed transaction believe such transaction is not a covered transaction pursuant to these rules; and¶¶

(c) Such additional information, documents and analyses as the Authority may require in order to evaluate the application and the asserted grounds on which it should not be considered a covered transaction pursuant to these rules.¶¶

(3) The submission of an application pursuant to this rule does not toll any timelines or notice requirements under these rules.¶¶

(4) No filing fee shall be required in connection with an optional application filed under this rule. However, if the Authority determines that the transaction is a covered transaction, and if a notice of material change transaction is thereafter filed, a filing fee in accordance with Table 1 shall be payable upon such filing.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)



RULE SUMMARY: Section OAR 409-070-0045 describes the required forms and contents of a notice of material change transaction. This rule also includes standards that the Authority will use when reviewing a proposed material change transaction.

CHANGES TO RULE:

409-070-0045

Form and Contents of Notice of Material Change Transaction

(1) A notice of material change transaction required to be filed under OAR 409-070-0030(1)(a) shall be made using the form available at the Program website. Unless expressly provided otherwise, if any item is inapplicable or the answer to any item is in the negative, a statement to that effect shall be made.¶

(2) A party or the parties to a material change transaction for which a filing will be made under this rule are encouraged to contact the Authority and arrange for a pre-filing conference. If the Authority decides to conduct a comprehensive review under OAR 409-070-0060, the Authority shall offer the parties or parties a comprehensive review conference. The pre-filing conference or comprehensive review conference shall preview the transaction and filing and the Authority's expectations for the review of the transaction including timing, the use of outside experts, the potential involvement of a community review board, and other relevant issues. As applicable, the Department will participate along with the Authority in any such conference.¶

(3) One complete copy of the notice, including exhibits and all other papers and documents filed as part of the notice, shall be filed with the Authority by electronic delivery. The notice shall be signed electronically or otherwise in the manner prescribed in the form notice.¶

(4) All copies of any financial statements or exhibits shall be clear, easily readable and suitable for printing. Debits in credit categories and credits in debit categories shall be designated so as to be clearly distinguishable as such. The notice and statements therein must be in the English language and monetary values shall be stated in United States currency. If any exhibit or other paper or document filed with the notice is in a foreign language, it shall be accompanied by a translation into the English language. Any monetary value shown in a foreign currency shall be converted into United States currency.¶

(5) A notice of material change transaction shall include either complete and final executed copies of all the definitive agreements pursuant to which the transaction will be documented and closed or a term sheet. If a notice is filed on the basis of a term sheet, then:¶

(a) The parties must furnish the Authority with complete and final executed copies of all the definitive agreements pursuant to which the transaction will be documented and closed, together with a detailed description of any respect in which the definitive agreements depart from the term sheet, no later than: ¶

(A) Fifteen days before closing the transaction, if the Authority approved the transaction without comprehensive review; or¶

(B) Fifteen days after the commencement of the comprehensive review period, if the transaction was not approved following preliminary review. If the parties are unable to furnish complete and final executed copies of all the definitive agreements within that fifteen day period, then the running of the period for review of the notice shall be tolled upon such notification and shall not resume until the parties have furnished such executed copies.¶

(b) To the extent that the definitive agreements materially deviate from the term sheet, the Authority may extend the review period and may withdraw or modify an order based on the term sheet. ¶

(6) If the Authority considers a notice of material change transaction to be incomplete, or if the Authority requires additional information or clarification of any information to proceed with its review, the Authority shall notify the parties of the information or clarification that is required. The running of the period for review of the notice shall be tolled upon such notification and shall resume when the Authority deems the notice complete. ¶

(7) Any party that has filed a notice of material change transaction shall promptly advise the Authority of any changes in the information so furnished on the notice arising subsequent to the date upon which the information was furnished but prior to disposition of the material change transaction by the Authority. ¶

(8) The Authority may require that statements of revenue and revenue projections be presented in accordance with generally accepted accounting principles or statutory accounting principles, as applicable, and be prepared by a duly qualified and credentialed accounting expert.¶

(9) The Authority's review of the information provided in a notice of material change will be analyzed using the Analytic Framework, published on the Program website, with standards that:¶

(a) Are clear, fair, predictable, and consistent;¶

(b) Use measures of quality and access that can be meaningfully compared to current and past performance across Oregon and, if available, in other states; and¶

(c) Include equity analyses that stratify cost, quality, and access data by the characteristics specified in the

definition of health equity to the greatest extent allowable by data availability. ¶

(10) After submission, any party to a notice of material change transaction may rescind the notice at any time and for any reason. If the Authority has not commenced a preliminary review under OAR 409-070-0055, the filing fee paid upon, or in connection with, the submission of the notice shall be refunded. If the Authority has commenced a preliminary review under OAR 409-070-0055, the filing fee paid upon, or in connection with, the submission of the notice shall not be refunded, and the parties shall remain obligated to reimburse the Authority for costs and expenses incurred prior to withdrawal in accordance with OAR 409-070-0050.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

ADOPT: 409-070-0050

RULE SUMMARY: Section OAR 409-070-0050 describes the ability for agencies to retain outside advisors, pursuant to the 2021 Act.

CHANGES TO RULE:

#### 409-070-0050

##### Retention of Outside Advisors

(1) Pursuant to Section 2(14) of the 2021 Act, the Authority or the Department of Justice may retain at the expense of the parties to a material change transaction any actuaries, accountants, consultants, legal counsel and other advisors not otherwise a part of the Authority's staff as the Authority may reasonably need to assist the Authority in reviewing the proposed material change transaction. The retention of such advisors shall not be subject to any otherwise applicable procurement process, provided that the Authority or the Department of Justice, as applicable, shall make a determination that such advisors have the requisite qualifications and expertise to review the proposed transaction. The Authority or the Department of Justice, as applicable, shall require that the retained advisors certify in writing that:

(a) They are not subject to any conflict of interest associated with reviewing a given transaction, and;

(b) They will protect any confidential information disclosed to them in the course of their review of the transaction. Material that is privileged or confidential and therefore exempt or determined by the Authority to be exempt from public disclosure under Section 2(13)(b) of the 2021 Act may be shared with the retained advisors, and such disclosure shall not constitute a waiver of the privileged or confidential status of the material.

(2) The parties to a material change transaction shall reimburse the Authority on a monthly basis, within thirty calendar days after receipt of an invoice from the Authority, for all reasonable and actual costs incurred by the Authority in connection with its review of the material change transaction. Such costs shall include, but are not limited to, the costs and expenses of any advisors retained by the Authority or the Department of Justice pursuant to paragraph (1) of this rule and its other out-of-pocket costs but excluding any unallocated staff or interagency costs of the Authority. Invoices provided by the Authority pursuant to this paragraph (2) shall contain a reasonably detailed summary of the costs incurred, provided that in no event shall such invoices include any communications protected by the attorney-client or other applicable privilege.

(3) Any approval of a material change transaction shall be conditioned on the parties reimbursing the Authority pursuant to paragraph (2) of this rule. The obligation of the parties to reimburse the Authority does not depend on whether the Authority approves the transaction. The obligation to reimburse is an obligation of the person filing the notice of material change transaction and any other parties to the transaction designated by the Authority.

(4) The Authority shall notify applicants before any costs are incurred when a transaction review requires the use of outside advisors.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

RULE SUMMARY: Section OAR 409-070-0055 outlines the Oregon Health Authority's preliminary 30-day review of a notice of material change transaction.

CHANGES TO RULE:

409-070-0055

Preliminary 30-Day Review of a Notice of Material Change Transaction

(1) Pursuant to Section 2(5) of the 2021 Act and after receipt of a complete notice of material change transaction in accordance with OAR 409-070-0030(1)(a) and OAR 409-070-0045(5), the Authority shall complete a preliminary review to determine whether the proposed material change transaction meets one or more of the criteria set forth in paragraph (2) of this rule. ¶

(2) At the conclusion of the preliminary review described in paragraph (1) of this rule, the Authority shall approve, or approve with conditions as provided in OAR 409-070-0065, a material change transaction, or, in the case of a material change transaction involving a domestic health insurer, recommend to the Department that the transaction be approved, if the Authority determines that the transaction meets one or more of the following criteria: ¶

(a) The material change transaction is in the interest of consumers and is urgently necessary to maintain the solvency of an entity involved in the transaction; ¶

(b) The material change transaction is unlikely to substantially reduce access to affordable health care in Oregon; ¶

(c) The material change transaction is likely to meet the criteria set forth in OAR 409-070-0060; ¶

(d) The material change transaction is not likely to substantially alter the delivery of health care in Oregon; or ¶

(e) Comprehensive review of the material change transaction is not warranted given the size and effects of the transaction. ¶

(3) If after a preliminary review, the Authority does not approve or recommend for approval, as applicable, a material change transaction in accordance with this paragraph (2), the Authority shall notify the parties and shall thereafter conduct a comprehensive review pursuant to OAR 409-070-0060. ¶

(4) Unless extended by agreement among the Authority and the parties to a proposed material change transaction, the Authority shall complete the preliminary review described in paragraph (1) within 30 calendar days of the Authority's receipt of a complete notice of material change transaction. The Authority shall notify the parties at the conclusion of the preliminary review period the results of the preliminary review. If the Authority fails to complete such preliminary review within 30 calendar days of the Authority's receipt of a complete notice of material change transaction, the proposed material change transaction shall be subject to the comprehensive review procedure provided in OAR 409-070-0060. ¶

(5) Notwithstanding the preceding paragraphs of this rule, for notices filed before December 31, 2022, the notice shall be deemed approved, or, in the case of a material change transaction involving a domestic health insurer, recommended to the Department that the transaction be approved, unless, within 30 calendar days of the Authority's receipt of a complete notice of material change transaction, the Authority has notified the parties to the notice that the proposed material change transaction shall be subject to the comprehensive review procedure provided in OAR 409-070-0060.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

RULE SUMMARY: Section OAR 409-070-0060 outlines the Oregon Health Authority's comprehensive review of a notice of material change transaction.

CHANGES TO RULE:

409-070-0060

Comprehensive Review of a Notice of a Material Change Transaction

(1) Pursuant to Section 2(7) of the 2021 Act, the Authority shall conduct a comprehensive review of a proposed transaction if the Authority determines not to approve the transaction at the conclusion of its preliminary review.¶

(2) Pursuant to Section 2(11) of the 2021 Act, a comprehensive review may include the appointment by the Authority of a community review board to participate in the conduct of the comprehensive review and the making of recommendations to the Authority on the approval or disapproval of the transaction, or the approval of the transaction as modified or subject to conditions. The Authority, at its discretion, may convene a community review board to advise the Authority on the impact of the transaction to the community. In determining whether to convene a community review board, the Authority shall consider the potential impacts of the proposed transaction, including, but not limited to:¶

(a) The potential loss or change in access to essential services.¶

(b) The potential to impact a large number of residents in this state.¶

(c) A significant change in the market share of an entity involved in the transaction.¶

(3) A community review board convened by the Authority under paragraph (2) of this rule shall consist of members of the affected community with emphasis on persons who are representative of populations that experience health disparities, consumer advocates and health care experts. Not more than one-third of the members of the community review board may be representatives of corporate providers. The Authority may not appoint to a community review board an individual who is employed by an entity that is a party to the transaction that is under review or is employed by a competitor that is of a similar size to an entity that is a party to the transaction. As part of the community review board appointment process, the Authority will notify coordinated care organization community advisory councils, as defined in ORS 414.575, representing the affected community.¶

(4) Members of a community review board shall be considered public officials subject to the conflict of interest requirements in ORS chapter 244. If a member of the community review board possesses a potential conflict of interest, as defined in ORS 244.020, the member shall file a notice of conflict of interest, which shall be made public, and the Authority shall determine whether the member has an actual conflict of interest, as defined in ORS 244.020. If the Authority determines that a member of the community review board has an actual conflict of interest, as defined in ORS 244.020, it shall appoint a replacement member to the community review board.¶

(5) Hearings and proceedings before a community review board shall be conducted pursuant to subsections (15) through (17) of section 2 of the 2021 Act.¶

(6) A community review board shall make written recommendations to the Authority on a proposed transaction based on the criteria listed in paragraphs (2) and (8) of this rule.¶

(7) The Authority shall issue proposed findings of fact and conclusion of law, along with the Authority's proposed order at the conclusion of its comprehensive review and shall allow the parties and the public a reasonable opportunity to make written comments to the proposed findings and conclusions and the proposed order. If the comprehensive review includes a community review board, recommendations of the community review board shall be in writing and appended to the proposed order. Unless otherwise directed by the Authority, written comments to the proposed findings and conclusions and the proposed order shall be filed with the Authority within thirty calendar days following publication. The Authority shall make any filed comments available to the public promptly following receipt.¶

(8) The Authority shall consider the parties' and the public's written exceptions and issue a final order setting forth the Authority's findings and conclusions in respect of the proposed transaction. If the comprehensive review included a community review board, the Authority's findings and conclusions shall include an explanation of the reasons why the Authority accepted, rejected or modified the recommendations of the community review board. The final order shall include any commitments by the health care entity to continue services currently provided by the health care entity. A party to the proposed transaction may contest the final order as provided in OAR 409-070-0075.¶

(9) Subject to any conditions prescribed under OAR 409-070-0065, the Authority shall approve a material change transaction that does not involve a domestic insurer, or in the case of a material change transaction involving a domestic health insurer, recommend to the Department that the transaction be approved, if pursuant to Section 2(9) of the 2021 Act, the Authority determines that the transaction satisfies (a) below and also satisfies either (b)

or (c) below: ¶

(a) There is no substantial likelihood that the transaction would: ¶

(A) Have material anticompetitive effects in the region (such as significantly increased market concentration among providers when contracting with payers, carriers, or coordinated care organizations, or among carriers when establishing health benefit premiums that is likely to increase costs for consumers) not outweighed by benefits in increasing or maintaining services to underserved populations; ¶

(B) Be contrary to law; ¶

(C) Jeopardize the financial stability of a health care entity involved in the transaction; or ¶

(D) Otherwise be hazardous or prejudicial to consumers or the public. ¶

(b) The transaction will benefit the public good and communities by: ¶

(A) Reducing the growth in patient costs in accordance with the health care cost growth targets established under ORS 442.386 or maintain a rate of cost growth that exceeds the target that the entity demonstrates is in the best interest of the public; ¶

(B) Increasing access to services in medically underserved areas; or ¶

(C) Rectifying historical and contemporary factors contributing to a lack of health equity or access to services. ¶

(c) The transaction will improve health outcomes for residents of this state. ¶

(10) Unless extended by agreement among the Authority, the Department, as applicable, and the parties to the proposed transaction, the Authority shall issue a proposed order following its comprehensive review within 180 calendar days of the filing of a complete notice of material change transaction, subject to tolling or extension as provided in these rules. A transaction may be disapproved if the parties do not agree to an extension of time necessary to accomplish a tribal consultation.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

ADOPT: 409-070-0065

RULE SUMMARY: Section OAR 409-070-0065 describes conditional approval and the suspension of proposed material change transaction, if applicable.

CHANGES TO RULE:

409-070-0065

Conditional Approval; Suspension of Proposed Material Change Transaction

(1) Following completion of a preliminary review pursuant to OAR 409-070-0055 or a comprehensive review pursuant to OAR 409-070-0060, the Authority may approve, or recommend for approval in the case of transaction involving a domestic insurer, a material change transaction with conditions designed to further the purposes and goals described in OAR 409-070-0000.¶

(2) If the Authority approves a material change transaction with conditions as set forth in paragraph (1) of this rule, the Authority may suspend, or in the case of transaction involving a domestic insurer recommend that the Department suspend, the effective date of the transaction for such reasonable time as necessary to conduct an examination and complete an analysis of whether the conditions have been satisfied.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

ADOPT: 409-070-0070

RULE SUMMARY: Section OAR 409-070-0070 outlines confidentiality standards that apply to the notice of material change transaction and other documents.

CHANGES TO RULE:

409-070-0070

Confidentiality

(1) An applicant for review of a material change transaction may designate portions of a notice and any documents thereafter submitted by the applicant in support of the notice as confidential. The applicant shall file two versions of the notice. One shall be marked as "CONFIDENTIAL" and shall contain the full unredacted version of the notice or supporting materials and shall be maintained as such by the Authority and the Department. The second shall be marked as "PUBLIC" and shall contain a redacted version of the notice or supporting materials (from which the confidential portions have been removed or obscured) and shall be made available to the public by the Authority. An applicant claiming confidentiality in respect of portions of a notice, or any documents thereafter submitted by the applicant in support of the notice, shall include a redaction log that provides a reasonably detailed statement of the grounds on which confidentiality is claimed, citing the applicable statutory basis for confidentiality of each portion.<sup>¶</sup>

(2) Confidential materials filed by an applicant in connection with a transaction that is subject to review by each of the Authority and the Department shall be maintained as confidential materials in accordance with paragraph (1) of this rule, section 2(13)(c) of the 2021 Act and ORS 705.137.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)



ADOPT: 409-070-0075

RULE SUMMARY: Section OAR 409-070-0075 describe contested case hearings.

CHANGES TO RULE:

#### 409-070-0075

##### Contested Case Hearings

(1) The Authority shall hold a contested case hearing upon a written request for a hearing within the time specified in paragraph (3) of this rule by a person aggrieved by any act, threatened act or failure of the Authority to act under section 2 of the 2021 Act or OAR 409-070-0000 to OAR 409-070-0085. ¶

(2) Contested case hearings shall be conducted pursuant to ORS 183.411 through ORS 183.497 and the Attorney General's Uniform and Model Rules of Procedure for the Office of Administrative Hearings, OAR 137-003-0501 through OAR 137-003-0700, and the provisions of this rule. ¶

(3) A party to a material change transaction that wishes to contest a final order issued by the Authority that fully resolves the notice of material change transaction must request a hearing within 15 calendar days from the date of service of the final order and a notice of right to a hearing. ¶

(4) An applicant for emergency exemption under OAR 409-070-0022 that wishes to contest a determination issued by the Authority must request a hearing within 15 calendar days from the date of service of the determination and a notice of right to a hearing. ¶

(5) The Authority's determination:¶

(a) Not to approve a transaction at the conclusion of the preliminary review period pursuant to OAR 409-070-0055; and¶

(b) That a transaction is a covered transaction following application under OAR 409-070-0042 shall, in each case, be interlocutory and shall not be reviewable prior to the issuance of the final order that fully resolves the notice of material change transaction. ¶

(6) The issues to be considered in a contested case conducted pursuant to this rule shall be limited in scope to the facts and conclusions contained in the final order or determination. ¶

(7) In a contested case conducted pursuant to this rule, the party requesting the contested case hearing shall have the burden of proof. ¶

(8) In a contested case conducted pursuant to this rule, an administrative law judge assigned by the Office of Administrative Hearings shall serve a proposed order on all parties and the Authority, unless prior to the hearing the Authority notifies the administrative law judge that a final order may be served, within 30 calendar days of the close of the evidentiary record in the contested case. ¶

(9) The Authority shall issue a final order within 30 days of receipt of the proposed order, which may adopt some or all of the proposed order, as the Authority shall determine in its sole discretion. The final order is effective immediately upon being signed or as otherwise provided in the order. ¶

(10) The time limits established in paragraphs (8) and (9) of this rule may be waived or shortened by agreement among the parties and the Authority. ¶

(11) All contested case hearing decisions are subject to judicial review under ORS 183.482 in the Court of Appeals. ¶

(12) In cases where the decision is to be made by the Department, contested case hearings for a domestic insurer shall be conducted by the Department in accordance with ORS 732.526.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

ADOPT: 409-070-0080

RULE SUMMARY: Section OAR 409-070-0080 outlines compliance verification with conditions and allows the Oregon Health Authority to request information.

CHANGES TO RULE:

#### 409-070-0080

##### Compliance with Conditions; Information Requests

(1) Following approval of a material change transaction, the Authority may verify compliance with any conditions that the Authority included in its approval of the transaction and issue such additional orders, following notice and opportunity for hearing, as may be necessary to enforce compliance with the terms and conditions of the approval of the transaction; provided however, that the Authority may not impose new conditions that are unrelated to, or not reasonably required to enforce compliance with, those conditions, if any, that were included in the Authority's approval of the transaction. Such verification of compliance shall occur, at minimum, at the intervals required by Section 2(19)(a) of the 2021 Act.

(2) The Authority may require that the parties provide such information, reports, analyses and documentation as the Authority may require in order to monitor and assess the impacts and effects of the material change transaction as required in Section 2(19) of the 2021 Act, including specifically, but without limitation, the effects and status of the material change transaction under OAR 409-070-0060(2) and (8).

(3) No person shall file or cause to be filed with the Authority or the Department any notice, article, certificate, report, statement, application or any other information required or permitted to be so filed and known to such person to be false or misleading in any material respect.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)

ADOPT: 409-070-0085

RULE SUMMARY: Section OAR 409-070-0085 establishes the effective dates of the program.

CHANGES TO RULE:

409-070-0085

Effective Date; Implementation

(1) The effective date of these rules is March 1, 2022. These rules shall apply to transactions closed or scheduled to close on or after March 1, 2022. ¶

(2) Material change transactions that are documented by one or more definitive agreements entered into on or after March 1, 2022, shall be processed in accordance with these rules' standard provisions and timelines for preliminary and comprehensive review. ¶

(3) If a material change transaction:¶

(a) Has been documented by one or more definitive agreements entered into before March 1, 2022;¶

(b) Is expected to close after March 1, 2022 but before August 28, 2022; and¶

(c) Requires comprehensive review, the 180-day period for comprehensive review provided in OAR 409-070-0060(9) may be waived or reduced in the Authority's discretion, with due consideration being given to the date on which the notice was received, the public importance and complexity of the transaction, and the Authority's current workloads, staffing and resources. The notice for a material change transaction that is eligible for a waiver or reduction in the comprehensive review period under this rule shall include a statement of the reasons why expedited review is required and the date by which a decision on the transaction is requested. In no event shall the Authority waive the preliminary review required by OAR 409-070-0055.

Statutory/Other Authority: House Bill 2362 (2021)

Statutes/Other Implemented: House Bill 2362 (2021)