

PEBB / OEGB Innovation Workgroup
 2019 Legislative Session Update - Enacted & Pending Legislation

Bill Number	Description	Operative Date(s)	Fiscal Impact	Status
HB 2010	Increased health insurance assessment from 1.5% to 2% on OEGB and PEBB medical/rx plans starting January 1, 2020 – December 31, 2026.	1/1/2020	Increased expenditures though increased premium rates.	Enacted
HB 2037	HB 2037 makes the provision of Long Term Care Insurance Plans optional for PEBB/OEGB versus the current statutory-requirement that it be mandatory.	1/1/2010	No fiscal impact	Enacted
HB 2038	HB 2038 adds language to PEBB/OEGB statutes that would allow them not to publicly disclose proposals received in response to an RFP until the notice of intent to award the contract.	1/1/2020	No fiscal impact	Referred to House Rules Committee
HB 2039	HB 2039 removes the language in OEGB and PEBB statutes that requires health plans, health services contractors and third-party administrators that administer OEGB health plans to conduct annual dependent eligibility verification (DEV) reviews starting 10/1/2019 (OEGB) and 1/1/2020 (PEBB).	1/1/2020	No fiscal impact	Referred to House Rules Committee
HB 3075	Allows double coverage/opt out payments for PEBB/OEGB employees. Removes the 3.4% annual growth cap on OEGB health care premiums and expenditures.	9/29/2019	No impact	Referred to House Rules Committee
HB 3331	Allows PEBB/OEGB employees to receive employer contribution for opting out of health plan coverage	Effective upon passage.	TBD	Referred to Ways and Means Committee

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SB 735	Requires health outcome and quality measures adopted by Health Plan Quality Metrics Committee to include hospital measures. Requires insurers offering health benefit plans in this state to use health outcome and quality measures adopted by committee in insurers' quality assessment program.	1/1/2019	No impact	Referred to Ways and Means Committee
SB 780	Requires PEBB, OEBC, OHP and DCBS to establish a pilot program to consolidate their insurance plans into a single contract with distinct plan specific benefits. The agencies will contract with a single to provide health insurance to participants in Josephine County, Jackson County, Curry County and southern Douglass County for plan years beginning on or after January 1, 2020. Effective January 1, 2020 and repealed on January 2, 2026	PEBB (1/1/2020) OEBC (10/1/2020)	\$41 million	Referred to Ways and Means Committee
SB 852	Changes the cost sharing for part-time faculty participating in OEBC HB 2557 medical/rx plans to 10% member and 90% State of Oregon	9/1/2020	\$25 - \$30 million	Referred to Ways and Means Committee
SB 872	Requires that pharmaceutical manufacturers report total cost of their patient assistance program and any other financial assistance. 2) Requires that PEBB, CCOs, and OPDP contract with a PBM or TPA on a fee-only basis and require pass through of any rebates/discounts 3) Requires that insurers publish detailed formulary information 4) Requires that OHA, PEBB, OEBC, DOC, and OYA report on drug costs. 5) Requires that Patient Advocacy Groups shall report on funding received from pharmaceutical manufacturers, PBMs and distributors. 6) PBMs shall report to DCBS on rebates, fees and reimbursements. 6)	Varying effective dates	Indeterminate	Referred to Ways and Means Committee

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	Manufacturers shall include drugs wholesale price paid by pharmacies in their advertising.			
SB 889	Establishes the Health Care Cost Growth Benchmark program to control growth of health care expenditures in this state.	1/1/2020	No impact	Referred to Ways and Means Committee