On Saturday, March 3rd, 8 days ahead of the constitutionally required deadline, the 79th Legislative Assembly officially adjourned. Despite the short session (35 day limit), lawmakers attempted to tackle health care as a universal right, expand the number of domestic violence abusers who are prohibited from owning a firearm, pass new cap-and-trade proposals and disconnect from the recently passed federal tax cut. For the Oregon Dental Association, the session was relatively quiet. ODA followed closely the opioid bill, protections for DACA students, “balanced billing” and health care as a universal right.

ODA supported House Bill 4143, legislation sponsored by Governor Kate Brown, to target the opioid epidemic in Oregon. The bill creates a peer recovery mentor pilot program, requires prescribers to register with the Prescription Drug Monitoring Program and study insurance barriers for individuals to access appropriate treatment. Studies show that providers prescribe on the order of 220 million opioid pills in Oregon each year and despite some benefits, continue to wreak havoc on thousands of Oregonians each year. ODA suspects this issue will continue through the interim and there will be additional legislation for the 2019 Legislative session.

Another issue that ODA supported was Senate Bill 1563, also known as the Deferred Action for Childhood Arrivals (DACA) bill. The bill permits public universities and OHSU to provide scholarships and other financial aid to students who are not citizens or lawful permanent residents. While currently the practice at OHSU, there was concern that without a legislative mandate, changes on the federal level could impact funding for OHSU and other public universities. ODA continues to be involved with this issue as a number of our student members are DACA recipients. The bill passed both the House and the Senate and sits on the Governor’s desk. Governor Brown previously said she will sign it into law.

One issue that arose midway through session involved “balance billing requirements.” Senate Bill 1549 was amended on the House side to require health insurers to reimburse out-of-network providers for emergency services or other covered inpatient or outpatient services provided at an in-network health care facility in an amount established by rule by the Department of Consumer and Business Services. The ODA tracked the issue through the remainder of session and deferred to the Oregon Medical Association and Oregon Society of Oral and Maxillofacial Surgeons on their position. The overall feeling was payment of a rate set by DCBS was better than providers individually negotiating with insurers for reimbursement. The bill sits on the Governor’s desk who is expected to sign it.

Finally, an issue the ODA took no position on, but watched closely was House Joint Resolution 203. This resolution proposed an amendment to the Oregon Constitution
establishing the obligation of the state to ensure every resident has access to cost-effective, medically appropriate and affordable health care. If passed, HJR 203 would have been placed on the November 2018 ballot for Oregonian voters to decide. This concept was very controversial and received much debate and interest during session. Almost every day, individuals showed up at the capitol and outside on the steps to show support or opposition. Despite passing the House floor on a partisan 32-25 vote, the resolution failed to get the necessary votes in the Senate and it died in the Senate Health Care Committee. Near the end of session, there was some rumblings about certain groups collecting signature for the ballot, but this is yet to be determined.

With the short legislative session adjourned, ODA sets its sights to the 2019 Legislative session. Throughout the year we will be working with our local dental societies and the ADA to gather suggestions and thoughts for legislation. If you have an issue or some thoughts for legislation, please do not hesitate to email Jennifer Lewis-Goff at jlewis-goff@oregondental.org.