

SB 1578 A BUDGET REPORT and MEASURE SUMMARY

Joint Committee On Ways and Means

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Reviewed By: Matt Stayner, Legislative Fiscal Office

**Oregon Health Authority
2023-25**

PRELIMINARY

Budget Summary*

	2023-25	2024	Committee Change from	
	Legislatively Approved Budget ⁽¹⁾	Committee Recommendation	2023-25 Leg. Approved	
			\$ Change	% Change
General Fund	\$ -	\$ 547,130	\$ 547,130	100.0%
Other Funds Limited	\$ -	\$ 302,148	\$ 302,148	100.0%
Federal Funds Limited	\$ -	\$ 527,130	\$ 527,130	100.0%
Total	\$ -	\$ 1,376,408	\$ 1,376,408	100.0%

Position Summary

Authorized Positions	0	4	4
Full-time Equivalent (FTE) positions	0.00	2.00	2.00

⁽¹⁾ Includes adjustments through January 2024

* Excludes Capital Construction expenditures

Summary of Revenue Changes

Senate Bill 1578 directs the Oregon Health Authority (OHA) to establish and maintain a health care interpreter management system to improve access for Oregon Health Plan members. Federal Funds revenue to support the bill will come from Medicaid administrative match. Other Funds revenues to support the bill will come from the OHA’s shared service administrative funding and are ultimately derived from a mix of General Fund and Federal Funds revenues provided in the bill.

Summary of Capital Construction Subcommittee Action

Senate Bill 1578 directs OHA to establish and maintain a health care interpreter management system to improve access for Oregon Health Plan members. The new system must allow online scheduling of health care interpreters for health care providers and coordinated care organizations and process billing and payments for services rendered. OHA is also directed to contract with a nonprofit entity to develop and administer a health care interpreter recruitment and retention program. At a minimum the program must contact health care interpreters to fill empty appointment slots and last-minute cancellations by scheduling through the health care interpreter management system established and maintained by OHA, provide information on qualifications and certification standards, inform health care interpreters of training and professional development opportunities, and report annually on the program’s finances and activities.

The bill also directs OHA to request federal financial participation in the costs of directly reimbursing health care interpreters for healthcare interpretation services provided to medical assistance recipients by January 1, 2025. Healthcare interpreters are currently paid for by providers, who are then reimbursed by fee-for-service Medicaid or are contracted through coordinated care organizations, who receive monthly per-member per-month payments from OHA for the cost of their members' care.

The Subcommittee recommended a total of \$547,130 General Fund, \$302,148 Other Funds expenditure limitation, \$527,130 Federal Funds expenditure limitation, and four full-time, limited duration positions (2.00 FTE) to develop an implementation plan for the healthcare interpreter portal and to contract for the interpreter retention and recruitment program.

The recommended funding includes \$302,148 Other Funds expenditure limitation, one limited-duration Project Manager (0.50 FTE), and one limited duration Information Systems Specialist (0.50 FTE) in the Office of Information Services to review and resolve technical implementation problems and develop an implementation plan for the interpreter management system. The underlying revenue source for these Other Funds expenditures is \$151,074 General Fund and \$151,074 Federal Funds budgeted in the Health Systems Division. The cost of developing and implementing the healthcare interpreter management system is currently unknown due to outstanding questions around billing and paying interpreters. This functionality will require the integration with several existing information technology systems, including the Medicaid Management Information System (MMIS) and the Health Workforce Registry Applicant Portal (HWRA). It is anticipated that OHA will request additional resources needed for the development and implementation of the health care interpreter management system following this planning and development period.

The recommended funding also includes \$389,200 General Fund and \$369,000 Federal Funds expenditure limitation for the 2023-25 biennium contracted retention and recruitment program. This includes a one limited-duration Project Manager position (0.50 FTE) and one limited-duration Operations and Policy Analyst (0.50 FTE) to develop the contract scope and deliverables, oversee the Request for Proposal issuance and evaluation, and provide guidance and point of contact for the contractor. The contract with the nonprofit entity is estimated to be \$260,000 General Fund and \$240,000 Federal Funds. Position costs, including Personal Services and Services and Supplies, are estimated to be \$129,200 General Fund and \$129,200 Federal Funds for the 2023-25 biennium.

DETAIL OF JOINT COMMITTEE ON WAYS AND MEANS ACTION

Oregon Health Authority
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DESCRIPTION	GENERAL FUND	LOTTERY FUNDS	OTHER FUNDS		FEDERAL FUNDS		TOTAL ALL FUNDS	POS	FTE	
			LIMITED	NONLIMITED	LIMITED	NONLIMITED				
<u>SUBCOMMITTEE ADJUSTMENTS</u>										
SCR 010-040 - Central Services										
Services and Supplies	\$ 260,000	\$ -	\$ -	\$ -	\$ -	\$ 240,000	\$ -	500,000		
SCR 010-045 - Shared Services										
Personal Services	\$ -	\$ -	\$ 280,478	\$ -	\$ -	\$ -	\$ -	280,478	2	1.00
Services and Supplies	\$ -	\$ -	\$ 21,670	\$ -	\$ -	\$ -	\$ -	21,670		
SCR 010-050 - Statewide Assessments and Enterprise-wide Costs										
Services and Supplies	\$ 6,856	\$ -	\$ -	\$ -	\$ -	\$ 6,856	\$ -	13,712		
SCR 030-01 - Health Systems Division										
Personal Services	\$ 115,266	\$ -	\$ -	\$ -	\$ -	\$ 115,266	\$ -	230,532	2	1.00
Services and Supplies	\$ 165,008	\$ -	\$ -	\$ -	\$ -	\$ 165,008	\$ -	330,016		
SUBCOMMITTEE RECOMMENDATION *	\$ 547,130	\$ -	\$ 302,148	\$ -	\$ -	\$ 527,130	\$ -	1,376,408	4	2.00
% Change from 2023-25 Leg Approved Budget	100.0%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	100.0%	100.0%	100.0%

*Excludes Capital Construction Expenditures

PRELIMINARY