

Oregon 2019 Position Paper

Over 14 million Americans receive home care each year. Home health care brings proven cost savings to health care, promotes better patient outcomes, provides access to the latest therapies and medical technology, and is the patient preferred setting for medical care. The Oregon legislature should protect and expand access to home health care, eliminate barriers to its provision, and work to expand its use as an effective solution to rising health care costs.

The Oregon Association for Home Care (OAHC), in its effort to preserve access and quality of care in the delivery of home care, has identified the following State priorities for 2019 and beyond.

Oregon Issues

- Actively monitor and support legislative and regulatory measures that are favorable to and promote home care as an integral and valuable, evidence-based model of care in the overall continuum of health care available to all Oregonians.
- Work with state agencies as they develop plans to implement Electronic Visit Verification. Ensure
 system implemented for in-home care and home health agencies is an open system that allows
 providers to choose the system that works best for their employees and their patients.
- Advocate for continued biennial reviews of Medicaid home health reimbursement rates.
- Advocate for responsible State regulations that do not add barriers to access to care commensurate
 with issued federal guidelines and limit additional state requirements for home health providers.
 Monitor and engage on burdensome employment requirements and proposals that increase costs
 for agencies.
- Support legislation and regulations that make in-home care, home health and hospice accessible and streamlined for patients and their families.
- Support SB 177 which requires hospice program licensed by Oregon Health Authority to identify
 patients in need of palliative care, provide information to patients, residents and families of
 patients about palliative care and facilitate patient access to palliative care
- Support SB 178 which allows designated health care representative to elect hospice treatment on behalf of incapacitated individual with terminal condition in the absence of a valid advance directive. Defines hospice treatment as focused on palliative rather than curative measures.
- Support SB 179 which establishes community-based palliative care pilot project administered by the Department of Human Services (DHS). Specifies guidelines and requirements. Requires DHS to evaluate patient satisfaction and costs every six months and report to interim committees of Legislative Assembly by September 15, 2022. Sunsets January 2, 2024.
- Oppose SB 669 which modifies requirements for licensing of in-home care agencies.