



Oregon Urological Society

March 2018 Update

MISSION

To enhance the delivery and quality of urologic care through education and advocacy for patients and health care providers.

OUS Legislative Update

Membership Involvement Opportunities



1. Public Comment for Prostatic Urethral Lift

Oregon Health Evidence Review Committee is accepting written comments on the prostatic urethral lift (Urolift) – A decision on coverage is expected in April. Please send your comments to either Dr. Skinner or Debi Johnson (she can be contacted from OUS website or by phone at 425-971-5822).

2. Share Your Comments to the OUS for Arterial Embolization for BPH Expected

We anticipate guidelines forthcoming on prostatic arterial embolization for bph. Please share your thoughts and concerns with Dr. Skinner or Dr. Stan Myers in the next few months.

3. Share your Legislative Issues and Ideas of Concern to the OUS

We encourage all OUS members to contact us with any legislative concerns. Please feel free to call or write us directly, or via one of our Board members.

2018 Legislative Session Overview

Over 260 bills later and 26 days after convening, the 2018 Legislative Session Oregon Legislators adjourned one week early. The session began under a cloud of uncertainty with one sitting Senator under investigation for sexual harassment after reports were filed in fall of 2017 by two female State Senators. Less than one week into the Session, Sen. Jeff Kruse (R-Roseburg) resigned, committing not to return to the Capitol for the balance of session, and officially stepping down on March 15. This move reduced the Senate Republicans vote count on the floor to 12, but ensured that his seat would be filled via appointment by the County Commission (rather than the Governor).

SB 1549 - Balance Billing Update

HB 2339, passed in 2017, bans balance billing in emergency situations beginning March 1, 2018. Legislators understood that if a ban was to be implemented, there must also be clear minimum out-of-network reimbursement requirements to protect physicians who oftentimes do not choose to be out-of-network in the first place. The Senate, running out of time, ultimately decided to delay the implementation date of the balance billing ban, and directed the Department of Consumer and Business Services (DCBS) to convene a workgroup of stakeholders, and tasked the agency with recommending a reimbursement methodology in the 2018 Session based on the discussions of the workgroup. The workgroup met 5 times. There was agreement to benchmark reimbursement to the state-run All Payers All Claims Database, to use commercial data only, and to distinguish between different geographic regions. DCBS failed to make a specific reimbursement recommendation to the legislature, and cited a “lack of consensus” as their reasoning. An adverse billing situation occurred for ER which prompted Senators to facilitate additional negotiations between insurers and physicians. **RESULT: an insurer must reimburse an out-of-network physician at 100% of the median in-network allowed amount, as derived from the 2015 All Payers All Claims dataset, and adjusted annually for inflation each year based on the Consumer Price Index-Urban.** This agreement is to be sunsetted in 2021. Prior to this sunset, DCBS is required to submit a report to the Legislature that examines network adequacy issues, issues with compliance, and effects this legislation has on premiums.

NOTE: There was a scope creep amendment pushed by the nurses that would have allowed all advance practice nurses to supervise fluoroscopy, and was loosely based off of an agreement between the Nursing Board and the Board of Medical Imaging. We were ultimately able to assist in killing this effort.

Looking ahead at next steps in the interim, the Department will begin rulemaking in April. DCBS will also be issuing guidance to insurers instructing them to follow the nature of the agreement until rules are set.

HB 4143 – Result of Governor’s Opioid Task Force

Following the recommendations of the Governor’s Opioid Task Force, the Legislature unanimously passed HB 4143. The bill requires all prescribers to register with the Prescription Drug Monitoring Program, but does not mandate use of the PDMP. We anticipate this mandate will be part of the discussion in 2019. The bill also creates a peer support pilot program, largely modeled after Rhode Islands AnchorED program, which pairs a person waking up from an overdose with a peer support person who will explain treatment options. This pilot project will occur in Coos, Jackson, Marion and Multnomah counties. Finally, the bill requires the Department of Consumer and Business Services to study the potential barriers to addiction treatment.

HB 4135 - Advance Directive

Following several attempts to modernize the outdated Advance Directive language, the Legislature passed HB 4135 this Session. The bill aims to update the advance directive form, which has not been updated since its inception in 1993. Current form language is held in statute, meaning legislative action is required to make any updates. HB 4135 removes the language from statute, and kicks it to an advance directive advisory committee comprised of lawyers, providers, ethicists, and other experts to re-write the form.

SB 1547 - Concussions

The bill that allows non-physicians (physical therapists, naturopaths, chiropractors) to return student athletes to play following a concussion passed both chambers. Amendments delayed the implementation date of the bill, giving OHSU more time to create a comprehensive training program and the opponents more time to add additional stringent requirements in the next session.

SB 1528 – Small Business Pass-through Disconnect

SB 1528 disconnects Oregon from certain provisions of the federal tax reform bill adopted this past fall. Specifically, the bill seeks to disconnect for the purposes of determining state income tax liability for small businesses that are currently allowed to utilize the new 20% deduction on pass through business income. Proponents argued that with Oregon's current preferential rates for these same businesses, it serves as a double-deduction and would cost the state \$244.4M in FY 2017-19. Republicans argued that the bill is a tax increase of 20% on pass-through entities. Democrats say it's not, and that Oregon businesses have never taken advantage of the federal tax deduction before.

Beyond the Session- Upcoming Elections

It's campaign season! There are 16 Senate seats up this cycle, which is one more than usual due to Sen. Ferrioli's retirement mid-term late last Fall. Of the 16 seats, 6 are currently held by Republicans, the rest by Democrats. Other than Sen. DeBoer (R-Ashland), all Senate incumbents will be seeking re-election. The biggest Senate races to watch will be the Sen. DeBoer seat (SD 3), the primary race between Sen. Monroe (D-Portland) and former Representative Shemia Fagan. Additionally, the Senate Democrats will likely target Sen. Thomsen's (R-Hood River) seat.

In the House, all 60 seats are up for re-election. There are seven incumbents who are not seeking re-election, five of which are Republicans:

- Rep. Esquivel (R—Medford)
- Rep. Barnhart (D-Eugene)
- Rep. Olson (R-Albany)
- Rep. Boone (D-Tillamook)
- Rep. Kennemer (R-Oregon City)
- Rep. Whisnant (R-Sisters)
- Rep. Buehler (R-Bend)

There will be several very competitive races in the House this cycle. Some of the ones to watch are, Rep. McKeown (D-Coos Bay) facing off against Teri Grier who was a write-in candidate last cycle who came within striking distance. Additionally, Rep. Evans (D-Monmouth) will face off against Selma Pierce, wife of former Gubernatorial candidate Bud Pierce. Rep. Bynum (D-Happy Valley) will again be challenged by Lori DeRemer the Mayor of Happy Valley. The two had a very close—and expensive—race for the seat in 2016.

Potential future OUS collaborations we are exploring in preparation for 2019 to address:

- 1) Opioid crisis (*General public interest topic and general community health*)
 - 2) Anthem's policy to punish patients for "inappropriate" ER visits (*patient safety and the establishment of retro denials*)
 - 3) Implication of concussion bill passage (*scope creep and patient safety issue*)
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We encourage all OUS members to contact us with any legislative concerns. Please feel free to call or write us directly, or via one of our Board members. Contact the OUS Executive Director Debi Johnson (djmgmt@gmail.com 425-971-5822) if you would like to join the president in future state, national meetings and/or be part of the OUS Government Affairs Committee.