A Recap of the 2025 Oregon Legislative Session



Advancing teaching, learning and discovery for OHSU and the State of Oregon

Oregon Health & Science University is Oregon's only public academic health center. Dedicated to advancing the health and wellbeing of people in Oregon and beyond, OHSU works tirelessly to advance the missions of the institution in service to the state. All of this work is possible due to the ongoing partnership with the Oregon Legislature and Oregon Governor Tina Kotek.

With an uncertain federal landscape and state budget challenges looming, in the 2025 session OHSU prioritized preservation of public funding to the institution and maintaining OHSU's unique statutory structure. In order to better serve OHSU's patients, the institution also prioritized work to advance the recommendations of the Joint Taskforce on Hospital Discharge Challenges.





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Through OHSU's collective advocacy and partnership, as well as the shared expertise of OHSU members, the session yielded successful results for the institution. Some highlights included:

- Renewal of the OHSU general fund appropriation at current service level. This appropriation supports OHSU's education missions as well as the Area Health Education Centers, the Oregon Poison Center, the Child Development and Rehabilitation Center, OHSU 30-30-30 initiative, Oregon Behavioral Health Coordination Center and the Oregon Child Integrated Dataset.
- Full funding for graduate medical education.
- \$8.5 million in funding for the recommendations of the hospital discharge task force, including: post-hospital extended care benefit to cover a medical assistance recipient's stay in skilled nursing for up to 100 days, increases in rates for adult foster homes to accept discharging patients, ongoing funding increase for public guardians and several studies looking at processing times for eligibility determinations and options to waive asset testing, among others.

OHSU was also proud to partner with other organizations and individuals during the legislative session to advocate for policies that advance the institutional missions of health, education and research.

Along with other hospitals and federally qualified health centers, OHSU supported legislation to protect the 340B program in Oregon. House Bill 2385, which passed with bipartisan support, prohibits drug manufacturers from restricting 340B contract pharmacies.

OHSU also worked closely with Oregon AFSCME this session to protect the Oregon National Primate Research Center from attacks on the dedicated workforce and potentially lifesaving science. Together, OHSU and AFSCME corrected misinformation, identified legislative advocates and stopped multiple efforts to close the center. The advocacy of OHSU members across the institution, including West Campus, was vital to efforts to protect science and research.

Over the course of the legislative session, OHSU and the numerous members who engaged, offered their expertise and advocated for important policies, continued the long march to improve and protect health care access, invest in training the next generation of health care professionals, and retain the health care providers Oregon needs to ensure quality health care is available across the state.

With a statewide mission and a reach that extends far beyond Oregon, OHSU remains committed now and into the future to making Oregon a national leader in health and science innovation.

HCR 3 - Honored Dr. Brian Druker for his leadership and service.

Rep. Hai Pham honored Dr. Brian Druker for his ongoing service to the state of Oregon and OHSU. Dr. Druker's career accomplishments and lifesaving discoveries were highlighted during hearings in the House and Senate by his colleagues, including OHSU Interim President Steve Stadum, Dr. Lisa Coussens and Dr. Shivanni Kummar. Oregon Governor Tina Kotek also provided testimony. Rob Shick, who is a former board member of the OHSU Foundation, spoke as a patient of Dr. Druker's and how his own life was saved by Gleevac.



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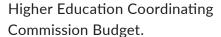
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Budget

HB 5525 | 🕜



As part of OHSU's ongoing and enduring partnership with the state of Oregon, the state makes significant strategic investments to support the missions of the institution. In 2025, those investments include renewal of OHSU's general fund appropriation to support education and other programs.

House Bill 5525- The budget bill for the Higher Education Coordinating Commission (HECC) includes OHSU's general fund appropriation, which supports the Schools of Medicine, Dentistry, and Nursing, 30-30-30, the Office of Rural Health and Area Health Education Centers, the Child Development and Rehabilitation Center, and the Oregon Poison Center.

The Governor's Recommended Budget, released in late 2024, recommended current service level (CSL) funding for OHSU and the state's other public universities through the Public University Support Fund.

Throughout the legislative session OHSU leaders, including Interim President Steve Stadum, School of Medicine Dean Dr. Nathan Selden and School of Nursing Dean Dr. Susan Bakewell-Sachs, advocated in Salem for current service level funding.

In April, President Stadum, Provost Dr. Marie Chisholm-Burns, Dean Selden, and OHSU Chief Financial Officer Lawrence Furnstahl presented OHSU's budget request to the Joint Ways and Means Subcommittee on Education. These leaders spoke to OHSU's statewide reach, the unique role OHSU plays in educating Oregon's health care workforce and OHSU's ongoing commitment to transparency, accountability, and advancing the health and wellbeing of Oregonians.

HB 5525 included full current service level funding for OHSU. The Public University Support Fund (PUSF), which supports Oregon's seven other public universities, was funded at Current Service Level, \$1,068,825,130, which included a seven percent inflationary increase. The Community College Support Fund was also funded at current service level, \$854,359,677, which was a 7.3 percent increase.

Effective Date: Already in effect

HB 2010 | 🖸

Hospital and Provider Assessment Renewal

Renewed Oregon's provider assessment and the OHSU intergovernmental transfer. This legislation extends the assessment on earnings from health plan premiums, the assessment on payments by the Oregon Health Authority to managed care organizations, and the assessment on hospitals. In addition to extending the sunset on assessments and premiums, the bill extended the sunset for Oregon Reinsurance Program to December 31, 2032. It also keeps the current reimbursement rate to OHSU for the costs of services paid for with Medicaid funds. The provider assessment and OHSU intergovernmental transfer is a critical part of OHSU's budget and helps to support the institution's mission driven educational and research programs.OHSU government relations worked closely with health care partners across the state under the leadership of Gov. Tina Kotek to pass this legislation.

Effective Date: September 25, 2025

HB 5025 | 🖸

Oregon Health Authority Budget

The Oregon Health Authority combines most health-related programs into a single agency with the goal of improving the health of all Oregonians, increasing the quality of health care services provided, and containing the growth of health care costs.

OHA administers publicly funded health benefits and contracts for services with insurers, Coordinated Care Organizations (CCOs), medical providers, local governments, Tribes, and communitybased organizations. House Bill 5025 implements the budget for the agency.

The most significant revenue adjustment from the current service level is due to the passage of House Bill 2010 that extended provider assessments on insurers and hospitals. Combined with a change in methodology for calculating the assessment on certain hospital revenues, provider assessment revenues of \$2.26 billion in excess of the current service level are anticipated.

The budget also makes additional investments in programs and projects to improve the health and wellbeing of Oregonians. .

Several other state investments of note in HB 5025 includes:

- An increase in funding of \$4 million General Fund and an increase of \$5 million Federal Funds expenditure limitation for the Graduate Medical Education program. The funding is anticipated to expand participation by approximately 12% in 2025-27 biennium. Current funding supports 816 residents and interns at eight teaching hospitals.
- \$49.3 million to support the Disproportionate Share Hospital Program
- Reestablishment of \$42.6 million for substance use disorder facilities and regional development and innovation funding.
- \$30 million to provide a mid-year 2025 Coordinated Care Organization rate adjustment.
- \$25 million to support enhanced hospital maternity rates

- \$10 million for a grant to support the Oregon Harm Reduction Clearinghouse.
- \$12.5 million to address continued access to women's reproductive health care.

Increased support to Local Mental Health Programs including:

- \$10 million increase for Aid and Assist services,
- \$13.2 million for Deflection and Diversion programs,
- \$7 million for Community Behavioral Health and SUD Treatment,
- \$7 million for School and Community Based SUD prevention, \$5.2 million for permanent supportive housing, and \$2.4 million for Behavioral Health Community Navigators and associated services.

S OHSU Current Service Level Budget Detail	23-25 Legislatively Approved Budget	25-27 Current Service Level (7%)
Education and General	\$118,658,647	\$125,359,752
School of Medicine	\$30,238,828	\$32,355,546
School of Nursing	\$26,151,339	\$27,981,933
School of Dentistry	\$12,255,625	\$13,113,519
Area Health Education Centers/Office of Rural Health	\$6,857,836	\$5,732,885
OHSU 30-30-30 Initiative	\$43,155,019	\$46,175,870
Child Development and Rehabilitation Center	\$9,722,521	\$10,403,097
Poison Center	\$4,011,209	\$4,291,994
Children's Integrated Health Database	\$2,000,000	\$2,140,000
Statewide Behavioral Health Capacity Dashboard	\$5,400,000	\$4,280,000
Oregon Perinatal Collaborative	\$1,000,000	
Total	\$140,792,377	\$146,474,843
OHSU Cancer Challenge Debt Service (Article XI-G)	\$23,575,130	\$23,571,125
Oregon University System Legacy Debt (Article XI-F(I))	\$3,441,830	\$3,317,166
Oregon Opportunity Program (Article XI-L)	\$7,328,750	
Grand Total	\$175,138,087	\$173,363,135





Policy

Benefits and labor

HB 2313 | 🔞

Health Care Worker Assault

Expands the crime of assault in the third degree to include causing physical injury to a health care worker while the worker is acting in the course of official duty.

HB 2676

Interstate Dentist and Dental Hygienist Compact

Enacts the interstate Dentist and Dental Hygienist Compact.

HB 2944



Penalties for Violations of PECBA

Directs the Employment Relations Board to impose civil penalties against a public employer that has a history of failing to comply with certain requirements under the Public Employee Collective Bargaining Act (PECBA). The legislation provides that a violation resulting from certain events is not subject to a civil penalty.

Effective date: January 1, 2026

HB 3044



Updates to the Nurse Practices Act

Includes a number of updates and technical fixes to the Nurse Practices Act. This updates and adds a number of definitions, aligns licensing, and clarifies certain requirements.

Effective date: September 26, 2025

HB 3060 | 🗷



Physician Assistant Licensure Compact

Enacts the Physician Assistant Licensure Compact.

HB 3294 | 🕜



Nurse Staffing Fixes

OHSU worked in coalition with other health care organizations, SEIU and ONA to make fixes to Oregon's nurse staffing law. This legislation, among other fixes, makes clear that a hospital is required to comply with either the nurse staffing plan for a unit if a nurse staffing plan for the unit has been adopted or, if a nurse staffing plan for the unit has not been adopted, the applicable statutory nurse-to-patient staffing ratio for the unit.

Effective date: September 26, 2025

HB 3339 | 🔯

Psychology Interjurisdictional Compact

Enacts the Psychology Interjurisdictional Compact.

HB 3351 | 🛭



Enacts the interstate Counseling Compact.

SB 376 | 🔯



Provider Incentive Program

Defines "rural" for purposes of the rural health care provider incentive program.

SB 916



Unemployment Benefits for Striking Workers

Provides that an individual otherwise eligible for unemployment insurance benefits is not disqualified for any week that the individual's unemployment is due to a labor dispute in active progress at the individual's place of employment.

Effective date: January 1, 2026

SB 968 | 🕢



Deductions for Overpayments

Senate Bill 968 provides conditions and procedures under which a public employer may deduct amounts of erroneous overpayments from a public employee's wages.

Effective date: January 1, 2026



Healthcare

HCR 4 | 🕜



Designates May 2025 as Ehlers-Danlos Syndromes and Hypermobility Spectrum Disorders Awareness Month.

HB 2011 | 😵



Prohibits health insurers and pharmacy benefit managers from restricting coverage of physician-administered prescription drugs that are obtained by nonparticipating pharmacies.

HB 2021 | 🔯

Certificate of Need Changes

Modifies the certificate of need process to allow only applicants to challenge proposed decisions of the Oregon Health Authority.

HB 2022 | 🗵



Certificate of Need Exclusion for Certain Rehab Facilities

Excludes facilities providing rehabilitation services to individuals with brain injuries or spinal cord injuries from the requirement to obtain a certificate of need from the Oregon Health Authority.

HB 2023 | 💌



Coverage for Behavior Analysis Therapy

Establishes certain health insurance coverage for applied behavior analysis therapy for certain intellectual and developmental disability diagnoses with the same requirements for coverage as autism spectrum disorder diagnoses.



HB 2040 | 🔯

Health Care Complaint Process

Establishes a complaint process for health care providers to submit complaints to the Department of Consumer and Business Services or the Oregon Health Authority regarding health insurers or coordinated care organizations.

HB 2057 | 🗷



Bans 340B Claim Identifiers

Prohibits insurers offering policies or certificates of health insurance and pharmacy benefit managers from requiring that a claim for reimbursement of a prescription drug include a modifier or other indicator that the drug is a 340B drug.

HB 2132 | 🛛



Residential Care Facility Reimbursement Boost

Directs the Department of Human Services to establish medical assistance reimbursement rates for residential care facilities that are commensurate with rates for assisted living facilities.

HB 2143 | 🕗



Auricular Acupuncture

Defines "five-needle protocol.

Effective date: September 26, 2025

HB 2149 | 🗵



Pharmacy Services Licensing

Requires pharmacy services administrative organizations operating in this state to be licensed by the Department of Consumer and Business Services and creates rules for licensing requirements.

HB 2205 | 🕜



CCO Contract Length

Requires a contract entered into between the Oregon Health Authority and a coordinated care organization to be for an initial term of no less than five years and to be the same length for all coordinated care organizations contracting with the authority.

Effective Date: January 1, 2026

HB 2206 | 🗷



Work Group to Study Transfer of Adult Mental Health Services to CCO

Requires the Oregon Health Authority to convene a work group to study adult residential mental health services provided by facilities to medical assistance recipients enrolled in coordinated care organizations and the feasibility of transferring the financial risk and administration of those services from the authority to coordinated care organizations.

HB 2208 | 💟



CCO Community Health Improvement Plans

Requires a coordinated care organization to collaborate with local public health authorities, community mental health programs, local planning committees and hospitals in conducting a community health assessment and adopting a community health improvement plan.

Effective Date: January 1, 2026

HB 2209 | 🗷



CCO Contract Amendment Updates

Establishes new criteria and process for proposed amendments to contracts entered into between the Oregon Health Authority and coordinated care organizations.

HB 2210 | 💌



Provider Credentialing

Establishes the Task Force on Provider Credentialing to make recommendations for expanding and improving a provider credentialing database maintained by the Oregon Health Authority.

HB 2212 | 🔯



Oregon Health Plan Prioritized List

Establishes the Task Force on the Prioritized List of Health Services.

HB 2216 | 💌



Directs the Oregon Health Authority to assess current feefor-service billing practices and non-fee-for-service payment pathways for community health workers serving medical assistance recipients to identify improvements for ensuring adequate and sustainable funding.

HB 2217 | 🗷

CCO Community Advisory Council Members Updates

Modifies the membership requirements for coordinated care organizations' community advisory councils.

HB 2222 | 🛚

Mobile Health Provider Participation in **Medical Assistance Programs**

Directs the Oregon Health Authority to prescribe criteria for mobile integrated health care providers to enroll as providers in the state medical assistance program.

HB 2223 | 🛛

Expands CCO Contracting Options

Requires coordinated care organizations to contract with providers outside of a particular geographic area when the area has limited access to a medical assistance care or service.



HB 2229 | 🛛

CCO Contract Length

Extends the term of a contract entered into between the Oregon Health Authority and a coordinated care organization to 10 years and allows the authority to reevaluate a contract after the initial five years.

HB 2318 | 💌

Temperature Excursions on Mail Order Drugs

Requires the Oregon Health Authority to review studies on temperature excursions during the transit of mail order drugs.

HB 2385 | 🕗

340B Contract Pharmacies

Prohibits drug manufacturers from interfering directly or indirectly with a pharmacy or drug outlet acquiring 340B drugs, delivering 340B drugs to certain health care providers or dispensing 340B drugs.

Effective Date: September 26, 2025

HB 2457 | 🔯

Rare Disease Advisory Council

Establishes the Rare Disease Advisory Council.

HB 2506 | 🔯

Statewide Policies on Medications for Opioid Use Disorder

Directs the Alcohol and Drug Policy Commission, in collaboration with the Oregon Health Authority, to develop statewide policies and practices to support the availability of medications for opioid use disorder in physical health care settings and the transition to care in the community.

HB 2507 | 💌



Youth Treatment and Recovery Study

Directs the Alcohol and Drug Policy Commission, in collaboration with the System of Care Advisory Council, to study needed treatment and recovery services for youth with co-occurring diagnoses and the barriers to accessing and receiving holistic services.

HB 2536 | 🗵



Prohibits health benefit plans from requiring step therapy prior to covering a prescription drug for the treatment of metastatic cancer and associated conditions. OHSU supported the legislation in coalition with other health care organizations.

HB 2538 | 🔯



Lethal Means Continuing Education for Physicians, Physician Associates

Directs the Oregon Medical Board to require physicians and physician associates to complete continuing education regarding lethal means counseling.

HB 2553 | 🔯



Pharmacy Benefit Manager Fiduciary

Requires pharmacy benefit managers to act as fiduciaries to enrollees when negotiating drug prices and tells the Department of Consumer and Business Services to adopt rules explaining the fiduciary duty requirements and to establish a complaint process for reporting breaches of fiduciary duty.

HB 2585 | 😵



Scope of Practice Review Process

Directs the Oregon Health Authority to establish a process to receive and review scope of practice requests for specified health care professions.

HB 2597 | 🗷



Dental Reimbursement Rates

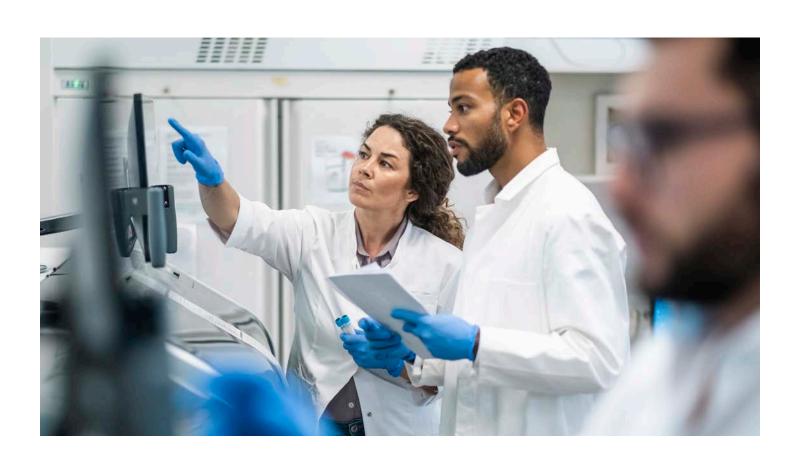
Directs the Oregon Health Authority and coordinated care organizations to reimburse dental care organizations for dental services provided to medical assistance recipients at a rate no less than 59.8 percent of the average rate paid by insurers nationwide.

HB 2690 | 🗴



Committee on Health Care Insurance Mandates

Establishes the Health Insurance Mandate Review Advisory Committee, staffed by the Legislative Policy and Research Director, to meet during interims between sessions of the Legislative Assembly to review a specified number of proposed measures sponsored by or submitted to the interim committees of the Legislative Assembly related to health if the measure requires health insurance policies to reimburse specified health care providers or to reimburse the cost of a specific service.



HB 2748 | 🕜



Protects Nursing Title from Artificial Intelligence

Prohibits a nonhuman entity from using specified nursing titles and abbreviations.

Effective Date: January 1, 2026

HB 2789 | 🕗



Prohibits Certain Reimbursement Restrictions

Prohibits the Oregon Health Authority under specified circumstances from requiring, as a condition of reimbursing the cost of the service, a primary care provider to order a covered care management service provided by a licensed registered nurse to a medical assistance recipient.

Effective Date: September 26, 2025

HB 2794 | 🔞



Procedures for Medical Faulty Medical **Device Complaints**

Directs a health care facility to establish and maintain procedures that a staff member may use to submit to the health care facility a complaint regarding a medical supply or equipment that the staff member believes in good faith is faulty or dangerous.

HB 2796 | 🗷



Hospital Financial Transparency Requirements

Requires a hospital or hospital system in this state to make publicly available certain financial data.

HB 2798 | 💌



Hospital Expense Reporting

Requires a hospital licensed or hospital system operating in this state to make publicly available its expenses from the preceding year.

HB2917 | **☎**



Prioritized List Change Study

Requires the Oregon Health Authority to study potential changes to the prioritized list of health services compiled by the Health Evidence Review Commission under ORS 414.

HB 2918 | 💌



Hospital Cash on Hand

Requires a hospital to report on a quarterly basis to the Oregon Health Authority its daily cash on hand.

HB 2920 | 🗷



Hospital Investment Information

Requires a hospital to report to the Oregon Health Authority and make publicly available securities data and disclosures that the hospital provides to the federal Municipal Securities Rulemaking Board.

HB 2939 | 🔯



Hospital Closure Delay

Prohibits a hospital from closing or ceasing, reducing or relocating health services without first providing notice 275 days in advance.

HB 2955 | 💌



Glucose Monitors

Requires medical assistance to include continuous glucose monitors for specified recipients of medical assistance.

HB 2959 | 🔞



Coverage of Fertility Services

Requires health insurance coverage of specified fertility services and treatments with exemption for certain insurers. OHSU's Dr. Paula Amato testified in support of the legislation.

HB 3063 | 🖸



Hospital Education Program

Provides that a student who is in a hospital educational program shall continue to remain enrolled in the school district in which the student had been a resident prior to being in the hospital educational program only for the purpose of maintaining access to classroom curricula and associated technology.

Effective Date: January 1, 2026

HB 3134 | 🕢



Prior Authorization

Requires additional reporting about prior authorization to the Department of Consumer and Business Services from insurers offering a health benefit plan and tells the department to make this data publicly available. OHSU supported this legislation in coalition with other hospitals and health care entities.

Effective Date: January 1, 2026



HB 3080 | 🗷

Health Care Representative

HB 3080 modifies provisions regarding who can act as a health care representative for an incapacitated person who has not appointed a health care representative or does not have an advance directive.

HB 3082 | 🔯

Pharmaceutical Patient Assistance Reporting

Requires prescription drug manufacturers to report to the Department of Consumer and Business Services the total number of consumers to which the manufacturer offered a patient assistance program who participated in the program, notwithstanding any increase in the price of the prescription drug for which the manufacturer offered the program.

HB 3127 | 🕜

Electronic Death Reporting

Requires use of the state electronic reporting system to report deaths to the Center for Health Statistics.

Effective Date: XXXX

HB 3211 | 🕝



Nonopioid Directive Form

Requires the Oregon Health Authority (OHA) to develop a nonopioid directive form that is available electronically to the public.

Effective Date: January 1, 2026

HB 3212 | 🔯



Pharmacy Benefit Manager Rules

Creates additional rules and requirements for pharmacy benefit managers and a policy or certificate of health insurance or other contract providing for the reimbursement of the cost of a prescription drug.

HB 3221 | 🔯

Urgent Care Requirements

Prohibits the use of the terms "urgent" or "urgent care" unless a health clinic registers with Oregon Health Authority and requires an urgent care center is registered with Oregon Health Authority meet certain capability standards.

HB 3223 | 🛛



Presription Drug Dispensing

Prohibits a mail-order, specialty or online pharmacy from transferring prescription drugs intended for dispensation to a patient to a pharmacy located in this state unless the pharmacy has agreed to receive the prescription drugs.

HB 3226 | 🕜



Pharmacy Benefit Manager Oversight

Includes pharmacy services administrative organizations within the definition of pharmacies for the purpose of ensuring that pharmacy benefit managers are subject to laws regulating their activities even if their contracts are with pharmacy services administrative organizations.

Effective Date: September 26, 2025

HB 3242 | 🕗



In-network Credentialing

Requires health insurers to pay providers who are joining an in-network practice the same as in-network providers during the credentialing period.

HB 3243 | 🕜



Ambulance Balance Billing

Prohibits balance billing for ambulance ground transportation services in certain circumstances and creates rules for health benefit plan reimbursement of ambulance services.

Effective Date: January 1, 2026

HB 3245 | 🔞



CCO Global Budget

Directs the Oregon Health Authority to study a methodology for calculating a coordinated care organization's global budget and report the authority's findings to the Legislative Assembly.

HB 3379 | 🔯



Study Supplemental Medicaid Reimbursement for Transport

Requires the Oregon Health Authority to study Medicaid supplemental reimbursement for ground emergency medical transportation services.

HB 3421 | 🛭



Biomarker Testing

Requires certain policies and certificates of health insurance and medical assistance managed plans to cover biomarker testing with certain rules and requirements.

HB 3439 | 💌



Naturopath Reimbursement

Requires individual and group health benefit plans and benefit plans offered by the Public Employees' Benefit Board and the Oregon Educators Benefit Board to reimburse services provided by naturopathic physicians within the scope of their practice if the services are reimbursed when provided by licensed physicians, physician associates or nurse practioners. Requires reimbursement paid to a naturopathic physician in independent practice to be in the same amount as reimbursement paid to a physician, physician associate or nurse practioner.

HB 3517 | 🛭



Coverage for Obesity Treatments

Requires a policy or certificate of health insurance or health care services contract offered by a health care service contractor in this state, state medical assistance and health benefit plans offered by the Public Employees' Benefit Board and the Oregon Educators Benefit Board to cover certain treatments for an obesity diagnosis with certain requirements.

HB 3557 | 🕟



Hospital Price Transparency

Requires a hospital to establish, update and make public a list of standard charges that lists the regular rates or prices established by the hospital for items or services and shoppable services offered or provided by the hospital.

HB 3574 | 💌



Certificate of Need Study

Requires the Oregon Health Authority to study the effectiveness of current laws and rules governing the certificate of need process in this state.

HB 3590 | 🗷



Prohibiting Balance Billing

Prohibits out-of-network providers from balance billing for pediatric care in certain circumstances.

HB 3591 | 🗴



Out-of-network Reimbursements for Pediatric Care

Requires a group or individual health benefit plan, policy or contract, including plans offered by the Public Employees' Benefit Board or the Oregon Educators Benefit Board, to reimburse out-of-network providers the same as in-network providers for pediatric care and prohibits additional out-of-pocket costs for pediatric care.

HB 3613 | 🗵



Creates Office of Pharmaceutical Purchasing

Creates the Office of Pharmaceutical Purchasing within the Oregon Department of Administrative Services to support multiagency and multistate collaborative purchasing of pharmaceuticals, drive down the cost of prescription drugs for residents of this state and manage the Oregon Prescription Drug Program.

HB 3650 | 💌



Latino Health System Task Force

Establishes the Latino Health System Task Force to develop proposals for a Latino Health System that meets specified goals.

HB 3727 | 🕜



Out of State Telemedicine

Allows a physician or physician associate to use telemedicine to practice medicine or provide health care services under specified circumstances to a patient located out of state.

Effective Date: January 1, 2026

HB 3799 | 🛛



Experimental Treatments

Creates a method by which a health care practitioner may offer to treat a patient who has a terminal disease or severe chronic disease with an investigational product not approved by the United States Food and Drug Administration.

HB 3871 | 🛭



Directs the Oregon Health Authority and the Department of Veterans' Affairs to study the consumption of ibogaine by certain individuals for the purpose of treating specified disorders.

HB 3824 | 🕜



Physical Therapist Dry Needling

Allows a physical therapist to perform dry needling.

Effective Date: September 26, 2025

HB 3924 | 🔯



CCO Patient Transfers

Requires the Oregon Health Authority to approve the transfer of 500 or more members of a coordinated care organization or dental care organization if the transfer meets specified conditions, unless the transfer diminishes patient care.

SB 233 | 🔀



Hernia Mesh Litigation

Allows a person to file an action to recover damages for injuries arising from or in connection with removal of a hernia mesh that occurred on or after January 1, 2018, and before January 1, 2019.

SB 296 | 🔮



Hospital Discharge Task Force

In 2023, the Oregon Legislature established the Joint Task Force on Hospital Discharge Challenges to address the needs of Oregonians who are waiting in hospitals to be discharged to the next appropriate level of care. Former OHSU Health Chief Operating Officer Joe Ness participated as a member of the task force and OHSU actively supported the legislation in coalition with other hospitals, labor, and long-term care. The final approved legislation included post-hospital extended care benefit to cover a medical assistance recipient's stay in skilled nursing for up to 100 days, increases in rates for adult foster homes to accept discharging patients, ongoing funding increase for public guardians and several studies looking at processing times for eligibility determinations and options to waive asset testing, among others.

SB 447 | 🛚



Patient Assistance Program Notification

Requires a pharmacy to notify a person to whom a prescription drug is dispensed that the drug manufacturer may offer a patient assistance program.

SB 451 | 🛭

Coverage of Cervical Cancer Screenings

Prohibits cost-sharing on certain health insurance coverage of cervical cancer screenings and follow-up examinations. OHSU supported the legislation in coalition with other health care organizations, led by the American College of Obstetricians and Gynecologists.

SB 528 | 🛭



Regional Health Equity Coalitions

Appropriates money to be used for regional health equity coalitions.

SB 529 | 🛭



Medical Assistance Contracting

Directs the Oregon Health Authority to contract directly with community health registered nurses and community-based organizations to provide services to medical assistance recipients.

SB 531 | 🗷



Oregon Wellness Program

Directs the Oregon Department of Administrative Services to distribute money to the Oregon Wellness Program for specified purposes.

SB 535 | 🔯



Insurance Coverage for Fertility Treatments

Requires health insurance coverage of specified fertility services and treatments with exemption for certain insurers.

SB 536 | 🕜



Allows PAs and NPs to be a Medical Examiner

Provides that a licensed physician associate or nurse practitioner may be a medical examiner.

Effective Date: January 1, 2026

SB 537 | 🕜



Hospital Workplace Violence Prevention

Creates workplace violence prevention requirements for certain health care entities.

Effective Date: January 1, 2026

SB 539 | 🗵

Hospital Facility Fees

Requires a hospital or the hospital's health system to report annually to the Oregon Health Authority certain information regarding facility fees that are charged or billed for patient visits at the hospital's or health system's hospital-based facilities

SB 581 | 🗵

Psychology Provider Incentive Program

Creates the psychology provider incentive program within the Oregon Health Authority to provide financial incentives to students enrolled in approved doctoral programs in psychology who complete courses that provide cultural competency training.

SB 605 | 🖸

Medical Debt Reporting

Prohibits medical service providers from reporting the amount or existence of medical debt to a consumer reporting agency.

Effective Date: January 1, 2026

SB 609 | 🔯

Minimum Reimbursements for Primary Care, Optometry, Dental Care and Behavioral Health

Establishes minimum amounts of reimbursement for primary care, optometry, dental care and behavioral health services provided to recipients of medical assistance.

SB 691 | 🔯

Project Nurture

Directs the Oregon Health Authority to distribute moneys to an entity within the Oregon Health and Science University that advocates for improved maternal and neonatal outcomes. Requires the authority and a coordinated care organization to reimburse the costs of covered peer delivered services, regardless of the clinical setting in which services are provided, and for inpatient hospital services provided to specified individuals.

SB 692 | 🕜

Perinatal Services

Establishes a community-based perinatal services access program to increase access to culturally specific and culturally competent community-based services during the perinatal period.

Effective Date: January 1, 2026

SB 695 | 🛭

Access to Postpartum Care

Requires the Oregon Health Authority and coordinated care organizations to develop and implement a whole-person maternal health model for medical assistance recipients.

SB 699 | 🖸

Coverage for Prosthetic and Orthotic Devices

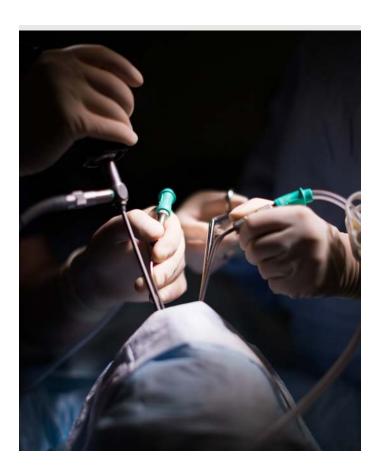
Expands the health insurance coverage of prosthetic and orthotic devices and exempts the Public Employees' Benefit Board and Oregon Educators Benefit Board from the expansion of covered services unless the boards provide notice to the Department of Consumer and Business Services. OHSU supported the legislation in coalition with other health care organizations, and Dr. Nels Carlson submitted testimony in support of the legislation.

Effective Date: January 1, 2026

SB 718 | 🛭

Parkinson's Disease Registry

Establishes the Parkinson's disease registry.



SB 842 | 🕜

Hospital License Fees

Increases for hospitals the annual license fees to be obtained by the Oregon Health Authority.

Effective Date: October 1, 2025

SB 873 | 🕗

Volunteer Emeritus License Repeal

Repeals a license issued by the Oregon Medical Board to certain physicians licensed to practice in other jurisdictions

Effective date: September 26, 2025

SB 1003 | 🗷

Death with Dignity Updates

Modifies provisions relating to the Oregon Death With Dignity Act.

SB 1039 | 🗴

Oregon Perinatal Collaborative

Creates the Oregon Perinatal Collaborative in the Oregon Health and Science University.

SB 1060 | 🗷

Price Transparency

Requires hospitals to publicly disclose their standard charges for medical services, including rates negotiated with different payers and discounted cash prices.



Campus Planning and Facilities

HB 3018 | 🛭

Food Waste

Requires entities that generate a certain amount of food waste per week to sort and recover food waste and arrange for the food waste to be composted.

SB 139 | 🕗

Medical Waste

Permits sharps and waste pharmaceuticals to be consolidated in a single container, subject to certain requirements.

Effective Date: January 1, 2026

SB 426 | 🕜

Owner and Contractor Liability

Makes an owner and a direct contractor jointly and severally liable in a civil action for any unpaid wages owed to the unrepresented employees of the direct contractor and subcontractors at any tier. Public entities like OHSU were exempted from the final bill.

Effective date: January 1, 2026

SB 698 | 🔯

Firearms in Public Buildings

Authorizes the governing bodies of certain public entities that own or control public buildings to adopt a policy, ordinance or regulation limiting the affirmative defense for concealed handgun licensees for the crime of possessing a firearm in a public building. Provides that in a prosecution for possessing a firearm in a building or on grounds subject to such a policy, ordinance or regulation, the concealed handgun licensee affirmative defense is not a complete defense, but results in a Class A misdemeanor conviction punishable by 364 days' imprisonment, \$6,250 fine, or both.

Higher Education

HB 2147 | 🛛

Addiction Medicine Fellowship

Provides \$1.4m to the Higher Education Coordinating Commission to be distributed to Oregon Health and Science University for purposes of the Addiction Medicine Fellowship program.

HB 2371 | 🔯

Tuition Waiver Reduction

Prohibits the amount of tuition that is waived for qualified students from being reduced by the amount of specified student aid received by the qualified students.

HB 2550 | 🛛

Oregon Promise Criteria

Changes the requirements to qualify for the Oregon Promise program by removing the requirement that a person must receive the person's highest level of education six months prior to enrolling in a community college, removing the requirement that a person must complete high school in this state, removing the requirement that a person must have earned a cumulative grade point average of 2.0 or better in high school and specifying that a person may qualify by enrolling in a program to earn an applied baccalaureate degree or a Bachelor of Science: Nursing degree.

HB 2586 | 🖸

In-state Tuition for Asylum Seekers

Permits an asylum seeker who is a student at a public university in this state or OHSU to receive an exemption from nonresident tuition and fees. OHSU supported this legislation.

Effective date: Already in effect

HB 2719 | 🗴

Guaranteed Opportunity Program

Establishes the Guaranteed Opportunity Program.

HB 2873 | 💌

Work Study Pilot

Directs the Higher Education Coordinating Commission to establish an Oregon work study pilot program to assist post-secondary students.

HB 2948 | 🕗



Nursing Supervision

Allows a school administrator or other staff member who is not a nurse to supervise a school nurse or registered nurse in a school setting for purposes not related to the practice of nursing.

Effective date: January 1, 2026

HB 3025 | 🖸



Education Cost Sharing

Removes the shared responsibility model by which a qualified student, the student's family, the federal government and the state share the cost of education for the student.

Effective date: January 1, 2026

HB 3029 | 🗷



Makes changes to workforce development statutes to improve alignment across workforce development programs and projects.

HB 3182 | 🗵



Basic Needs Programming Grant

Directs the Higher Education Coordinating Commission to administer a grant program to fund basic needs programming.

HB 3213 | 🗵



University Foundation Public Records

Requires that public university foundations are subject to the public records laws of this state.

HB 3554 | 💌



Loan Repayment Program

Directs the Oregon Health Authority to establish a primary care provider loan repayment program to offer loan repayment subsidies to specified primary care providers.

HB 3731 | 🕗



Sexual Misconduct Reporting

Provides additional data to be included by institutions of higher education in an annual report regarding allegations of sexual misconduct and violence on the campus of the institution.

Effective date: Already in effect

HB 3275 | 🗵



Resident Tuition for Active Service Members

Requires public universities and community colleges to charge tuition and fees no greater than the resident rate for an active member of the Armed Forces of the United States and for a spouse or dependent child of an active member of the Armed Forces of the United States.

HB 3280 | 🗷



Task Force on Rural Medical Training Facilities

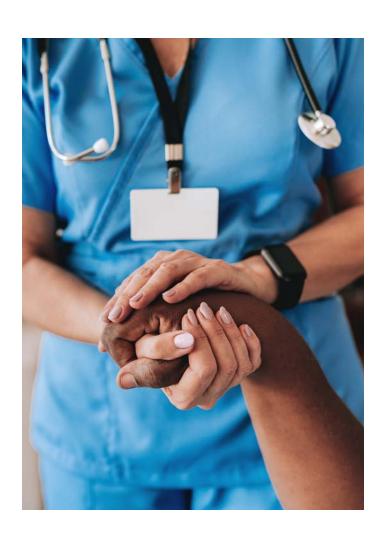
Establishes a Task Force on Rural Medical Training Facilities.

HB 3902 | 🗷



Nurse Educator Workforce

Directs the Oregon State Board of Nursing to establish an advisory committee to study the nursing educator shortage and make recommendations to address the issues identified by the committee.



SB 476 | 🕜



Licenses for Internationally Trained Physicians

Requires professional licensing boards who interact with internationally educated individuals through their licensure, certification, or other authorization processes to receive culturally responsive training approved by the Office of Immigrant and Refugee Advancement. The measure also grants the Oregon Medical Board (OMB) the authority to establish a provisional license for qualified and licensed internationally trained physicians. By February 1 of every odd-numbered year, OMB must report provisional license statistics to the Legislature.

Effective date: Already in effect

SB 659 | 🛭



Prohibits the amount of tuition that is waived for qualified students from being reduced by the amount of specified student aid received by the qualified students.

SB 668 | 🗴



Tuition Benefits for Veterans

Expands tuition benefits available to disabled veterans to permit veterans who are Oregon residents and are 80 percent or more disabled, and the spouse and child of disabled veterans, to have tuition waived for enrollment in a vocational program or an associate degree, baccalaureate degree or master's degree program at community colleges, public universities and OHSU.

SB 772 | 🗴



Indian Health Scholars Program

Establishes the Indian Health Scholarship Program to provide free tuition and fees for qualifying Indian health profession students in exchange for the student's commitment to work at a tribal service site after graduation and appropriates moneys for the 2025-2027 biennium to OHSU for the purpose of administering the Indian Health Scholarship Program.

SB 798 | 🖸



In-state Tuition for National Guard Members

Provides out-of-state members of the Oregon National Guard with in-state tuition and other higher education benefits.

Effective date: January 1, 2026

SB 1037 | 🛭



Requires an institution of higher education to provide specified information related to a realistic expectation of income for an individual in a field related to the degree the student seeks to obtain.

SB 1084 | 🗷

Excise Tax on University Endowments

Imposes an excise tax on the net investment income of public universities.



Mental and Behavioral Health

HB 2005 | 🕗



Behavioral Health Omnibus

Changes and clarifies the criteria for civil commitment, makes modifications to the civil commitment process, and modifies processes for Declarations of Mental Health Treatment. It expands civil commitment of extremely dangerous persons to include attempts when those attempts created an actual or extreme risk of grave or potentially lethal physical injury to another person. It directs a study and Task Force on the intersection of tribal and state courts regarding forensic behavioral health.

Effective date: Already in effect

HB 2024 | 🕢



Behavioral Health Workforce

Directs the Oregon Health Authority (OHA) to establish grant and incentive payment programs to support the recruitment and retention of behavioral health workers at certain eligible entities, makes changes to the United We Heal Medicaid Payment Program, and appropriates money from the General Fund to carry out provisions of the measure.

Effective Date: Already in effect

HB 2059 | 🖸



Funding for Mental Health and SUD Treatment

Appropriates \$65 million to OHA's Residential Behavioral Health Capacity Program (RBHC) to fund facilities that increase the capacity of residential behavioral health services providing withdrawal management, residential treatment, and psychiatric inpatient care services

Effective Date: Already in effect

HB 2203 | 💌



Safety for Behavioral Health Workers

Implements recommendations from the Joint Task Force on Improving the Safety of Behavioral Health Workers, including requiring behavioral health employers to develop and implement a written safety plan and comprehensive safety trainings. This measure applies to residential treatment facilities and homes, secure residential treatment facilities and homes, sobering facilities, detoxification centers, halfway houses, mobile crisis teams, and emergency shelters.

HB 2365 | 🗷

Tax Credit for Rural Provider Expansion

Adds mental health professionals, naturopathic physicians, pharmacists, medical laboratory scientists and medical laboratory technicians to the types of providers eligible for the tax credit allowed to rural medical care providers

HB 2387 | 🕜



Psilocybin Services

Modifies provisions regarding the provision of psilocybin services, including clarifying the ability of specified licensed health care professionals to serve as psilocybin service facilitators and the ability of state licensing boards to share information.

Effective date: Already in effect

HB 2506 | 💌



Directs the Alcohol and Drug Policy Commission, in collaboration with the Oregon Health Authority, to develop statewide policies and practices to support the availability of medications for opioid use disorder in physical health care settings and the transition to care in the community.

HB 3085 | 🔯



Emergency Behavioral Health Services for Children

Establishes the Emergency Behavioral Health Services for Children program in the Oregon Health Authority to promote timely delivery of behavioral health services to children who present to hospital emergency departments in behavioral health crises. Directs the authority to implement up to three pilot programs in three regions with one hospital per region willing to be a Regional Child Psychiatric Center.

HB 3129 | 🛛



Higher Education Behavioral Health Workforce Expansion Fund

Establishes the Higher Education Behavioral Health Workforce Expansion Fund to distribute moneys from the fund to community colleges and public and private universities in this state for purposes of expanding the training, employment and retention of behavioral health professionals.

HB 3229 | 🗷



Expediated Medical Assistance Enrollment for Behavioral Health Providers

Directs the Oregon Health Authority to expedite the process for enrolling behavioral health providers in the medical assistance program and study the feasibility of developing and implementing an automated, online tool for behavioral health provider enrollment applications.

HB 3631 | 🔯



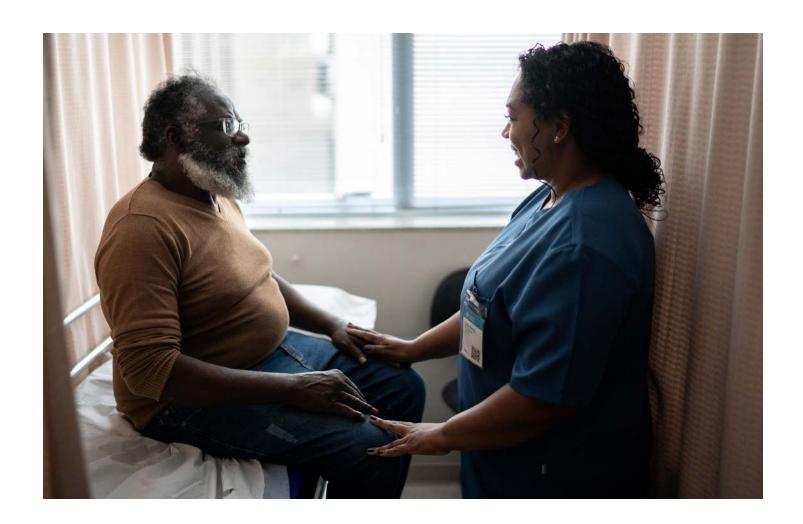
Youth Substance Use Prevention Pilot

Directs the Oregon Health Authority to establish a thriving youth pilot program to provide substance use prevention education through comprehensive out-of-school programming and access to specialized mental or behavioral health services to youth in 20 counties in this state.

HB 3835 | 🗵

System of Care Advisory Council Restraint Recommendations

Modifies laws related to the use of restraint and seclusion on children in care settings. Defines abusive restraint and abusive seclusion, outlined when restraint or seclusion may be used, and established procedures for investigating instances of abusive restraint or seclusion. Modifies provisions regarding investigations of child abuse in certain settings and changes the definition of abuse. Modifies the regulatory and enforcement authority of the Department of Human Services (DHS), allows DHS to place children in out-of-state agencies under certain circumstances, and exempts secure medical transport from certain licensing requirements. Directs DHS to submit guarterly narrative reports to the System of Care Advisory Council (SOCAC), requires SOCAC to submit reports to the Legislative Assembly, and makes clarifying and conforming amendments. OHSU joined a coalition of health care providers and hospitals in supporting this legislation. OHSU's Dr. Ajit Jetmalani testified and advocated in support of the legislation as a member of the Systems of Care Advisory Council.



SB 62 | 🛭

Consumer Engagement

Requires the Oregon Health Authority to develop, implement and administer a program to support consumer engagement efforts aimed at increasing and optimizing consumer involvement in planning and decision-making surrounding the access to, and delivery of, behavioral health services in this state.

SB 140 | 🛛

Increased Medicaid Reimbursements for Inpatient Behavioral Health

Requires the Oregon Health Authority and coordinated care organizations to increase reimbursement rates for inpatient psychiatric services provided by hospitals to medical assistance recipients. OHSU supported this legislation in coalition with other hospitals.

SB 142 | 🛛

Scholarships for Behavioral Health Training

Directs the Higher Education Coordinating Commission to award scholarships to certain individuals enrolled in behavioral health care programs of study. Directs the Oregon Health Authority to award grants to eligible entities to foster recruitment and retention of behavioral health care providers.



SB 171 | 🛭

OHA Support Program for Behavioral Health Services

Requires the Oregon Health Authority to develop, implement and administer a program to support consumer engagement efforts aimed at increasing and optimizing consumer involvement in planning and decision-making surrounding the access to, and delivery of, behavioral health services in this state.

SB 598 | 🕗

Nonopioid Alternatives

Requires any entity that provides health care coverage for prescription drugs to ensure that the drug formulary provides coverage for at least one clinically appropriate nonopioid prescription drug as an alternative for each opioid prescription drug.

SB 729 | 🕜



Access to Mental Health Services for Individuals with IDD

Extends to all public bodies the prohibition against denying mental health services to individuals with intellectual or developmental disabilities.

SB 1112 | 🔯



Specifies requirements for the Department of Human Services (DHS) to admit a child in its care or custody in an inpatient or residential facility for treatment, including additional requirements for out-of-state treatment and exceptions for long-term residential placements.

SB 1113 | 🛭



Modifies provisions regarding the use of restraints and involuntary seclusion on certain young people. Modifies provisions regarding investigations of abuse of certain young people. Modifies provisions regarding licensing of child-caring agencies. Modifies provisions regarding out-of-state placements of children in care.

Public Entity

HB 2459 | 🗷

Public Employee Salaries

Provides that, beginning on January 1, 2028, the annual salary or wages paid to an officer or employee of certain state agencies may not exceed 10 times the lowest annual salary or wages paid to a full-time officer or employee of the agency.

HB 2695 | 🕗

OHSU Presidential Search

Requires the Oregon Health and Science University Board of Directors to include specified individuals in the search and hiring committees for a president of the university. OHSU Chief Administrative Officer Connie Seeley submitted testimony in support of the legislation.

Effective Date: January 1, 2026

HB 3056 | 🛭

Legislator Public Records Requests

Requires state agencies to waive fees for public records requests when the request is made by a member of the Legislative Assembly.

HB 3883 | 💌



Public Comment

Requires public meetings to include a time for public comments at the start of each public meeting.

HB 3887 | 💌



Public Meeting Work Session

Defines a "work session" for purposes of public meetings.

SB 1173 | 🕜



Product Defect Liability Exemption

Provides that certain entities providing a product as part of health care services are not a manufacturer, distributor, seller or lessor of the product for purposes of a product liability civil action if the entity was not involved in the design or manufacture of the prouct.

Effective date: September 26, 2025

Public Health

SB 702 | 🗷



Flavored Tobacco Products

Prohibits the distribution or sale of flavored tobacco products at all locations other than at stores as established by the Oregon Liquor and Cannabis Commission (OLCC). Bans the free distribution of any tobacco products (i.e., promotional giveaways, free samples), requires all tobacco product sales to occur at licensed retailers, and allows local governments to impose stricter regulations than state law.

HB 2528 | 💌



Nicotine and Tobacco Products Regulation

Adds nicotine derived from any sources to the definitions of inhalant delivery system and tobacco products. Repeals the criminal prohibition of sales to those under 21 and replaces it with a civil prohibition enforced by the Oregon Health Authority (OHA). Prohibits the distribution, offering, or providing, without compensation, of inhalant delivery systems or tobacco products. Allows OHA to adopt rules for the regulation of tobacco and inhalant delivery system sales. Requires any sale of cigarettes, inhalant delivery systems, or smokeless tobacco products to have occurred at licensed premises.

HB 2741 | 🕜



Newborn Bloodspot Screening

Directs the Oregon Health Authority to maintain a state public health laboratory, administer a newborn bloodspot screening program and implement additional programs related to newborn bloodspot screening.

HB 2901 | 💌



Newborn Safe Haven

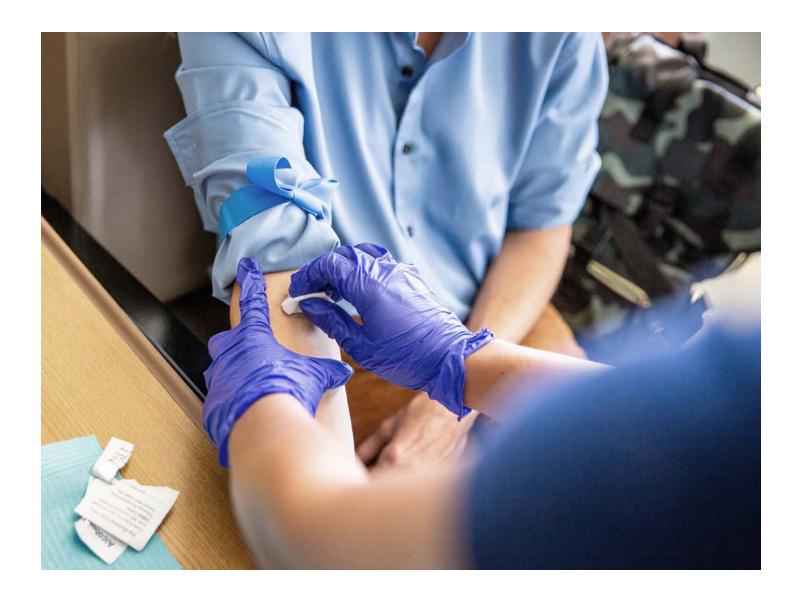
Modifies the newborn safe haven law to allow a parent to anonymously leave an infant in a newborn safety device.

HB 2942 | 🛛



HIV Treatment Reimbursements

Requires the Oregon Health Authority and coordinated care organizations to reimburse pharmacies and pharmacists in the same manner as other health care providers for certain services related to HIV treatment.



HB 2943 | 🗴



Directs the Oregon Health Authority to establish a voluntary pilot program where participating hospitals may screen an eligible individual for hepatitis C, HIV and syphilis when the eligible individual undergoes a blood test or analysis as part of medical care received within an emergency department.

HB 3094 | 🗴

Drug Treatment Services

Directs the Alcohol and Drug Policy Commission to provide grants and funding for drug treatment and other related services.

HB 3511 | 🛭

Betel Nuts

Directs the Oregon Health Authority to develop and implement a program to award grants to community-based organizations to conduct a public health campaign on the negative health effects of using betel nuts.

Research

HB 2705 | 🗴

Higher Education Patents

Requires the Higher Education Coordinating Commission, in coordination with public universities and community colleges, to conduct a study to determine the appropriate rate of return the State of Oregon should receive for each patent obtained as a result of public moneys provided to a public university or community college.

HB 3978 | 💌



ONPRC Closure

Prohibits a research facility from using public funds to directly fund medically unnecessary laboratory research on dogs or cats that is classified under certain pain and distress categories. Requires the creation of a task force to close the Oregon National Primate Research Center. OHSU worked closely with AFSCME throughout the session to educate legislators and stop efforts to close down the ONPRC.

SB 181 | 🛭



Dog and Cat Research

Prohibits a research facility from using public funds to directly fund medically unnecessary laboratory research on dogs or cats that is classified under certain pain and distress categories.



