Report on the 2019 Oregon Legislative Session
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Oregon nurses achieved a variety of important victories during Oregon’s 2019 Regular Legislative Session. Together we worked to protect and expand access to health care for some of our state’s most vulnerable patients, we saw key advanced practice nursing priorities signed into law and we achieved numerous successes working in coalition with partners on broader issues ranging from expanded worker protections to public health.

Following the 2018 November election, legislators from the Democratic Party made up super majorities in each chamber of the state legislature, holding 38 of the 60 seats in the House, and 18 of the 30 seats in the Senate. Legislative leadership, as well as a wide array of organizations and issue advocates, held high aspirations for what the 2019 session could accomplish.

Throughout the session, ONA nurses and government relations staff worked hard to help promote and defend strong nursing practice standards and protect affordable access to health care for Oregonians. The legislature was able to come to agreement early in session on a bipartisan plan to maintain coverage for 350,000 Oregonians on the Oregon Health Plan (OHP). ONA joined a wide range of health care and patient advocacy stakeholder organizations to advocate for the passage of this vital continued funding, which will now be sustained over the next six years. Moreover, the legislature passed “The Student Success Act”, a landmark additional $2 billion biennial investment allocated for our state’s K-12 school system to help support improved student outcomes and school resources and programs that more adequately aid learning.

Additionally, the legislature took a significant step forward in helping to strengthen hospital workplace violence prevention and employee protections, enacted robust anti-workplace harassment policies and made significant proactive investments to support the foundational health and stability of communities throughout our state. Notably, this included implementing a second phase of state funding to support the modernization of Oregon’s public health systems, approving an increase in the statewide tobacco tax to aid in deterring youth access and enable critical revenue for health care programs as well as passing what is now the strongest paid family and medical leave law in the nation.

Oregon also garnered national attention this session when eleven Senators engaged in protest by leaving the state in both May and June, resulting in the State Senate not holding the required voting quorum to take any action on remaining legislation. Although ONA members have different backgrounds, opinions and political views, we are united by the core principles of protecting patients and promoting the best nursing practice in our state. A key challenge associated with this action was that it put many key health care policy priorities in jeopardy: critical funding for the Oregon Health Plan and public health, passing a robust Paid Family and Medical Leave program, and expanding worker protections both for nurses and many of the patients we serve.

Despite some noted policy initiatives ultimately falling just short due to this action and other related decisions, this legislative session ultimately did prove to be highly successful, particularly considering that hundreds of bills were able to be finally voted on in the last two days of session.

In terms of member engagement and direct activism, 2019 was another outstanding legislative session, wherein ONA members were consistently visible at the State Capitol building and instrumental in moving key policy priorities forward.
Nearly 250 members were registered for ONA’s 2019 Nurse Lobby Day and, despite significantly inclement winter weather and numerous road and school closures statewide, 131 nurses braved the snow to meet with more than 70 legislative offices and helped advocate for top priority nursing and broader health care issues as part of ONA’s legislative agenda. On a day where much of the regular business of the Capitol was significantly slowed on account of the conditions, the strong turnout of members on Nurse Lobby Day conveyed a powerful early message to the legislature about the steadfast commitment that nurses have to the profession in advocating for critical issues impacting patient care.

However, ONA’s Nurse Lobby Day merely marked the beginning of members’ involvement at the State Capitol. Over the course of the six-month legislative session, ONA members testified in front of countless legislative committees, emailed and called their legislators and came to Salem to talk to legislators one-on-one. Nurses remained among the steadiest presences and were highly engaged on a broad range of crucial issues this session, evaluating and communicating positions through a prism of core nursing values, quality patient care outcomes and fair workplace standards.

Special thanks to ONA’s Cabinet on Health Policy (CHP) and Oregon Nurses Political Action Committee (ON-PAC) members. The ON-PAC Board worked tirelessly to engage with and help elect a pro-nurse majority to the Oregon State Legislature, while the CHP strived for many months to solicit input from membership, conduct strategic research, develop policy priorities and ultimately execute our 2019 legislative agenda. Before and throughout session, Cabinet and PAC board members worked diligently to guide ONA’s work in Salem and consider organizational responses to legislation that would impact Oregon nurses and patients.

In this report you can read more about how ONA’s top issue priorities fared. For more information about any of the issues or bills discussed in this report, please contact ONA’s Government Relations Department at (503) 293-0011.
During the 2019 session, ONA worked to pass several policies that improve nursing practice. ONA staff and members advocated in Salem to invest in programs like evidence-based strategies around workplace violence, to protect licensing standards and regulations for nurses, and to incentivize pursuing a career as a nursing instructor.

**Oregon Health Care Worker Protection Act: SB 823**

ONA’s priority bill to help more meaningfully address the increasing trend of workplace violence against health care workers received bipartisan support in the State Senate and a unanimous vote in the House of Representatives to become law after Governor Brown signed the legislation. The bill and vote outcomes were the result of many months of collaborative policy development amongst ONA members working in a variety of settings as well as a robust coalition of health care provider organizations that came together in support of the effort.

The bill makes four major improvements to state statute:

- **Increases Transparency:** It allows nurses and other health care workers to review health care facilities’ workplace violence incident required reports to more readily ensure that security issues can be addressed and prevention policies can be improved.
- **Strengthens Security Plans:** Implements timeline for every hospital in the state to conduct comprehensive review of their local violence prevention plans using recognized evidence-based standards. Also requires a report back to the legislature on key findings to further inform possible policy development that would aid in improved prevention standards.
- **Creates Team-Based Solutions:** Ensures nurses and other frontline workers who are most at risk for violent incidents are part of the safety teams which create and implement workplace violence prevention plans by implementing required regular collaborative review of facility violence prevention plans.
- **Protects Workers’ Right to Report:** Assures workers’ right to make good faith reports of violent incidents without fear of employment-related retaliation.

[Senate Bill 823](https://www.oregonlegislature.gov/billsresolutions/2019/bills/sb823/) is a common-sense step aimed at uplifting both an improved culture of safety and transparency of incident reporting in health care facilities to better protect both nurses and the patients they serve. We look forward to monitoring the impact of this legislation as well as evaluating the resulting data trends going forward, as our ongoing efforts to mitigate all violence in care settings will continue to progress into the future.
Nurse Practitioner Fluoroscopy Practice: SB 128

*Senate Bill 128* corrects a long-standing barrier to the performance of some procedures requiring fluoroscopy, including for nurse practitioners in pain management and orthopedic practice. The bill authorizes nurse practitioners, subject to the rules of both the Board of Medical Imaging and the Oregon State Board of Nursing, to utilize the services and expertise of the medical imaging licensee in the performance of procedures within the scope of the NPs practice and license.

For many years, NPs using fluoroscopy had done so independently, so this bill would align current and safe practices with statute. Considerable discussion and attempts to resolve the issue in the interest of safety and efficacy has been ongoing during this time. The bill was approved by both the House and Senate and was signed into law by the governor.

Certified Nurse Midwife Protections: SB 127

*Senate Bill 127* changes "Nurse Midwife Nurse Practitioner" to "Nurse Practitioner specializing in nurse midwifery," enabling CNMs to legally practice under the more common designation and retain all scope and prescribing privileges enjoyed by other advanced nursing specialties. The Oregon State Board of Nursing, under its rule-making authority, is charged with updating the designation. On June 4, 2019, it was signed into law by the governor.

Historically, Oregon has led the nation in advancing thoughtful nursing policy that offers our nurse practitioners, some of the strongest practice and prescribing authority in the country. Under current statute, there are 12 distinct nurse practitioner subspecialties identified, which share common scope of practice privileges; Nurse Midwife Nurse Practitioner (NMNP) is listed among them. Here in Oregon, as is common all across the country, Nurse Practitioners who specialize in this practice area are also commonly known as Certified Nurse Midwives (CNM).

Rural Health Tax Credits: HB 2847

*House Bill 2847* provides income tax credits for rural health care providers, including nurse practitioners, certified registered nurse anesthetists, physicians, physician assistants, podiatrists, dentists and optometrists. The tax credit was expanded to include Sky Lakes Medical Center. On June 4, 2019, it was signed into law by the governor.

Current law affords a non-refundable tax credit of up to $5,000 against personal income taxes ($10,000 if both taxpayers on a joint return qualify). The amount of the credit is determined based on distance a provider's practice or hospital membership is from a major population center: $3,000 if 10-20 miles, $4,000 if 20-50 miles and $5,000 if 50 or more miles. Eligibility requirements include: a minimum 20-hour workweek, averaged over the month, in a qualifying rural area and serving a Medicare and medical assistance base equal to the service county’s population; up to 20 percent for Medicare and 15 percent for medical assistance patients.
Health Care Access

This session ONA helped to expand Oregon’s Provider Tax to maintain Medicaid funding and make health care more affordable for many Oregonians.

**Medicaid Health Care Funding: HB 2010**

The legislature was able to continue to adequately fund the Affordable Care Act’s expanded Medicaid population of 350,000 Oregonians who depend on the Oregon Health Plan to access care. House Bill [2010](#) renewed the provider assessments on hospitals and insurers to maintain funding for the Oregon Health Plan. This bill renews this program for the next 6 years, giving greater stability to Medicaid funding.

It is a continuation of a bill from the 2017 session and Measure 101 during the January 2018 election that required hospitals, insurers and managed care organizations to pay minimally more in order to leverage additional federal matching funds. The millions of dollars in funding ensures that the expanded Medicaid population will continue to be able to access the Oregon Health Plan and creates a reinsurance program to help vulnerable Oregonians lower their premium costs.

The bill had broad support from stakeholders including hospitals and insurers. This funding mechanism helps fill much of the Medicaid funding gap we face as the planned decline in Federal dollars for the Affordable Care Act continue, however, the policy does not on its own entirely allow the Oregon Health Plan to operate at current service level for the same population.

**Tobacco and E-cigarette Tax Increase: HB 2270**

House Bill [2270](#) increases tax on cigarettes by $2 a pack to bring Oregon on parity with Washington and California and creates a new 65% of wholesale tax on e-cigarettes, which are currently completely tax-free in Oregon. Projected revenue is dedicated 90% -- approximately $346 million a year -- to the funding gap in the Oregon Health Plan and 10% to local community-specific tobacco prevention and cessation programs.

In addition to the much-needed revenue for health coverage and local public health, this public health policy would also help limit access and addiction to tobacco and nicotine products. Tobacco is still the number one cause of preventative death in Oregon and research has shown that [raising the tax on tobacco and nicotine](#) products is the best way to keep youth from ever starting the deadly habit and encourages those already addicted to quit. This policy will also help drive down health care costs -- currently tobacco costs the state over $1 billion in health care expenses, lost productivity and premature death.

HB 2270 was approved by both the House and Senate with bipartisan support. Because the bill includes a clause to refer the policy to voters for approval, voters will vote on this policy in November of 2020.
Universal Voluntary Nurse Home Visiting: SB 526 & SB 5525

Two bills passed to establish a statewide, universally offered home visiting program for families with infants up to six months old starting in 2021. The program expands the Family Connects program so that families with new infants would be entitled to a home visit from a registered nurse, who could assist and consult with child welfare, maternal health, reducing family violence, and other essential services. Participation in the program would be optional and nurses would be able to connect new parents to additional resources, including faith-based organizations, non-profits, or government-run programs. This program provides a 2:1 return on investment in the first year, due in large part to savings from emergency room visits.

The funding mechanism for this proposal was encompassed in two bills: Senate Bill 526 for private insurance to reimburse the cost of the services and in Senate Bill 5525, the Oregon Health Authority budget bill, for Oregonians enrolled in the Oregon Health Plan. The Public Health Division will design the program consistent with the Family Connects home visiting model and implement it over a three-biennia period.

Eliot Homes: HB 5026

ONA represents state workers within the Stabilization and Crisis Unit program that provide a high-level of specialized care for medically fragile patients with intellectual and developmental disabilities in two Eliot medical group home facilities within the Department of Human Services (DHS). ONA worked hard to ensure that these facilities remained open, despite initial cuts proposed in preliminary agency budgets earlier in the session. Member-leaders partnered with AFSCME represented colleagues who also work at the Eliot Homes to hold meetings with key legislators involved in the Human Services budgeting process and expressed significant concerns related to quality of care, strong standards and the inherent lack of adequate alternative settings to transition medically fragile patients if the Eliot Homes were to be shuttered.

Continued funding for the Eliot Homes was preserved within DHS in the legislatively approved biennial budget in House Bill 5026, resulting from strong direct engagement from members advocating to maintain the program.

Universal Access to Health Care: SB 770

Senate Bill 770 to study and develop a plan for Health Care for All via a Task Force was ultimately passed in the final days of the legislative session. The bill also included a budget allocation for the Oregon Health Authority to study a potential Medicaid buy-in option to make coverage available to those with incomes exceeding 400% of the Federal Poverty Level, who still may often face challenges associated with affording private health insurance. The legislation includes a required report-back to the legislature to aid development of specific policy proposals to further expand affordable access to care in our state.
Workers’ Rights, Organized Labor and Economic Justice

In 2019, ONA continued our long-standing efforts to expand worker protections on the job, advance economic justice and promote policies that will help give more Oregonians a fair shot.

Universal Paid Family and Medical Leave: HB 2005

After decades of work, including detailed policy research and development, state agency engagement and stakeholder coalition building, Universal Paid Family and Medical Leave finally passed in Oregon, following an intense and prolonged effort to advance the legislation this session.

House Bill 2005 requires that for businesses with more than 25 employees, both employers and employees will pay into a shared state fund every month. For small employers, employees will pay in and employers will still have the option to contribute. The bill will operate like social security or unemployment insurance where an employee will file a claim with the agency when they have a qualifying medical event (i.e. child birth, adoption, illness of a loved one, or their own illness) and would be able to draw down from the fund, while their normal salary could be used by the employer to hire temporary help.

Critically, the program is also:

- Available to all Oregonians, regardless of their income or employer size
- Recognizes different family types
- Protects workers from discrimination and retaliation for using the program
- Includes progressive wage replacement based on the employee’s salary where the lowest wage workers will be able to collect their entire salary.
- Guarantees up to 12 weeks of paid time off including an additional 2 weeks for anything pregnancy-related. For employees covered by OFLA, they could take an additional 4 weeks of unpaid leave.

After garnering bipartisan support in both the House and Senate the bill was signed into law. Over the next several years the state will commence the administration of the program and in January 2022 employer and employee contributions will begin. By January 2023 or when the fund is fully solvent, employees will start to be able to file claims to receive the benefit.

This is a significant victory for workers and families across Oregon – including within the broader nursing workforce, which will now have guaranteed access to dedicated paid leave separate from sick
days or personal time off – and for patients who will realize improved health outcomes from being able to take the time to care for themselves or their loved ones.

**Oregon Public Worker Protection Act: HB 2016**

*House Bill 2016* is a proactive public sector labor protections bill that was signed into law this session. A priority for ONA and a variety of our public sector labor union partner organizations, the legislation clarifies the Public Employee Collective Bargaining statute to ensure that the exclusive representative union in public employment settings can continue to communicate with workers, engage in important workplace organizing activities, and maintain the ability to negotiate employee release-time agreements in order to conduct vital union duties that promote harmonious workplaces.

HB 2016 also makes it an unfair labor practice for an employer to encourage an employee to resign or deter membership in the exclusive representative labor organization within their workplace.

Despite recent high-profile national efforts intended to undermine the ability of public sector workers to effectively organize within their workplaces, HB 2016 will help to ensure the existence of continuing fair standards that protect concerted activity and streamline commonplace policies and effective practices into state statute that have long-existed in represented work settings. Numerous ONA members working in public sector care settings came to the Capitol to testify in committee as well as communicate with legislators directly in support of HB 2016, helping to assure it’s ultimate passage.

**Public Employee Retirement System: SB 1049**

With slim margins, the Oregon House and Senate passed key reforms to the Public Employee Retirement System (PERS) that will have an impact on the retirements of firefighters, teachers and many ONA nurses who work in the public sector. Notably, *Senate Bill 1049* asks current public employees to help pay off part of the state’s legacy costs debt from their own retirement accounts.

While we hope to stop SB 1049 from going into effect in July 2020, it is imperative that ONA’s public sector membership is equipped with the information they need to understand the impact SB 1049 would have upon implementation:

- Currently, public employees contribute 6% of their salary into their own personal Individual Account Program (IAP). This is like a saving account that grows over time with both your contributions and interest earnings.
- When this bill goes into effect, part of the 6% contribution will instead go to pay the state’s pension obligation. For Tier 1 and Tier 2 employees, 2.5% will go to pension debt payment and for OPSRP employees, 0.75% will go to pension debt payment.
- This change will only apply to people earning $2,500 a month or more.
- The bill caps the final average salary for calculating pension at $195,000 upon retirement
- This change does not affect the monthly pension benefit for any current retiree.
- This change will go into effect on July 1, 2020 and will remain in effect until, it is estimated, until 2035.

ONA’s lobby team, leaders, members and coalition partners did everything possible during the session to prevent this proposal from going forward and thanks to these efforts, the cuts comprised in SB 1049 are ultimately much less dramatic than earlier proposals. However, we are very disappointed in the many legislators who made the choice to not keep the previous promise the state made to workers who
have dedicated their lives to public service. In collaboration with public sector labor partners, we will continue to argue the constitutionality of this bill in court in effort to prevent these harmful benefit reductions from going into effect and hold law-makers accountable for their actions in cutting members’ retirements who have dedicated their careers to public service.

**Oregon Workplace Fairness Act: SB 726**

In bipartisan votes, the House of Representatives and State Senate passed Senate Bill 726 to help meaningfully address and better prevent incidences of workplace harassment. Led by the Oregon AFL-CIO Labor Federation and a coalition of unions and worker advocacy organizations, the Oregon Workplace Fairness Act changes our state’s laws to protect workers through the following methods:

- Extends the statute of limitations from one year to five years for workers who come forward to report incidents.
- Restricts the use of non-disclosure agreements and no re-hire provisions where discrimination or harassment occurs. Prohibits the application of non-disclosure agreements as a condition of employment at the time of employee hiring.
- Directs the Bureau of Labor and Industries to create model policy and procedures for employers regarding discrimination and harassment and to make that policy available to employees upon hire and when an act of discrimination is alleged.
- Ensures that when an employer has made a good faith determination that an executive has committed an act of discrimination, that any severance that was due to be awarded to the harasser may be rendered unenforceable.
ONA has a strong history of advocating for public health improvements. This session, we successfully passed a number of policies that have a tremendous impact on the overall health of patients and laid the groundwork for future conversations regarding effective communicable disease prevention standards, protecting the indoor clean air act and addressing Oregon’s housing crisis.

Public Health Modernization Funding: SB 5525

Although 95 percent of Oregonians now have health insurance, there are still tremendous gaps in health care across Oregon. ONA members see how public health programs like nurse visiting, disease control and prevention, and clean air and water translate into better health outcomes at the bedside.

The Oregon Health Authority budget bill, Senate Bill 5525 allocates $15 million to increase communicable disease prevention and response activities, support efforts to improve health equity, increase emergency response planning, and help develop community-specific public health programs and plans in Oregon’s federally recognized tribes. This is a critical investment in improving and expanding public health which will help ensure basic protections critical to the health of all people in Oregon and future generations.

Protecting Oregon’s Indoor Clean Air Act: HB 2233 & SB 639

ONA and other public health advocates helped defeat a number of significant Indoor Clean Air Act threats that were waged primarily by the recreational marijuana and e-cigarette industries.

House Bill 2233 and Senate Bill 639 would have changed this by allowing smoking in cannabis cafes and temporary marijuana festivals. ONA and a variety of advocacy partners made clear the public health ramifications of any smoke or vapor both for employees and the general public exposed to second-hand smoke inside or outside of these spaces.

ONA worked hard to educate legislators on why these bills harm public health and are in direct violation to the Indoor Clean Air Act, which guarantees indoor accommodations to be free from tobacco and nicotine smoke and vapor.

Stable Housing: SB 608

ONA continued its advocacy in partnership with the “Stable Homes for Oregon Families” coalition this session as part of an effort to advance renter protections and address Oregon’s housing crisis to help
better ensure more patients are able to have their most basic needs met. Senate Bill 608 expands protections for Oregon renters by prohibiting the practice of no-cause evictions (except under certain circumstances) after 12 months of occupancy and limits rent increases to 7 percent each year, in addition to inflation. Many areas of Oregon, including growing metro areas like Portland, Eugene and Salem have experienced steadily-rising rent and housing prices, in addition to an expanding cost of living.

Access to affordable housing is widely recognized as a foundational social determinant of health. When community members have stable and safe housing, they are better able to address their most basic needs, leading to improved health outcomes. Evictions and economic displacement impact our entire system by placing an immense burden on our communities through increased demands on social services, shelters and hospitals by families who become displaced and under-resourced. SB 608 will help to ensure that more families can stay in their homes and stabilize rents so that occupants can appropriately prepare for fair rent increases.

Ensuring Patient Safety through Immunizations: HB 3063

House Bill 3063, which would have removed the non-medical exemption for vaccinating children before entering public school did not move forward this session. Although the House of Representatives approved the bill, it was traded for the Senate Republicans to return to work when they walked out in May. Going forward, ONA will continue to engage in stakeholder efforts and conversations regarding how best to ensure that all children who are able can get vaccinated, helping eliminate the spread of preventable diseases to children who cannot otherwise receive immunizations for medical reasons.

Driver’s Licenses for All: HB 2015

Allowing all Oregonians the opportunity to take a driving test and apply for a license makes our roads and communities safer. House Bill 2015 ultimately allows all Oregonians to drive more safely to work, school, to obtain household necessities and to attend medical provider appointments, which is why we were proud to support House Bill 2015. The bill will also strengthen public safety through ensuring that everyone driving on our state’s roads have passed the necessary Department of Motor Vehicle requirements for obtaining a driver’s license and thereby help improve motorist cooperation with law enforcement throughout our communities.

The bill received bipartisan support in the House of Representatives and was subsequently passed with strong majority support in the Senate during the final weekend of the session prior to adjournment.

Commonsense Gun Control Legislation: HB 2013

House Bill 2013 helps protect survivors of domestic violence by requiring the relinquishment of firearms from prohibited abusers and stalkers who have been subject to certain court protective orders. Domestic violence and firearms remain a dangerous combination. Access to a gun increases the likelihood that a victim of domestic violence will be severely injured or killed. HB 2013 is a commonsense policy that will help better protect families in Oregon by requiring abusers and stalkers to turn in their guns quickly to law enforcement, a federally licensed firearm dealer or a sworn third party. After strong engagement this session from a broad array of stakeholders and receiving bipartisan support, the bill was ultimately approved by both chambers and has now been signed into law by the governor.
Student Success Act: HB 3427

House Bill 3427, which will raise and invest new dedicated funds for public school, was approved by both chambers and was signed into law. With this new $2 billion investment per biennium, our state can reduce class sizes, expand access to vital early childhood education, ensure every student has access to a mental health counselor, and restore important programs such as art, music, physical education and vocational prep.

As nurses, we know a quality education is foundational to successful health outcomes, which is why making this investment is critical for our students and the health of our communities. However, ONA is disappointed that a deal was reached for this funding package to continue to move forward, resulting in bills seeking to strengthen immunization standards and a package of gun protection reforms being eliminated and prohibited from advancing further.

A notion that legislators must choose between investing in children’s schools and protecting them from violence and communicable diseases is misleading and creates a challenging pretense wherein issues can be readily pitted against one another in the legislative process. This is why—while we celebrate the passage of the Student Success Act—there is continuing commitment to working with and encouraging legislative leaders who will not rationalize sacrificing important, well-supported public policy simply as a means for other important legislative issues to move forward at a given moment in time.

Due to Oregon’s initiative and referendum system, a referendum has now been filed by opponents of the funding package to refer the Student Success Act to the ballot. 75,000 valid signatures must be gathered by approximately October 1, 2019 to qualify this policy as a referendum for voters to consider upholding or to overturn in statute.
As the largest segment of Oregon’s health care workforce, nurses are committed to requiring insurers, providers, hospitals and drug manufacturers be held accountable to the patients in Oregon. ONA engaged in a number of efforts this session to improve transparency and accountability for the major players in the health care delivery system and put patients and community health before profits.

60-day notice of Prescription Price Increases: HB 2658

Although the federal government has control over the vast majority of prescription drug cost regulations, the Oregon legislature has approved a number of bills to try to help control costs for patients in Oregon. Both chambers passed House Bill 2658, which would require pharmaceutical companies to give 60-day notice before increasing the price of a prescription drug. This will help both patients and providers plan for price increases and put pressure on drug companies to explain the change. The bill was signed into law.

Prescription Drug Translations: SB 698

Senate Bill 698 requires pharmacists to label prescription drugs in languages other than English so all patients can effectively take and administer medication for themselves and their loved ones. Both the House and Senate approved this bill and it was signed by the governor.

Importation from Canada: HB 2689

House Bill 2689 would have allowed Oregon to import prescription drugs from Canada, where the exact same drug often costs pennies to the dollar in comparison to what Americans pay. Several other states have adopted and implemented this model to help keep costs lower for patients. Upon adjournment, this bill remained in the Ways and Means and did not advance.

Drug Take Back Program: HB 3273

In the United States, drug overdose is the leading cause of accidental death, with 20,101 overdose deaths caused by prescription pain relievers alone. Prescription drugs are simply too often a gateway for other opioid drugs; four in five new heroin users started out misusing prescription painkillers.

Given this overwhelming problem, longtime ONA member and nurse advocate Representative Sheri Schouten proposed House Bill 3273 to set up a drug
take back program to help Oregonians safely dispose of drugs. The bill requires drug manufacturers in Oregon to fund drug take-back kiosks in pharmacies for every population center (city or town, and the 10-mile radius around it) as well as an additional kiosk for every 50,000 residents in a population center, pre-paid mail back envelopes at request, and an education program to inform consumers of the danger of keeping unused medications in the home. The bill was approved by both the House of Representatives and the Senate each in a strong bipartisan vote and is expected to be signed into law by the governor soon.

**Hospital Charity Care and Community Benefit Standards: HB 3076**

Currently, hospitals in Oregon are required to contribute to the overall health of their communities to maintain their tax-exempt, non-profit status. In years past, this community benefit has largely been spent covering the medical costs of uninsured patients. However, with the advent of the Affordable Care Act, more Oregonians are now insured, meaning many services that were once considered hospital charity care are now reimbursable, resulting in record hospital profits across the state.

*House Bill 3076* implements minimum thresholds for community benefit spending. Each of our state’s nonprofit hospitals will now be required to meet specific spending floors, as set out by the Oregon Health Authority, to provide a certain level of covered or discounted care for patients whose incomes are within federal poverty level thresholds. The health agency will implement spending floors for each hospital every two years, to be developed using a range of criteria that will include annual profits and as well as overall assessed local community needs. The bill earned bipartisan support in both chambers, has been signed by the governor and will go into effect January 1, 2020.
The 2019 session was a remarkable one for ONA, both with regard to member leadership and engagement as well as in our efforts to meaningfully improve and continue to uplift quality nursing practice standards, improve patient care outcomes and strengthen economic justice and workplace fairness throughout Oregon.

In the coming months and years ahead, ONA will be deeply committed to critical legislative initiatives focused on improving hospital nurse staffing standards and patient safety, eliminating further statutory barriers that inhibit advanced practice nursing care, supporting expanded access to affordable health care, reinforcing strategic investments in public health programs and improving labor standards as well as vital worker protections. Additionally, ONA’s member leaders and staff will remain vigilant in both monitoring and preparing to take action in response to potential policy initiatives, both at the ballot and in future legislative sessions, that would seek to undermine worker’s rights, public health or health care standards in our state.

As we prepare for these new challenges and opportunities, the ONA government relations team would like to extend our sincere gratitude to the membership for your incredible leadership, bold advocacy and unwavering support during the 2019 legislative session. We look forward to continued progress and meaningful future outcomes as we advocate for Oregon’s nurses and patients throughout the 2020 short legislative session and the 2020 elections.

Thank you!