1. Establishes the Universal Health Care Commission
   • **13 Voting Seats**
     o Governor-appointed, Senate-confirmed appointments that must:
       ➢ Be as socially diverse as possible (race, ethnicity, gender, gender non-conformance, sexual orientation, economic status, disability or health status).
       ➢ Represent, at minimum, a collective knowledge of rural health, quality assurance and health accountability, fiscal and change management, social services, public health services, medical and surgical services, alternative therapy services, services for those with disabilities, and nursing services.
       ➢ Explicitly include:
         • 1 actively-licensed health care provider.
         • 1 actively-licensed mental health care provider.
         • 1 advocate for equity in health care.
         • 1 person with experience in receiving care for complex or multiple chronic diseases.
   • **7 Non-Voting Seats**
     o 4 Legislators (Bicameral, bipartisan representation and appointed by the President of the Senate or the Speaker of the House).
     o 1 seat to represent the Oregon Health Authority
     o 1 seat to represent the Association of Oregon Counties
     o 1 seat to represent the Oregon Department of Consumer and Business Services

2. Tasks of the Commission
   • Assess the costs of the Health Care for All Oregon Plan:
     o **Eligibility:** All residents of Oregon, all non-residents of Oregon who work full-time in Oregon, and all dependents of either of the former groups listed are eligible for the Plan.
Scope of Coverage: The Plan must cover a comprehensive array of physical, mental, dental, and long-term health services and treatments.

Choice of Provider: Participants in the Plan may choose any health care provider or prepaid group practices with salaried members who are licensed, certified, or registered in Oregon.


Federal Waivers: The Plan will equitably and seamlessly include all residents by obtaining federal waivers as necessary, or the commission will make recommendations regarding other approaches to do so.

Cost-Containment Features: The commission will explore the design of pre-approval and pre-authorization policies under the Plan.

- Attend to concerns of prior studies and design logistics:
  - Respond to concerns raised in the RAND (2017) study.
  - Consider how the Plan will affect existing federal, state, county, and local governing structures and entities.
  - Address the need for regional and community-based system integration.

- Design revenue streams to finance the plan:
  - May include, but not limited to, a redirection of current agency expenditures, employer payroll taxes, and progressive income taxes.

- Educate and solicit input from the public on the above items to inform the design of the Plan.

3. Findings Reported to the Legislature

- The Commission will convene no later than November 1, 2019.
- The Commission will provide an interim progress report to the Legislative Assembly by March 15th, 2020.
- The Commission will provide a comprehensive report on its plan recommendations to the Legislative Assembly by February 1st, 2021.

4. Anticipated Fiscal Impact of SB 770-A4

- Approximately $800K-$900K to pay typical committee fees and to allow the Legislative Policy and Research Office to hire additional support staff to conduct the research and analysis necessary for the Commission’s report.

5. Emergency Clause:

- To allow for the approval of Commission appointments and the hiring of support staff by the November 1, 2019 deadline for the Commission to convene, this bill has an emergency clause.