

House Bill 2989

Sponsored by Representative KOTEK

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Allows Department of Human Services to contract directly with providers to provide mental health and developmental disabilities programs if department finds that program offered by county is not satisfactory.

A BILL FOR AN ACT

1
2 Relating to the Department of Human Services; amending ORS 430.640.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1.** ORS 430.640 is amended to read:

5 430.640. (1) The Department of Human Services, in carrying out the legislative policy declared
6 in ORS 430.610, subject to the availability of funds shall:

7 (a) Assist Oregon counties and groups of Oregon counties in the establishment and financing
8 of community mental health and developmental disabilities programs operated or contracted for by
9 one or more counties.

10 (b) If a county declines to operate or contract for a community mental health and developmental
11 disabilities program **or if the department determines that the program operated or contracted**
12 **for by the county is not satisfactory**, contract with another public agency or private corporation
13 to provide the program. The county must be provided with an opportunity to review and comment.

14 (c) In an emergency situation when no community mental health and developmental disabilities
15 program is operating within a county or when a county is unable to provide a service essential to
16 public health and safety, operate the program or service on a temporary basis.

17 (d) At the request of the tribal council of a federally recognized tribe of Native Americans,
18 contract with the tribal council for the establishment and operation of a community mental health
19 and developmental disabilities program in the same manner that the department contracts with a
20 county court or board of county commissioners.

21 (e) If a county agrees, contract with a public agency or private corporation for all services
22 within one or more of the following program areas: Mental or emotional disturbances, drug abuse,
23 mental retardation or other developmental disabilities and alcohol abuse and alcoholism.

24 (f) Approve or disapprove the biennial plan and budget information for the establishment and
25 operation of each community mental health and developmental disabilities program. Subsequent
26 amendments to or modifications of an approved plan or budget information involving more than 10
27 percent of the state funds provided for services under ORS 430.630 may not be placed in effect
28 without prior approval of the department. However, an amendment or modification affecting 10
29 percent or less of state funds for services under ORS 430.630 within the portion of the program for
30 persons with mental or emotional disturbances, or within the portion for persons with mental re-
31 tardation or developmental disabilities or within the portion for persons with alcohol or drug de-

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1 pendency may be made without department approval.

2 (g) Make all necessary and proper rules to govern the establishment and operation of community
 3 mental health and developmental disabilities programs, including adopting rules defining the range
 4 and nature of the services which shall or may be provided under ORS 430.630.

5 (h) Collect data and evaluate services in the state hospitals in accordance with the same meth-
 6 ods prescribed for community mental health and developmental disabilities programs under ORS
 7 430.665.

8 (i) Develop guidelines that include, for the development of comprehensive local plans in consul-
 9 tation with local mental health authorities:

10 (A) The use of integrated services;

11 (B) The outcomes expected from services and programs provided;

12 (C) Incentives to reduce the use of state hospitals;

13 (D) Mechanisms for local sharing of risk for state hospitalization;

14 (E) The provision of clinically appropriate levels of care based on an assessment of the mental
 15 health needs of consumers;

16 (F) The transition of consumers between levels of care; and

17 (G) The development, maintenance and continuation of older adult mental health programs with
 18 mental health professionals trained in geriatrics.

19 (j) Work with local mental health authorities to provide incentives for community-based care
 20 whenever appropriate while simultaneously ensuring adequate statewide capacity.

21 (k) Provide technical assistance and information regarding state and federal requirements to
 22 local mental health authorities throughout the local planning process required under ORS 430.630
 23 (10).

24 (L) Provide incentives for local mental health authorities to enhance or increase vocational
 25 placements for adults with mental health needs.

26 (m) Develop or adopt nationally recognized system-level performance measures, linked to the
 27 Oregon Benchmarks, for state-level monitoring and reporting of mental health services for children,
 28 adults and older adults, including but not limited to quality and appropriateness of services, out-
 29 comes from services, structure and management of local plans, prevention of mental health disorders
 30 and integration of mental health services with other needed supports.

31 (n) Develop standardized criteria for each level of care described in ORS 430.630 (10), including
 32 protocols for implementation of local plans, strength-based mental health assessment and case plan-
 33 ning.

34 (o) Develop a comprehensive long-term plan for providing appropriate and adequate mental
 35 health treatment and services to children, adults and older adults that is derived from the needs
 36 identified in local plans, is consistent with the vision, values and guiding principles in the Report
 37 to the Governor from the Mental Health Alignment Workgroup, January 2001, and addresses the
 38 need for and the role of state hospitals.

39 (p) Report biennially to the Governor and the Legislative Assembly on the progress of the local
 40 planning process and the implementation of the local plans adopted under ORS 430.630 (10)(b) and
 41 the state planning process described in paragraph (o) of this subsection, and on the performance
 42 measures and performance data available under paragraph (m) of this subsection.

43 (q) On a periodic basis, not to exceed 10 years, reevaluate the methodology used to estimate
 44 prevalence and demand for mental health services using the most current nationally recognized
 45 models and data.

1 (r) Encourage the development of regional local mental health authorities comprised of two or
2 more boards of county commissioners that establish or operate a community mental health and de-
3 velopmental disabilities program.

4 (2) The department may provide technical assistance and other incentives to assist in the plan-
5 ning, development and implementation of regional local mental health authorities whenever the de-
6 partment determines that a regional approach will optimize the comprehensive local plan described
7 under ORS 430.630 (10).

8 (3) The enumeration of duties and functions in subsection (1) of this section shall not be deemed
9 exclusive nor construed as a limitation on the powers and authority vested in the department by
10 other provisions of law.

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