

REVENUE: No revenue impact

FISCAL: Fiscal statement issued

Action:	Without Recommendation as to Passage but with Amendments, Be Printed Engrossed and Be Referred to the Committee on Ways and Means by Prior Reference
Vote:	4 - 0 - 1
Yeas:	Bates, Kruse, Morse, Monnes Anderson
Nays:	0
Exc.:	Shields
Prepared By:	Brian Nieuburt, Administrator
Meeting Dates:	2/28, 3/2

WHAT THE MEASURE DOES: Authorizes the Oregon Health Authority (OHA) to establish and maintain a children’s psychiatric access telephone hotline. Requires that the hotline: (a) provide assistance to primary care practitioners treating children from birth to 18 years of age; (b) be accessible Monday through Friday, between 9 a.m. and 5 p.m.; (c) be accessible throughout the state; (d) provide face-to-face consultation for patients who have a high level of need; and (e) provide face-to-face consultation by electronic means for patients in rural settings. Allows OHA to accept gifts, grants or contributions from public and private sources.

ISSUES DISCUSSED:

- Origin, mechanics and availability of hotline
- Mental health needs of children
- Experience of similar hotlines
- Cost of hotline, resource development plans and current investments
- Potential long-term benefits of hotline and early mental health interventions
- Two-year demonstration plans
- Barriers to mental health services
- Potential return on investment

EFFECT OF COMMITTEE AMENDMENT: Makes hotline discretionary. Clarifies that access line should provide assistance to practitioners not just physicians.

BACKGROUND: OHA was created by the legislature in 2009. By July 2011, most health-related programs in the state will be joined together under the oversight of OHA.

SB 631-A would authorize OHA to establish a children’s psychiatric access telephone line that would link primary care practitioners to mental health consultants. The bill would facilitate and support the development of the Oregon Psychiatric Access Line for Kids (OPAL-K). OPAL-K is a partnership of the Oregon Pediatric Society, the Oregon Council of Adolescent and Child Psychiatry, Oregon Health and Science University, and the Oregon Family Support Network. The hotline operated by OPAL-K would be a mental health resource for primary care practitioners of children under the age of 18. OPAL-K would also provide face-to-face follow-up and a database that would track utilization, demographics and outcomes. Similar hotlines have been established in Massachusetts (Massachusetts Child Psychiatry Access Project) and Washington (Partnership Access Line).

A 1999 report by the United States Surgeon general indicated that approximately one in five children and adolescents experience the signs and symptoms of a mental health disorder during the course of a year, but 75-80% do not receive any mental health services.

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This summary has not been adopted or officially endorsed by action of the committee.