

Enrolled
House Bill 3110

Sponsored by Representative TOMEI, Senator MONNES ANDERSON; Representative CLEM (at the request of the Alcohol and Drug Policy Commission)

CHAPTER

AN ACT

Relating to substance abuse programs; creating new provisions; amending ORS 3.450, 135.980, 137.229, 336.222, 336.235, 351.105, 352.008, 353.120, 409.410, 410.720, 417.775, 423.150, 430.010, 430.240, 430.270, 430.306, 430.335, 430.338, 430.342, 430.345, 430.357, 430.359, 430.364, 430.366, 430.368, 430.380, 430.395, 430.399, 430.420, 430.424, 430.450, 430.540, 430.560, 430.850, 430.860, 430.920, 471.432, 657.665, 660.333, 675.523 and 813.260 and sections 1 and 27, chapter 856, Oregon Laws 2009; repealing ORS 409.420 and 430.290 and sections 15, 28 and 34, chapter 856, Oregon Laws 2009; and appropriating money.

Whereas almost 70 percent of inmates in Oregon prisons need treatment for drug and alcohol problems; and

Whereas the number of Oregon eighth graders who have had an alcoholic drink in the past 30 days is nearly twice the national average; and

Whereas health care expenditures in Oregon associated with alcohol and drug abuse were \$813 million in 2006; and

Whereas there were 229 overdose deaths in Oregon in 2008; and

Whereas 56 percent of Oregon parents whose children are abused and neglected have issues with drug and alcohol addiction; and

Whereas in 2008, 33 percent of Oregon traffic fatalities involved alcohol-impaired drivers; and

Whereas alcohol abuse costs Oregon's economy \$3.2 billion per year, more than eight times the amount of tax revenue from alcohol sales; and

Whereas although prevention and recovery are very cost-effective, Oregon's programs have been consistently underfunded, leaving tens of thousands of Oregonians without assistance; and

Whereas Oregon does not have a consistent, rational data collection and accountability system to track funding and ensure that funds are invested wisely; and

Whereas Oregon has an opportunity to dramatically improve the well-being of its entire population through effective, comprehensive evidence-based alcohol and drug abuse prevention programs; and

Whereas many prevention programs in the state do not follow best practices established through scientifically sound randomized testing; and

Whereas the state lacks a clear long-term strategy for prevention and treatment backed by a coordinated budgeting process; and

Whereas addiction is a chronic disease and must be treated with a continuum of care; and

Whereas alcohol and drug recovery services should be founded on evidence-based and tribal-based practices that are administered with fidelity and also take into consideration the needs of disparate populations; and

Whereas a recovery-oriented system of care must include physical and mental health as well as addictions; and

Whereas policies must encourage collaboration across systems of care so that individuals and their families receive services that are necessary to recovery; now, therefore,

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

SECTION 1. Section 1, chapter 856, Oregon Laws 2009, as amended by section 31, chapter 856, Oregon Laws 2009, is amended to read:

Sec. 1. (1) As used in this section and section 2 of this 2011 Act:

(a) **“Local government” means a local government as defined in ORS 174.116 that receives state or federal funding for programs that provide alcohol or drug prevention or treatment services.**

(b) **“Participating state agency” means the State Commission on Children and Families, the Department of Corrections, the Department of Human Services, the Oregon Health Authority, the Department of Education, the Oregon Criminal Justice Commission, the Oregon State Police, the Oregon Youth Authority or any other state agency that is approved by the Alcohol and Drug Policy Commission to license, contract for, provide or coordinate alcohol or drug prevention or treatment services.**

(c) **“Provider” means any person that is licensed by the Oregon Health Authority to provide alcohol or drug prevention or treatment services.**

[(1)] (2) There is created the Alcohol and Drug Policy Commission, which is charged with [producing a plan for] **planning, evaluating and coordinating policies** for the funding and effective delivery of alcohol and drug [treatment and] prevention **and treatment** services. [The commission shall recommend:]

[(a) A strategy for delivering state-funded treatment and prevention services;]

[(b) The priority of funding for treatment and prevention services;]

[(c) Strategies to maximize accountability for performance of treatment and prevention services;]

[(d) Methods to standardize data collection and reporting; and]

[(e) A strategy to consolidate treatment and prevention services and reduce the fragmentation in the delivery of services.]

[(2)] (3) The membership of the commission consists of:

(a) Sixteen members appointed by the Governor, subject to confirmation by the Senate in the manner prescribed in ORS 171.562 and 171.565, including:

(A) An elected district attorney;

(B) An elected county sheriff;

(C) A county commissioner;

(D) A representative of an Indian tribe;

(E) [An alcohol or drug treatment] **A** provider;

(F) A chief of police;

(G) An alcohol or drug treatment researcher or epidemiologist;

(H) A criminal defense attorney;

[(I) A judge of a circuit court, who shall be a nonvoting member;]

[(J)] (I) A representative of the health insurance industry;

[(K)] (J) A representative of hospitals;

[(L)] (K) An alcohol or treatment professional who is highly experienced in the treatment of persons with a dual diagnosis of mental illness and substance abuse;

[(M)] (L) An alcohol or drug abuse prevention representative;

[(N)] (M) A consumer of alcohol or drug treatment who is in recovery;

[(O)] (N) A representative of the business community;

[(P)] (O) An alcohol or drug prevention representative who specializes in youth; **and**

(P) A person with expertise in and experience working with information technology systems used in complex intergovernmental or corporate settings.

(b) Two members of the Legislative Assembly appointed to the commission as nonvoting members of the commission, acting in an advisory capacity only and including:

(A) One member from among members of the Senate appointed by the President of the Senate; and

(B) One member from among members of the House of Representatives appointed by the Speaker of the House of Representatives.

(c) The following voting ex officio members:

(A) The Governor or the Governor's designee;

(B) The Attorney General;

(C) The Director of the Oregon Health Authority;

(D) The Director of the Department of Corrections; *[and]*

(E) The Superintendent of Public Instruction;

(F) The Director of Human Services;

(G) The Director of the Oregon Youth Authority;

(H) The chairperson of the State Commission on Children and Families; and

(I) The administrator of the Oregon Liquor Control Commission.

(d) A judge of a circuit court appointed to the commission as a nonvoting member by the Chief Justice of the Supreme Court.

[3] (4) The Alcohol and Drug Policy Commission shall select one of its members as chairperson and another as vice chairperson, for such terms and with duties and powers necessary for the performance of the functions of such offices as the commission determines.

[4] (5) A majority of the voting members of the commission constitutes a quorum for the transaction of business.

[5] (6) Official action of the commission requires the approval of a majority of *[the voting members on the commission]* **a quorum.**

[6] (7) The commission may establish a steering committee and subcommittees. These committees may be continuing or temporary.

[7] (8) **The term of office of** each commission member appointed by the Governor **is four years, but a member** serves at the pleasure of the Governor. If there is a vacancy for any cause, the Governor shall make an appointment to become immediately effective.

[8] (9) The Oregon Health Authority shall provide staff support to the commission. Subject to available funding, the commission may contract with a public or private entity to provide staff support.

[9] (10) Members of the commission who are not members of the Legislative Assembly are entitled to compensation and expenses incurred by them in the performance of their official duties in the manner and amounts provided for in ORS 292.495. Claims for compensation and expenses shall be paid out of funds appropriated to the Oregon Health Authority or funds appropriated to the commission for purposes of the commission.

(11) The commission shall establish a budget advisory committee composed of the individuals listed in subsection (3)(a)(C), (c)(B) to (I) and (d) of this section. The individual described in subsection (3)(d) of this section is a nonvoting member of the committee. The committee shall recommend budget policy priorities to the commission:

(a) Regarding the allocation of funding for alcohol and drug prevention and treatment services across state agencies and throughout this state;

(b) That identify additional funding from federal and private sources for alcohol and drug prevention and treatment services; and

(c) For authorizing a suspension of the payment of state funds, or funds administered by this state, to programs that do not comply with the commission's rules or the budget priority policy or that do not provide effective prevention or treatment services.

(12)(a) The Governor shall appoint a Director of the Alcohol and Drug Policy Commission who shall serve at the pleasure of the Governor and be responsible for the dissemination and implementation of the commission's policies and the performance of the duties, functions and powers of the commission that are delegated to the director by the commission.

(b) The director shall be paid a salary as provided by law or, if not so provided, as prescribed by the Governor.

SECTION 2. (1) The Alcohol and Drug Policy Commission established under section 1, chapter 856, Oregon Laws 2009, shall:

(a) Establish priorities and policies for alcohol and drug prevention and treatment services as part of a long-term strategic prevention and treatment plan for this state.

(b) In consultation with the budget advisory committee described in section 1, chapter 856, Oregon Laws 2009, adopt budget policy priorities including recommendations for state agency budget allocations, in the Governor's proposed budget, for alcohol and drug prevention and treatment services.

(c) For alcohol and drug prevention and treatment services that use state funds or that use private or federal funds administered by this state, establish, as the commission deems appropriate, minimum standards for licensing, contracting for, providing and coordinating the services.

(2) To promote the effective and efficient use of resources and to reduce unnecessary administrative requirements, the commission, in consultation with participating state agencies, the Judicial Department, local governments, providers and the Oregon Department of Administrative Services, shall develop and implement a plan for structuring Oregon's data collection and reporting systems for alcohol and drug prevention and treatment programs to enable participating state agencies, the Judicial Department, local governments and providers to share data to:

(a) Improve client care;

(b) Improve and ensure the fidelity of evidence-based treatment practices;

(c) Improve alcohol and drug prevention and treatment programs;

(d) Ensure the accountability of publicly funded programs;

(e) Establish high-level, statewide performance measures for Oregon's alcohol and drug prevention and treatment programs; and

(f) Advance the science of alcohol and drug prevention and treatment.

(3) The plan established under subsection (2) of this section must:

(a) Include protocols and procedures to improve data collection, sharing and analysis and the interoperability of data and information systems;

(b) Include safeguards for protecting the confidentiality of information consistent with state and federal privacy and security requirements;

(c) Include safeguards for protecting trade secret information of providers;

(d) Include a review of the data collection, sharing and analysis functions of participating state agencies with respect to alcohol and drug prevention and treatment programs to identify duplicative, inefficient, wasteful or unnecessary functions and include recommendations for improvements to the functions described in this paragraph; and

(e) Be published no later than six months after the appointment, under section 1, chapter 856, Oregon Laws 2009, of the first Director of the Alcohol and Drug Policy Commission and shall be revised as frequently as the commission determines is appropriate.

(4) Consistent with the plan established under subsection (2) of this section, the commission may:

(a) Designate a statewide data repository for data related to alcohol and drug prevention and treatment services and require participating state agencies, local governments and providers to furnish data to the designated statewide data repository in the form and manner prescribed by the commission.

(b) Direct participating state agencies, local governments and providers to furnish other data, information and reports that the commission considers necessary to perform its duties.

(c) Furnish data to participating state agencies, local governments, providers and the Judicial Department.

(d) Direct the unit within the Oregon Health Authority that conducts analyses and evaluations of alcohol and drug prevention and treatment programs to:

(A) Modify systems and business processes to conform to the plan established under subsection (2) of this section; and

(B) Change or stop data collection, data sharing or data analysis functions that are duplicative, inefficient, wasteful or unnecessary.

(5) All participating state agencies shall:

(a) Provide staff support and financial resources to assist the commission in the performance of its duties, which may include making reasonable modifications to the information systems of the state agencies to conform the systems to the plan established under subsection (2) of this section.

(b) Furnish such information, assistance and advice as the commission considers necessary to perform its duties.

(c) Coordinate grant applications that seek funding for alcohol or drug prevention or treatment programs.

(d) Coordinate with research entities to obtain current information about issues related to alcohol and drug use and to encourage research to evaluate and refine prevention and treatment efforts.

(e) Educate the general public about issues related to alcohol and drug use and the effectiveness of evidence-based prevention and treatment services, to increase public awareness and the allocation of resources.

(f) Promote a treatment delivery infrastructure that will meet anticipated increases in demand for services, ensure a skilled addictions treatment workforce and provide effective treatment assessment mechanisms.

(g) Assess funding priorities and explore opportunities for additional federal resources for alcohol and drug prevention and treatment services.

(h) Solicit from agencies, associations, individuals and all political subdivisions of this state program proposals that address identified priorities.

(i) Evaluate and report to the commission, in the manner and at intervals prescribed by the commission, on the cost and effectiveness of the state agency's treatment programs.

(6) The commission may:

(a) Establish up to 10 pilot programs, located in diverse Oregon communities including at least one tribe, to:

(A) Phase in the long-term strategic prevention and treatment plan developed under subsection (1)(a) of this section; and

(B) Implement prevention programs developed under subsection (7) of this section.

(b) Delegate to the Director of the Alcohol and Drug Policy Commission the authority to carry out the provisions of this section.

(c) Apply for and receive gifts and grants from any public or private source. All moneys received by the commission under this paragraph are continuously appropriated to the commission for the purposes of carrying out the duties, functions and powers of the commission.

(d) Award grants from funds appropriated to the commission by the Legislative Assembly, or from funds otherwise available from any other source, for the purpose of carrying out the duties of the commission.

(7) No later than six months after the appointment of the first Director of the Alcohol and Drug Policy Commission, the director shall develop a science-based model alcohol and drug prevention program for use in conjunction with the pilot programs, if any, established

under subsection (6) of this section and as otherwise directed by the commission. The director shall develop the model program in consultation with:

- (a) The Oregon Health Authority;
- (b) The Department of Human Services;
- (c) The Department of Education;
- (d) The Oregon Liquor Control Commission;
- (e) The State Commission on Children and Families;
- (f) Organizations that represent or advocate on behalf of consumers of alcohol and drug prevention and treatment programs; and
- (g) Behavioral scientists.

(8) The commission and participating state agencies shall enter into interagency agreements to:

- (a) Provide staff and financial resources to assist the commission in carrying out its duties;
 - (b) Share computer systems and technologies between participating state agencies' staff;
 - (c) Collect and analyze data related to the performance of alcohol and drug prevention and treatment programs; and
 - (d) Investigate the impacts of drug and alcohol abuse on Oregonians.
- (9) The commission may adopt rules to carry out its duties under this section.

SECTION 3. ORS 3.450 is amended to read:

3.450. (1) As used in this section, "drug court program" means a program in which:

(a) Individuals who are before the court obtain treatment for substance abuse issues and report regularly to the court on the progress of their treatment; and

(b) A local drug court team, consisting of the court, agency personnel and treatment and service providers, monitors the individuals' participation in treatment.

(2)(a) The governing body of a county or a treatment provider may establish fees that individuals participating in a drug court program may be required to pay for treatment and other services provided as part of the drug court program.

(b) A court may order an individual participating in a drug court program to pay fees to participate in the program. Fees imposed under this subsection may not be paid to the court.

(3) Records that are maintained by the circuit court specifically for the purpose of a drug court program must be maintained separately from other court records. Records maintained by a circuit court specifically for the purpose of a drug court program are confidential and may not be disclosed except in accordance with regulations adopted under 42 U.S.C. 290dd-2, including under the circumstances described in subsections (4) to [(6)] (7) of this section.

(4) If the individual who is the subject of the record gives written consent, a record described in subsection (3) of this section may be disclosed to members of the local drug court team in order to develop treatment plans, monitor progress in treatment and determine outcomes of participation in the drug court program.

(5) A record described in subsection (3) of this section may not be introduced into evidence in any legal proceeding other than the drug court program unless:

(a) The individual who is the subject of the record gives written consent for introduction of the record; or

(b) The court finds good cause for introduction. In determining whether good cause exists for purposes of this paragraph, the court shall weigh the public interest and the need for disclosure against the potential injury caused by the disclosure to:

(A) The individual who is the subject of the record;

(B) The individual-physician relationship; and

(C) The treatment services being provided to the individual who is the subject of the record.

(6) A court, the State Court Administrator, **the Alcohol and Drug Policy Commission** or the Oregon Criminal Justice Commission:

(a) May use records described in subsection (3) of this section and other drug court program information to track and develop statistics about the effectiveness, costs and other areas of public interest concerning drug court programs.

(b) [A court, the State Court Administrator or the Oregon Criminal Justice Commission] May release statistics developed under **paragraph (a)** of this subsection and analyses based on the statistics to the public.

(7) Statistics and analyses released under [this] subsection **(6) of this section** may not contain any information that identifies an individual participant in a drug court program.

SECTION 4. ORS 135.980 is amended to read:

135.980. (1) [By January 1, 1990,] The Director of the Department of Corrections shall [compile and thereafter] maintain a directory of public and private rehabilitative programs known and available to corrections agencies of the state and of each county. For purposes of this subsection, "rehabilitative program" means a planned activity, in a custodial or noncustodial context, designed and implemented to treat drug or alcohol abuse, to prevent criminal sexual behavior, to modify a propensity to commit crimes against persons or property or to achieve restitution for losses caused by an offender and includes programs that employ the device of mediation between the victim and offender. **Rehabilitative programs included in the directory that are designed and implemented to treat drug or alcohol abuse must meet minimum standards adopted by the Oregon Health Authority under ORS 430.357.** The director shall include:

(a) The name, address and telephone number of the program and the identity of its director or other principal contact;

(b) The geographical jurisdiction of the program;

(c) The types of offenders that the program claims to be able to serve and the criteria that the program applies in selecting or soliciting cases;

(d) The claims of the program regarding its effectiveness in reducing recidivism, achieving restitution or otherwise serving correctional objectives;

(e) An assessment by the relevant corrections agency of the actual effectiveness of the program; and

(f) The capacity of the program for new cases.

(2) The Director of the Department of Corrections shall make the directory available to the Oregon Criminal Justice Commission and to judges in a form that will allow sentencing judges to determine what rehabilitative programs are appropriate and available to the offender during any period of probation, imprisonment or local incarceration and post-prison supervision. The Director of the Department of Corrections shall also make the directory available to its employees who prepare presentence reports and proposed release plans for submission to the State Board of Parole and Post-Prison Supervision.

(3) The directory shall be updated as frequently as is practical, but no less often than every six months.

[4) *The Director of the Department of Corrections shall prepare a plan for monitoring the scope and measuring the effectiveness of existing rehabilitative programs and shall deliver that plan to the Oregon Criminal Justice Commission no later than January 1, 1990.*]

SECTION 5. ORS 137.229 is amended to read:

137.229. The Department of Corrections, to the extent that funds are available, shall expand existing and establish new treatment programs for alcohol and drug dependency **that meet minimum standards adopted by the Oregon Health Authority pursuant to ORS 430.357.**

SECTION 6. ORS 336.222 is amended to read:

336.222. In accordance with rules adopted by the State Board of Education in consultation with the Oregon Health Authority **and the Alcohol and Drug Policy Commission**, each district school board shall adopt a comprehensive alcohol and drug abuse policy and implementation plan, including but not limited to:

(1) Alcohol and drug abuse prevention curriculum and public information programs addressing students, parents, teachers, administrators and school board members;

(2) The nature and extent of the district's expectation of intervention with students who appear to have drug or alcohol abuse problems;

(3) The extent of the district's alcohol and other drug prevention and intervention programs; and

(4) The district's strategy to gain access to federal funds available for drug abuse prevention programs.

SECTION 7. ORS 336.235 is amended to read:

336.235. In order to carry out the duties described in ORS 336.222 and 336.227, the State Board of Education, in consultation with the Oregon Health Authority **and the Alcohol and Drug Policy Commission**, shall adopt by rule, as a minimum, descriptions of the content of what shall be included in the policy and plan described in ORS 336.222 and 336.227.

SECTION 8. ORS 351.105 is amended to read:

351.105. In order to carry out the duties described in ORS 352.008, the State Board of Higher Education, in consultation with the Oregon Health Authority **and the Alcohol and Drug Policy Commission**, shall adopt by rule, as a minimum, descriptions of the content of what shall be included in the policy and plan described in ORS 352.008.

SECTION 9. ORS 352.008 is amended to read:

352.008. In consultation with the Oregon Health Authority **and the Alcohol and Drug Policy Commission**, each state institution of higher education shall adopt a comprehensive alcohol and drug abuse policy and implementation plan.

SECTION 10. ORS 353.120 is amended to read:

353.120. The Oregon Health and Science University, **in consultation with the Alcohol and Drug Policy Commission**, shall adopt a comprehensive alcohol and drug abuse policy and implementation plan.

SECTION 11. ORS 409.410 is amended to read:

409.410. (1) The Director of the Oregon Health Authority shall administer *[all]* alcohol and drug abuse programs, including but not limited to programs or components of programs described in ORS 430.397 to 430.401, 475.225, 743.557 and 743.558 and ORS chapters 430 and 801 to 822.

(2) Subject to ORS 417.300 and 417.305, the director shall:

(a) Report to the *[Legislative Assembly]* **Alcohol and Drug Policy Commission** on accomplishments and issues occurring during each biennium, and report on a new biennial plan describing resources, needs and priorities for all alcohol and drug abuse programs.

(b) Develop within the Oregon Health Authority priorities for alcohol and drug abuse programs and activities.

[(c) Monitor the priorities of approved alcohol and drug abuse related programs in all other state agencies.]

[(d)] (c) Conduct statewide and special planning processes which provide for participation from state and local agencies, groups and individuals.

[(e)] (d) Identify the needs of special populations including minorities, elderly, youth, women and individuals with disabilities.

[(f)] (e) Subject to ORS chapter 183, adopt such rules as are necessary for the performance of the duties and functions specified by this section~~, ORS 430.255 to 430.630, or otherwise lawfully delegated~~.

(3) The director may apply for, receive and administer funds, including federal funds and grants, from sources other than the state. Subject to expenditure limitation set by the Legislative Assembly, funds received under this subsection may be expended by the director:

(a) For the study, prevention or treatment of alcohol and drug abuse and dependence in this state.

(b) To provide training, both within this state and in other states, in the prevention and treatment of alcohol and drug abuse and dependence.

(4) The director shall, in consultation with state agencies and counties, establish guidelines to coordinate program review and audit activities by state agencies and counties that provide funds to alcohol and drug prevention and treatment programs. The purpose of the

guidelines is to minimize duplication of auditing and program review requirements imposed by state agencies and counties on alcohol and drug prevention and treatment programs that receive state funds, including programs that receive beer and wine tax revenues under ORS 430.380 and 471.810.

SECTION 12. ORS 410.720 is amended to read:

410.720. (1) It is the policy of this state to provide mental health and addiction services for all Oregon senior citizens and persons with disabilities through a comprehensive and coordinated statewide network of local mental health services and alcohol and drug abuse education and treatment. These services should involve family and friends and be provided in the least restrictive and most appropriate settings.

(2) The Department of Human Services shall facilitate the formation of local community partnerships between the senior, disability, mental health, alcohol and drug abuse and health care communities by supporting the development of program approaches *[including, but]* **that meet minimum standards adopted by the Oregon Health Authority under ORS 430.357 including, but** not limited to:

- (a) Mental health and addiction screenings and assessments in long term care settings;
- (b) Outreach services to seniors and persons with disabilities in their homes, including gatekeeper programs, neighborhood programs and programs designed for rural communities;
- (c) Multilingual and multicultural medical and psychiatric services for ethnic minorities with physical disabilities and hearing impairments;
- (d) Education and training for health care consumers, health care professionals and mental health and addiction services providers on mental health and addiction issues, programs and services for seniors and persons with disabilities; and
- (e) Education and consultation services for primary care physicians treating seniors and persons with disabilities.

(3) In carrying out the provisions of subsections (1) and (2) of this section, the department shall:

- (a) Develop plans for service coordination within the department;
 - (b) Recommend budget provisions for the delivery of needed services offered by the department;
- and
- (c) Develop plans for expanding mental health and addiction services for seniors and persons with disabilities to meet the increasing demand.

SECTION 13. ORS 417.775, as amended by section 17, chapter 856, Oregon Laws 2009, is amended to read:

417.775. (1) Under the direction of the board or boards of county commissioners, and in conjunction with the guidelines set by the State Commission on Children and Families, the local commission on children and families shall promote wellness for children of all ages and their families in the county or region, if the families have given their express written consent, mobilize communities and develop policy and oversee the implementation of a local coordinated comprehensive plan described in this section. A local commission shall:

- (a) Inform and involve citizens;
- (b) Identify and map the range of resources in the community;
- (c) Plan, advocate and fund research-based **and tribal-based** initiatives for children who are 18 years of age or younger, including prenatal, and their families;
- (d) Develop local policies, priorities, outcomes and targets;
- (e) Prioritize activities identified in the local plan and mobilize the community to take action;
- (f) Prioritize the use of nondedicated resources;
- (g) Monitor implementation of the local plan; and
- (h) Monitor and evaluate the intermediate outcome targets identified in the local plan that are reviewed under ORS 417.797, and report on the progress in addressing priorities and achieving outcomes.

(2)(a) A local commission may not provide direct services for children and their families.

(b) Notwithstanding paragraph (a) of this subsection, a local commission may provide direct services for children and their families for a period not to exceed six months if:

- (A)(i) The local commission determines that there is an emergency;
 - (ii) A provider of services discontinues providing the services in the county or region; or
 - (iii) No provider is able to offer the services in the county or region; and
- (B) The family has given its express written consent.

(3) The local commission shall lead and coordinate a process to assess needs, strengths, goals, priorities and strategies, and identify county or regional outcomes to be achieved. The process shall be in conjunction with other coordinating bodies for services for children and their families and shall include representatives of education, mental health services, developmental disability services, alcohol and drug treatment programs, public health programs, local child care resource and referral agencies, child care providers, law enforcement and corrections agencies, private nonprofit entities, local governments, faith-based organizations, businesses, families, youth and the local community. The process shall include populations representing the diversity of the county or region.

(4) Through the process described in subsection (3) of this section, the local commission shall coordinate the development of a single local plan for coordinating community programs, strategies and services for children who are 18 years of age or younger, including prenatal, and their families among community groups, government agencies, private providers and other parties. The local plan shall be a comprehensive area-wide service delivery plan for all services to be provided for children and their families in the county or region, if the families have given their express written consent. The local plan shall be designed to achieve state and county or regional outcomes based on state policies and guidelines and to maintain a level of services consistent with state and federal requirements.

(5) The local commission shall prepare the local coordinated comprehensive plan and applications for funds to implement ORS 417.705 to 417.801 and 419A.170. The local plan, policies and proposed service delivery systems shall be submitted to the board or boards of county commissioners for approval prior to submission to the state commission. The local plan shall be based on identifying the most effective service delivery system allowing for the continuation of current public and private programs where appropriate. The local plan shall address needs, strengths and assets of all children, their families and communities, including those children and their families at highest risk.

(6) Subject to the availability of funds:

(a) The local coordinated comprehensive plan shall include:

(A) Identification of ways to connect all state and local planning processes related to services for children and their families into the local coordinated comprehensive plan to create positive outcomes for children and their families; and

(B) Provisions for a continuum of social supports at the community level for children from the prenatal stage through 18 years of age, and their families, that takes into account areas of need, service overlap, asset building and community strengths as outlined in ORS 417.305 (2).

(b) The local coordinated comprehensive plan shall reference:

(A) A voluntary local early childhood system plan created pursuant to ORS 417.777;

(B) Local alcohol and other drug prevention and treatment plans developed pursuant to *[section 1, chapter 856, Oregon Laws 2009]* **section 2 of this 2011 Act**;

(C) Local service plans, developed pursuant to ORS 430.630, for the delivery of mental health services for children and their families;

(D) Local public health plans, developed pursuant to ORS 431.385, that include public health issues such as prenatal care, immunizations, well-child checkups, tobacco use, nutrition, teen pregnancy, maternal and child health care and suicide prevention; and

(E) The local high-risk juvenile crime prevention plan developed pursuant to ORS 417.855.

(7) The local coordinated comprehensive plan shall include a list of staff positions budgeted to support the local commission on children and families. The list shall indicate the status of each position as a percentage of full-time equivalency dedicated to the implementation of the local coordinated comprehensive plan. The county board or boards of commissioners shall be responsible for

providing the level of staff support detailed in the local plan and shall ensure that funds provided for these purposes are used to carry out the local plan.

(8) The local coordinated comprehensive plan shall:

(a) Improve results by addressing the needs, strengths and assets of all children, their families and communities in the county or region, including those children and their families at highest risk;

(b) Improve results by identifying the methods that work best at the state and local levels to coordinate resources, reduce paperwork and simplify processes, including data gathering and planning;

(c) Be based on local, state and federal resources;

(d) Be based on proven practices of effectiveness for the specific community;

(e) Contribute to a voluntary statewide system of formal and informal services and supports that is provided at the community level, that is integrated in local communities and that promotes improved outcomes for Oregon's children;

(f) Be presented to the citizens in each county for public review, comment and adjustment;

(g) Be designed to achieve outcomes based on research-identified proven practices of effectiveness; and

(h) Address other issues, local needs or children and family support areas as determined by the local commission pursuant to ORS 417.735.

(9) In developing the local coordinated comprehensive plan, the local commission shall:

(a) Secure active participation pursuant to subsection (3) of this section;

(b) Provide for community participation in the planning process, including media notification;

(c) Conduct an assessment of the community that identifies needs and strengths;

(d) Identify opportunities for service integration; and

(e) Develop a local coordinated comprehensive plan and budget to meet the priority needs of a county or region.

(10) The state commission may disapprove the part of the local coordinated comprehensive plan relating to the planning process required by this section and the voluntary local early childhood system plan.

(11)(a) The state commission may disapprove the planning process and the voluntary local early childhood system plan only upon making specific findings that the local plan substantially fails to conform to the principles, characteristics and values identified in ORS 417.708 to 417.725 and 417.735 (4) or that the local plan fails to conform with the planning process requirements of this section. The staff of the state commission shall assist the local commission in remedying the deficiencies in the planning process or the voluntary local early childhood system plan. The state commission shall set a date by which any deficient portions of the planning process or the voluntary local early childhood system plan must be revised and resubmitted to the state commission by the local commission.

(b) The state commission does not have approval authority over the following service plans referenced in the local coordinated comprehensive plan:

(A) The local alcohol and other drug prevention and treatment plans developed pursuant to [section 1, chapter 856, Oregon Laws 2009] **section 2 of this 2011 Act**;

(B) Local service plans, developed pursuant to ORS 430.630, relating to the delivery of mental health services;

(C) Local public health plans developed pursuant to ORS 431.385; and

(D) Local high-risk juvenile crime prevention plans developed pursuant to ORS 417.855.

(12) The state commission, the Department of Human Services and the Juvenile Crime Prevention Advisory Committee may jointly approve the community plan that is part of the local coordinated comprehensive plan, but may not jointly approve the service plans that are referenced in the local plan. If the community plan is disapproved in whole, the agencies shall identify with particularity the manner in which the community plan is deficient and the service plans may be implemented. If only part of the community plan is disapproved, the remainder of the community plan and the service plans may be implemented. The staff of the agencies shall assist the local

commission in remedying the disapproved portions of the community plan. The agencies shall jointly set a date by which the deficient portions of the community plan shall be revised and resubmitted to the agencies by the local commission. In reviewing the community plan, the agencies shall consider the impact of state and local budget reductions on the community plan.

(13) If a local commission determines that the needs of the county or region it serves differ from those identified by the state commission, it may ask the state commission to waive specific requirements in its list of children's support areas. The process for granting waivers shall be developed by the state commission prior to the start of the review and approval process for the local coordinated comprehensive plan described in ORS 417.735 (4) and shall be based primarily on a determination of whether the absence of a waiver would prevent the local commission from best meeting the needs of the county or region.

(14) From time to time, the local commission may amend the local coordinated comprehensive plan and applications for funds to implement ORS 417.705 to 417.801 and 419A.170. The local commission must amend the local plan to reflect current community needs, strengths, goals, priorities and strategies. Amendments become effective upon approval of the board or boards of county commissioners and the state commission.

(15) The local commission shall keep an official record of any amendments to the local coordinated comprehensive plan under subsection (14) of this section.

(16) The local commission shall provide an opportunity for public and private contractors to review the components of the local coordinated comprehensive plan and any amendments to the local plan, to receive notice of any component that the county or counties intend to provide through a county agency and to comment publicly to the board or boards of county commissioners if they disagree with the proposed service delivery plan.

(17) Alcohol and drug prevention and treatment services included in the local coordinated comprehensive plan must meet minimum standards adopted by the Oregon Health Authority under ORS 430.357.

SECTION 14. ORS 423.150 is amended to read:

423.150. (1) The Department of Corrections shall:

(a) Provide appropriate treatment services to drug-addicted persons in the custody of the department who are at a high or medium risk of reoffending and who have moderate to severe treatment needs; and

(b) Make grants to counties in order to provide supplemental funding for:

(A) The operation of local jails;

(B) Appropriate treatment services for drug-addicted persons on probation, parole or post-prison supervision; or

(C) The intensive supervision of drug-addicted persons on probation, parole or post-prison supervision, including the incarceration of drug-addicted persons who have violated the terms and conditions of probation, parole or post-prison supervision.

(2) The Oregon Criminal Justice Commission shall make grants to counties in order to provide supplemental funding for drug courts for drug-addicted persons, including the costs of appropriate treatment services and the incarceration of persons who have violated the terms and conditions of a drug court.

(3)(a) The appropriate legislative committee shall periodically conduct oversight hearings on the effectiveness of this section.

(b) The Oregon Criminal Justice Commission shall periodically conduct independent evaluations of the programs funded by this section for their effectiveness in reducing criminal behavior in a cost-effective manner **and shall report the findings to the Alcohol and Drug Policy Commission.**

(4) The Department of Corrections shall determine which persons are eligible for treatment under subsection (1)(a) of this section using an actuarial risk assessment tool.

(5) The department shall adopt rules to administer the grant program described in subsection (1)(b) of this section.

(6) Prior to adopting the rules described in subsection (5) of this section, the department shall consult with a broad-based committee that includes representatives of:

- (a) County boards of commissioners;
- (b) County sheriffs;
- (c) District attorneys;
- (d) County community corrections;
- (e) The Oregon Criminal Justice Commission;
- (f) Presiding judges of the judicial districts of this state;
- (g) Public defenders; and
- (h) Treatment providers.

(7) In determining which grant proposals to fund within each county, the department shall:

- (a) Consult with the committee described in subsection (6) of this section;
- (b) Give priority to those proposals that are best designed to reduce crime and drug addiction;

and

(c) Be guided by evidence-based **and tribal-based** practices, risk assessment tools or other research-based considerations.

(8) Nothing in this section:

- (a) Creates any claim, right of action or civil liability; or
- (b) Requires a supervisory authority or the Department of Corrections to provide treatment to any individual under the authority's supervision or in the custody of the department.

(9) As used in this section:

(a) "Drug-addicted person" means a person who has lost the ability to control the personal use of controlled substances or alcohol, or who uses controlled substances or alcohol to the extent that the health of the person or that of others is substantially impaired or endangered or the social or economic function of the person is substantially disrupted. A drug-addicted person may be physically dependent, a condition in which the body requires a continuing supply of a controlled substance or alcohol to avoid characteristic withdrawal symptoms, or psychologically dependent, a condition characterized by an overwhelming mental desire for continued use of a controlled substance or alcohol.

(b) "Intensive supervision" means the active monitoring of a person's performance in a treatment program by a parole and probation officer and the imposition of sanctions, or request to a court for sanctions, if the person fails to abide by the terms and conditions of a treatment program.

SECTION 15. ORS 430.010 is amended to read:

430.010. As used in ORS 430.010 to 430.050, 430.140 to 430.170, 430.265[, 430.270] and 430.610 to 430.695:

(1) "Authority" means the Oregon Health Authority.

(2) "Department" means the Department of Human Services.

(3) "Health facility" means a facility licensed as required by ORS 441.015 or a facility accredited by the Joint Commission on Accreditation of Hospitals, either of which provides full-day or part-day acute treatment for alcoholism, drug addiction or mental or emotional disturbance, and is licensed to admit persons requiring 24-hour nursing care.

(4) "Residential facility" or "day or partial hospitalization program" means a program or facility providing an organized full-day or part-day program of treatment. Such a program or facility shall be licensed, approved, established, maintained, contracted with or operated by the authority under:

- (a) ORS 430.265 to 430.380 and 430.610 to 430.880 for alcoholism;
- (b) ORS 430.265 to 430.380, 430.405 to 430.565 and 430.610 to 430.880 for drug addiction; or
- (c) ORS 430.610 to 430.880 for mental or emotional disturbances.

(5) "Outpatient service" means:

(a) A program or service providing treatment by appointment and by:

(A) Medical or osteopathic physicians licensed by the Oregon Medical Board under ORS 677.010 to 677.450;

(B) Psychologists licensed by the State Board of Psychologist Examiners under ORS 675.010 to 675.150;

(C) Nurse practitioners registered by the Oregon State Board of Nursing under ORS 678.010 to 678.410;

(D) Regulated social workers authorized to practice regulated social work by the State Board of Licensed Social Workers under ORS 675.510 to 675.600; or

(E) Professional counselors or marriage and family therapists licensed by the Oregon Board of Licensed Professional Counselors and Therapists under ORS 675.715 to 675.835; or

(b) A program or service providing treatment by appointment that is licensed, approved, established, maintained, contracted with or operated by the authority under:

(A) ORS 430.265 to 430.380 and 430.610 to 430.880 for alcoholism;

(B) ORS 430.265 to 430.380, 430.405 to 430.565 and 430.610 to 430.880 for drug addiction; or

(C) ORS 430.610 to 430.880 for mental or emotional disturbances.

SECTION 16. ORS 430.240 is amended to read:

430.240. The Oregon Health Authority [*in developing treatment programs for drug-dependent persons*] shall develop **treatment** programs, **meeting minimum standards adopted pursuant to ORS 430.357, to** [*that*] assist drug-dependent persons to become persons who are able to live healthy and productive lives without the use of any natural or synthetic opiates.

SECTION 17. ORS 430.270, as amended by section 18, chapter 856, Oregon Laws 2009, is amended to read:

430.270. (1) The Oregon Health Authority shall take such means as it considers most effective to bring to the attention of the general public, employers, the professional community and particularly the youth of the state, the harmful effects to the individual and society of the irresponsible use of alcoholic beverages, controlled substances and other chemicals, and substances with abuse potential.

(2) The activities of the authority under this section must be consistent with any coordination efforts of the Alcohol and Drug Policy Commission conducted or developed under section 2 of this 2011 Act.

SECTION 18. ORS 430.306 is amended to read:

430.306. As used in ORS 430.315 to 430.335, **430.342**, 430.397, [*and*] 430.399, **430.420 and 430.630**, unless the context requires otherwise:

(1) "Alcoholic" means any person who has lost the ability to control the use of alcoholic beverages, or who uses alcoholic beverages to the extent that the health of the person or that of others is substantially impaired or endangered or the social or economic function of the person is substantially disrupted. An alcoholic may be physically dependent, a condition in which the body requires a continuing supply of alcohol to avoid characteristic withdrawal symptoms, or psychologically dependent, a condition characterized by an overwhelming mental desire for continued use of alcoholic beverages.

(2) "Applicant" means a city, county or any combination thereof.

(3) "Authority" means the Oregon Health Authority.

(4) "Detoxification center" means a publicly or privately operated profit or nonprofit facility approved by the authority that provides emergency care or treatment for alcoholics or drug-dependent persons.

(5) "Director of the treatment facility" means the person in charge of treatment and rehabilitation programs at a treatment facility.

(6) "Drug-dependent person" means one who has lost the ability to control the personal use of controlled substances or other substances with abuse potential, or who uses such substances or controlled substances to the extent that the health of the person or that of others is substantially impaired or endangered or the social or economic function of the person is substantially disrupted. A drug-dependent person may be physically dependent, a condition in which the body requires a continuing supply of a drug or controlled substance to avoid characteristic withdrawal symptoms,

or psychologically dependent, a condition characterized by an overwhelming mental desire for continued use of a drug or controlled substance.

(7) "Halfway house" means a publicly or privately operated profit or nonprofit, residential facility approved by the authority that provides rehabilitative care and treatment for alcoholics or drug-dependent persons.

(8) "Local [*alcoholism*] planning committee" means a **local planning committee for alcohol and drug prevention and treatment services** appointed or designated by the county governing body under ORS 430.342.

(9) "[*Other*] Treatment facility" includes outpatient facilities, inpatient facilities and [*such*] other facilities [*as*] the authority determines suitable **and that provide services that meet minimum standards established under ORS 430.357**, any of which may provide diagnosis and evaluation, medical care, detoxification, social services or rehabilitation for alcoholics or drug-dependent persons and which operate in the form of a general hospital, a state hospital, a foster home, a hostel, a clinic or other suitable form approved by the authority.

SECTION 19. ORS 430.335 is amended to read:

430.335. **In accordance with the policies, priorities and standards established by the Alcohol and Drug Policy Commission under section 2 of this 2011 Act, and** subject to the availability of funds therefor, the Oregon Health Authority may:

(1) Provide directly through publicly operated treatment facilities, which shall not be considered to be state institutions, or by contract with publicly or privately operated profit or nonprofit treatment facilities, for the care of alcoholics or drug-dependent persons.

(2) Sponsor and encourage research of alcoholism and drug dependence.

(3) Seek to coordinate public and private programs relating to alcoholism and drug dependence.

(4) Apply for federally granted funds available for study or prevention and treatment of alcoholism and drug dependence.

(5) Directly or by contract with public or private entities, administer financial assistance, loan and other programs to assist the development of drug and alcohol free housing.

SECTION 20. ORS 430.338 is amended to read:

430.338. The purposes of ORS [430.306,] 430.338 to 430.380[, 471.810, 473.030 and 473.050] are:

(1) To encourage local units of government to provide treatment and rehabilitation services to persons suffering from alcoholism;

(2) To foster sound local planning to address the problem of alcoholism and its social consequences;

(3) To promote a variety of treatment and rehabilitation services for alcoholics designed to meet the therapeutic needs of diverse segments of a community's population, recognizing that no single approach to alcoholism treatment and rehabilitation is suitable to every individual;

(4) To increase the independence and ability of individuals recovering from alcoholism to lead satisfying and productive lives, thereby reducing continued reliance upon therapeutic support;

(5) To [*insure*] **ensure** sufficient emphasis upon the unique treatment and rehabilitation needs of minorities; and

(6) To stimulate adequate evaluation of alcoholism treatment and rehabilitation programs.

SECTION 21. ORS 430.342 is amended to read:

430.342. (1) The governing body of each county or combination of counties in a mental health administrative area, as designated by the [*Oregon Health Authority*] **Alcohol and Drug Policy Commission**, shall:

(a) Appoint a local [*alcoholism*] planning committee **for alcohol and drug prevention and treatment services**; or [*shall*]

(b) Designate an already existing body to act as the local [*alcoholism*] planning committee **for alcohol and drug prevention and treatment services**.

(2) The committee shall identify needs and establish priorities for [*alcoholism services. In doing so, it shall coordinate its activities with existing community mental health planning bodies*] **alcohol and drug prevention and treatment services that best suit the needs and values of the com-**

munity and shall report its findings to the Oregon Health Authority, the governing bodies of the counties served by the committee and the budget advisory committee of the commission.

(3) Members of the **local planning** committee shall be representative of the geographic area and shall be persons with interest or experience in developing [*programs dealing with alcohol problems*] **alcohol and drug prevention and treatment services**. The membership of the committee shall include a number of minority members which reasonably reflects the proportion of the need for [*alcoholism*] **prevention**, treatment and rehabilitation services of minorities in the community.

SECTION 22. ORS 430.345 is amended to read:

430.345. Upon application therefor, the Oregon Health Authority may make grants from funds specifically appropriated for the purposes of carrying out ORS [*430.345*] **430.338** to 430.380 to any applicant for the establishment, operation and maintenance of alcohol and drug abuse prevention, early intervention and treatment services. When necessary, a portion of the appropriated funds may be designated by the authority for training and technical assistance, or additional funds may be appropriated for this purpose. Alcohol and drug abuse prevention, early intervention and treatment services shall be approved if the applicant establishes to the satisfaction of the authority:

(1)(a) The adequacy of the services to accomplish the goals of the applicant [*and the program goals are consonant with the purposes of ORS 430.306, 430.338 to 430.380, 471.810, 473.030 and 473.050 and goals of the State Plan for Alcohol Problems.*] **and the needs and priorities established under ORS 430.338 to 430.380; or**

(2) (b) The community need for the services as [*documented in the annual community mental health plan.*] **determined by the local planning committee for alcohol and drug prevention and treatment services under ORS 430.342;**

(3) (2) That an appropriate operating [*relationship*] **agreement** exists, or will exist with other community facilities able to assist in providing alcohol and drug abuse prevention, early intervention and treatment services, including nearby detoxification centers and halfway houses[.]; **and**

(4) (3) That the services comply with the rules adopted by the authority pursuant to ORS 430.357.

SECTION 23. ORS 430.357 is amended to read:

430.357. (1) The Oregon Health Authority shall [*make all necessary and proper rules governing the administration of ORS 430.345 to 430.380, including but not limited to standards, consistent with modern knowledge about alcohol and drug abuse prevention, early intervention and treatment services*] **adopt rules to implement ORS 430.338 to 430.380 and to establish minimum standards for alcohol and drug prevention and treatment programs in accordance with the rules, policies, priorities and standards of the Alcohol and Drug Policy Commission under section 2 of this 2011 Act.**

(2) All standards and guidelines adopted by the authority to implement programs authorized under ORS [*430.345*] **430.338** to 430.380 shall be adopted as rules pursuant to ORS chapter 183 regardless of whether they come within the definition of rule in ORS 183.310 (8).

SECTION 24. ORS 430.359, as amended by section 20, chapter 856, Oregon Laws 2009, is amended to read:

430.359. (1) Upon approval of an application, the Oregon Health Authority shall enter into a matching fund relationship with the applicant. In all cases the amount granted by the authority under the matching formula shall not exceed 50 percent of the total estimated costs, as approved by the authority, of the alcohol and drug abuse prevention, early intervention and treatment services.

(2) [*The amount of state funds shall be apportioned among the applicants according to the community need of the applicant for services as compared with the community needs of all applicants. In evaluating the community needs of the applicant, the authority shall give priority consideration to those applications that identify and include alcohol and drug abuse prevention, early intervention and treatment services aimed at providing services to minorities*] **The authority shall distribute funds to applicants consistent with the budget priority policies adopted by the Alcohol and Drug Pol-**

icy Commission, the community needs as determined by local planning committees for alcohol and drug prevention and treatment services under ORS 430.342 and the particular needs of minority groups with a significant population of affected persons. The funds granted shall be distributed monthly.

(3) Federal funds at the disposal of an applicant for use in providing alcohol and drug abuse prevention, early intervention and treatment services may be counted toward the percentage contribution of an applicant.

(4) An applicant that is, at the time of a grant made under this section, expending funds appropriated by its governing body for the alcohol and drug abuse prevention, early intervention and treatment services shall, as a condition to the receipt of funds under this section, maintain its financial contribution to these programs at an amount not less than the preceding year. However, the financial contribution requirement may be waived in its entirety or in part in any year by the authority because of:

(a) The severe financial hardship that would be imposed to maintain the contribution in full or in part;

(b) The application of any special funds for the alcohol and drug abuse prevention, early intervention and treatment services in the prior year when such funds are not available in the current year;

(c) The application of federal funds, including but not limited to general revenue sharing, distributions from the Oregon and California land grant fund and block grant funds to the alcohol and drug abuse prevention, early intervention and treatment services in the prior year when such funds are not available for such application in the current year; or

(d) The application of fund balances resulting from fees, donations or underexpenditures in a given year of the funds appropriated to counties pursuant to ORS 430.380 [(2)] to the alcohol and drug abuse prevention, early intervention and treatment services in the prior year when such funds are not available for such application in the current year.

(5) Any moneys received by an applicant from fees, contributions or other sources for alcohol and drug abuse prevention, early intervention and treatment services for service purposes, including federal funds, shall be considered a portion of an applicant's contribution for the purpose of determining the matching fund formula relationship. All moneys so received shall only be used for the purposes of carrying out ORS 430.345 to 430.380.

(6) Grants made pursuant to ORS 430.345 to 430.380 shall be paid from funds specifically appropriated therefor and shall be paid in the same manner as other claims against the state are paid.

SECTION 25. ORS 430.364 is amended to read:

430.364. Within the limits of available funds, in giving priority consideration under ORS 430.359 (2), the Oregon Health Authority shall:

(1) Identify all applications containing funding proposals for minority programs and assess the extent to which such funding proposals address the needs of minorities as stated in ORS 430.362, adjusting such amounts as it deems justified on the basis of the facts presented for its consideration and such additional information as may be necessary to determine an appropriate level of funding for such programs, and award such funds to those applicants for the purposes stated in the application; and

(2) After making a determination of the appropriate level of funding minority programs under subsection (1) of this section, assess the remaining portions of all applications containing minority program funding proposals together with applications which do not contain funding proposals for minority programs on the basis of the remaining community need [stated in ORS 430.345] **determined by the local planning committee for alcohol and drug prevention and treatment services under ORS 430.342**, adjusting such amounts as it deems justified on the basis of the facts presented for its consideration and such additional information as may be necessary to determine an appropriate level of funding such programs, and award such funds to those applicants.

SECTION 26. ORS 430.366 is amended to read:

430.366. (1) Every proposal for alcohol and drug abuse prevention, early intervention and treatment services received from an applicant shall contain:

(a) A clear statement of the goals and objectives of the program for the following fiscal year, including the number of persons to be served and methods of measuring the success of services rendered;

(b) A description of services to be funded; and

(c) A statement of the minorities to be served, if a minority program.

[(2) Thirty days before the end of each fiscal year, every service funded under ORS 430.306, 430.338 to 430.380, 471.810, 473.030 and 473.050 shall file a concise progress report with the Oregon Health Authority, including a narrative statement of progress made in meeting its goals and objectives for the year.]

[(3) The authority shall assemble all progress reports received in each biennium and transmit them to the succeeding session of the Legislative Assembly.]

(2) Each grant recipient and provider of alcohol and drug abuse prevention, early intervention and treatment services funded with moneys from the Mental Health Alcoholism and Drug Services Account established by ORS 430.380 shall report to the Alcohol and Drug Policy Commission all data regarding the services in the form and manner prescribed by the commission.

SECTION 27. ORS 430.368, as amended by section 21, chapter 856, Oregon Laws 2009, is amended to read:

430.368. (1) Any alcohol and drug abuse prevention, early intervention and treatment service, including but not limited to minority programs, aggrieved by any final action of an applicant with regard to requesting funding for the program from the Oregon Health Authority, may appeal the applicant's action to the Director of the Oregon Health Authority within 30 days of the action. For the purposes of this section "final action" means the submission of the applicant's compiled funding requests to the authority. The director shall review all appealed actions for compliance with the purposes and requirements of ORS [430.315 to 430.335,] 430.338 to 430.380[471.810, 473.030 and 473.050, including but not limited to ORS 430.338 (5)].

(2) The director shall act on all appeals within 60 days of filing, or before the time of the authority's decision on the applicant's funding request, whichever is less. The director is not required to follow procedures for hearing a contested case, but shall set forth written findings justifying the action. The decision of the director shall be final, and shall not be subject to judicial review.

SECTION 28. ORS 430.380 is amended to read:

430.380. (1) There is established in the General Fund of the State Treasury an account to be known as the Mental Health Alcoholism and Drug Services Account. Moneys deposited in the account are continuously appropriated for the purposes of ORS 430.345 to 430.380. Moneys deposited in the account may be invested in the manner prescribed in ORS 293.701 to 293.820.

(2) Forty percent of the moneys in the Mental Health Alcoholism and Drug Services Account shall be continuously appropriated to the counties on the basis of population. The counties must use the moneys for the establishment, operation and maintenance of alcohol and drug abuse prevention, early intervention and treatment services and for local matching funds under ORS 430.345 to 430.380.

(3) Forty percent of the moneys shall be continuously appropriated to the Oregon Health Authority to be used for state matching funds to counties for alcohol and drug abuse prevention, early intervention and treatment services pursuant to ORS 430.345 to 430.380.

(4) Twenty percent of the moneys shall be continuously appropriated to the Oregon Health Authority to be used for alcohol and drug abuse prevention, early intervention and treatment services for inmates of correctional and penal institutions and for parolees therefrom and for probationers as provided pursuant to rules of the authority. However, prior to expenditure of moneys under this subsection, the authority must present its program plans for approval to the appropriate legislative

body which is either the Joint Ways and Means Committee during a session of the Legislative Assembly or the Emergency Board during the interim between sessions.

(5) Counties and state agencies:

(a) May not use moneys appropriated to counties and state agencies under subsections (1) to (4) of this section for alcohol and drug prevention and treatment services that do not meet or exceed minimum standards established under ORS 430.357; and

(b) Shall include in all grants and contracts with providers of alcohol and drug prevention and treatment services a contract provision that the grant or contract may be terminated by the county or state agency if the provider does not meet or exceed the minimum standards adopted by the Oregon Health Authority pursuant to ORS 430.357. A county or state agency may not be penalized and is not liable for the termination of a contract under this section.

SECTION 29. ORS 430.395 is amended to read:

430.395. (1) *[Subject to the availability of funds,]* **In accordance with ORS 430.357, and consistent with the budget priority policies adopted by the Alcohol and Drug Policy Commission,** the Oregon Health Authority may fund regional centers for the treatment of adolescents with drug and alcohol dependencies.

(2) The authority shall define by rule a minimum number of inpatient beds and outpatient slots necessary for effective treatment and economic operation of any regional center funded by state funds.

(3) The areas to be served by any treatment facility shall be determined by the following:

(a) Areas that demonstrate the most need;

(b) Areas with no treatment program or an inadequate program; and

(c) Areas where there is strong, organized community support for youth treatment programs.

(4) The area need is determined by **the local planning committee for alcohol and drug prevention and treatment services under ORS 430.342 using the following information:**

(a) Current area youth admissions to treatment programs;

(b) Per capita consumption of alcohol in the area;

(c) Percentage of area population between 10 and 18 years of age;

(d) Whether the area has effective, specialized outpatient and early intervention services in place;

(e) Whether the area suffers high unemployment and economic depression; and

(f) Other evidence of need.

(5) As used in this section, "regional center" means a community residential treatment facility including intensive residential and outpatient care for adolescents with drug and alcohol dependencies.

SECTION 30. ORS 430.399 is amended to read:

430.399. (1) Any person who is intoxicated or under the influence of controlled substances in a public place may be taken or sent home or to a treatment facility by the police. However, if the person is incapacitated, the health of the person appears to be in immediate danger, or the police have reasonable cause to believe the person is dangerous to self or to any other person, the person shall be taken by the police to an appropriate treatment facility. A person shall be deemed incapacitated when in the opinion of the police officer or director of the treatment facility the person is unable to make a rational decision as to acceptance of assistance.

(2) The director of the treatment facility shall determine whether a person shall be admitted as a patient, or referred to another treatment facility or denied referral or admission. If the person is incapacitated or the health of the person appears to be in immediate danger, or if the director has reasonable cause to believe the person is dangerous to self or to any other person, the person must be admitted. The person shall be discharged within 48 hours unless the person has applied for voluntary admission to the treatment facility.

(3) In the absence of any appropriate treatment facility, an intoxicated person or a person under the influence of controlled substances who would otherwise be taken by the police to a treatment

facility may be taken to the city or county jail where the person may be held until no longer intoxicated, under the influence of controlled substances or incapacitated.

(4) An intoxicated person or person under the influence of controlled substances, when taken into custody by the police for a criminal offense, shall immediately be taken to the nearest appropriate treatment facility when the condition of the person requires emergency medical treatment.

(5) The records of a patient at a treatment facility [shall] **may** not be revealed to any person other than the director and staff of the treatment facility without the consent of the patient. A patient's request that no disclosure be made of admission to a treatment facility shall be honored unless the patient is incapacitated or disclosure of admission is required by ORS 430.397.

[6] *As used in this section, "treatment facility" has the meaning given "other treatment facility" in ORS 430.306.*

SECTION 31. ORS 430.420 is amended to read:

430.420. (1) In collaboration with local seizing agencies, the district attorney, the local public safety coordinating council and the local mental health advisory committee, a local [alcoholism] planning committee appointed or designated pursuant to ORS 430.342 shall develop a plan to integrate drug treatment services, **meeting minimum standards established pursuant to ORS 430.357**, into the criminal justice system for offenders who commit nonviolent felony drug possession offenses. The plan may also include property offenders as provided for under ORS 475.245. The plan developed under this subsection must be incorporated into the local coordinated comprehensive plan required by ORS 417.775.

(2)(a) A plan may include, but need not be limited to, programs that occur before adjudication, after adjudication as part of a sentence of probation or as part of a conditional discharge.

(b) A plan must include, but need not be limited to:

(A) A description of local criminal justice and treatment coordination efforts;

(B) A description of the method by which local, state and federal treatment resources are prioritized and allocated to meet the needs of the drug abusing offender population;

(C) The principles that guide criminal justice strategies for supervision and treatment of drug abusing offenders and the purchase of treatment services from local community providers;

(D) The desired outcomes for criminal justice strategies for supervision and treatment of drug abusing offenders and the provision of treatment services and identification of a method for monitoring and reporting the outcomes; and

(E) Consistent standards for measuring the success of criminal justice strategies for supervision and treatment of drug abusing offenders and the provision of treatment.

(3) A program must include, but need not be limited to:

(a) Ongoing oversight of the participant;

(b) Frequent monitoring to determine whether a participant is using controlled substances unlawfully; and

(c) A coordinated strategy governing responses to a participant's compliance or noncompliance with the program.

(4) The local [alcoholism] planning committee shall submit the plan to the Oregon Health Authority and shall provide the county board of commissioners with a copy of the plan.

SECTION 32. ORS 430.424 is amended to read:

430.424. **Consistent with the budget priority policies adopted by the Alcohol and Drug Policy Commission**, the Oregon Health Authority shall distribute moneys in the Drug Prevention and Education Fund established in ORS 430.422 based on a review of the plans submitted to the office under ORS 430.420. Funding criteria include, but need not be limited to, whether the plan includes the existence or development of a drug treatment court or a drug diversion program.

SECTION 33. ORS 430.450 is amended to read:

430.450. As used in ORS 430.450 to 430.555, unless the context requires otherwise:

(1) "Authority" means the Oregon Health Authority.

(2) "Community diversion plan" means a system of services approved and monitored by the Oregon Health Authority in accordance with approved county mental health plans, which may in-

clude but need not be limited to, medical, educational, vocational, social and psychological services, training, counseling, provision for residential care, and other rehabilitative services designed to benefit the defendant and protect the public.

(3) "Crimes of violence against the person" means criminal homicide, assault and related offenses as defined in ORS 163.165 to 163.208, rape and sexual abuse, incest, or any other crime involving the use of a deadly weapon or which results in physical harm or death to a victim.

(4) "Diversion" means the referral or transfer from the criminal justice system into a program of treatment or rehabilitation of a defendant diagnosed as drug dependent and in need of treatment at authority approved sites, on the condition that the defendant successfully fulfills the specified obligations of a program designed for rehabilitation.

(5) "Diversion coordinator" means a person designated by a county mental health program director to work with the criminal justice system and health care delivery system to screen defendants who may be suitable for diversion; to coordinate the formulation of individual diversion plans for such defendants; and to report to the court the performance of those defendants being treated under an individual diversion plan.

(6) "Director of the treatment facility" means the person in charge of treatment and rehabilitation programs at the treatment facility.

(7) "Drug abuse" means repetitive, excessive use of a drug or controlled substance short of dependence, without medical supervision, which may have a detrimental effect on the individual or society.

(8) "Drug-dependent person" means one who has lost the ability to control the personal use of controlled substances or other substances with abuse potential, or who uses such substances or controlled substances to the extent that the health of the person or that of others is substantially impaired or endangered or the social or economic function of the person is substantially disrupted. A drug-dependent person may be physically dependent, a condition in which the body requires a continuing supply of a drug or controlled substance to avoid characteristic withdrawal symptoms, or psychologically dependent, a condition characterized by an overwhelming mental desire for continued use of a drug or controlled substance.

(9) "Evaluation" means any diagnostic procedures used in the determination of drug dependency, and may include but are not limited to chemical testing, medical examinations and interviews.

(10) "Individual diversion plan" means a system of services tailored to the individual's unique needs as identified in the evaluation, which may include but need not be limited to medical, educational, vocational, social and psychological services, training, counseling, provision for residential care, and other rehabilitative services designed to benefit the defendant and protect the public. The plan shall include appropriate methods for monitoring the individual's progress toward achievement of the defined treatment objectives and shall also include periodic review by the court.

(11) "Treatment facility" means detoxification centers, outpatient clinics, residential care facilities, hospitals and such other facilities determined to be suitable by the authority **as meeting minimum standards under ORS 430.357**, any of which may provide diagnosis and evaluation, medical care, detoxification, social services or rehabilitation.

SECTION 34. ORS 430.540 is amended to read:

430.540. (1) The county mental health program director shall designate sites for evaluation in the county plan of individuals who may be or are known to be drug dependent. The Oregon Health Authority shall establish standards for such sites, **consistent with ORS 430.357**, and periodically publish a list of approved sites.

(2) The costs of evaluation shall be borne by the county of appropriate jurisdiction.

SECTION 35. ORS 430.560 is amended to read:

430.560. (1) The Oregon Health Authority shall *[establish]* **adopt rules setting forth requirements, in accordance with ORS 430.357**, for *[drug-dependent persons]* **drug** treatment programs that **contract with the authority and that** involve:

(a) Detoxification;

(b) Detoxification with acupuncture and counseling; and

(c) The supplying of synthetic opiates to such persons under close supervision and control. However, the supplying of synthetic opiates shall be used only when detoxification or detoxification with acupuncture and counseling has proven ineffective or upon a written request of a physician licensed by the Oregon Medical Board showing medical need for synthetic opiates if the request is approved in writing by the parole and probation officer, if any, of the drug-dependent person. The copy of the request and the approval must be included in the client's permanent treatment and releasing authority records.

(2) Notwithstanding subsection (1) of this section, synthetic opiates may be made available to a pregnant woman with her informed consent without prior resort to the treatment programs described in subsection (1)(a) and (b) of this section.

[(3) In establishing the programs authorized by subsection (1) of this section, the Oregon Health Authority may enter into contracts with detoxification programs, physicians licensed by the Oregon Medical Board, acupuncturists, counselors, licensed pharmacies and any agency of this state or a political subdivision in this state to conduct the required examinations and to supply the services used in the programs.]

[(4) The authority shall establish rules of eligibility for the programs authorized by ORS 430.565 and this section, considering such factors as residency, duration of dependency on drugs or controlled substances, failure of previous attempts at abstinence and other relevant factors. The authority shall establish reasonable fees for participation in the programs.]

[(5) Pursuant to ORS chapter 183, the authority shall adopt rules governing the administration of the programs authorized by ORS 430.565 and this section.]

SECTION 36. ORS 430.850 is amended to read:

430.850. (1) Subject to the availability of funds therefor, the Oregon Health Authority may establish and administer a treatment program with courts, with the consent of the judge thereof, for any person convicted of driving under the influence of alcohol, or of any crime committed while the defendant was intoxicated when the judge has probable cause to believe the person is an alcoholic or problem drinker and would benefit from treatment, who is eligible under subsection (2) of this section to participate in such program. The program *[shall involve medical and mental treatment to include at least the supplying of disulfiram or any other agent that interferes with normal metabolic degradation of alcohol in the body resulting in an increase in acetaldehyde concentrate in the blood, at regular intervals and under close supervision and control]* **must meet minimum standards established by the authority under ORS 430.357.**

(2) A person eligible to participate in the program is a person who:

(a)(A) Has been convicted of driving under the influence of alcohol if such conviction has not been appealed, or if such conviction has been appealed, whose conviction has been sustained upon appeal; or

[(b)] (B) Has been convicted of any crime committed while the defendant was intoxicated if such conviction has not been reversed on appeal, and when the judge has probable cause to believe the person is an alcoholic or problem drinker and would benefit from treatment; and

[(c)] (b)(A) Has been referred by the participating court to the authority for participation in the treatment program; *[and]*

[(d)] (B) Prior to sentencing, has been medically evaluated by the authority and accepted by the authority as a participant in the program; *[and]*

[(e)] (C) Has consented as a condition to probation to participate in the program; and

[(f)] (D) Has been sentenced to probation by the court, a condition of which probation is participation in the program according to the rules adopted by the authority under ORS 430.870.

SECTION 37. ORS 430.860 is amended to read:

430.860. The Oregon Health Authority may:

(1) Accept for medical evaluation any person meeting the conditions defined in ORS 430.850 (2)(a) *[or (b)]* and referred for participation in the program by a participating court, cause such medical evaluation to be made and report the results of the evaluation to the referring court;

(2) Within the limitation of funds available to the program, accept any person as a participant in the program who is eligible under ORS 430.850 (2) and whose medical evaluation shows the person suitable to participate in the program; and

(3) Report to the referring court the progress of, and any violation of rules of the authority adopted under ORS 430.870 by, a participant.

SECTION 38. ORS 430.920 is amended to read:

430.920. (1) The attending health care provider shall perform during the first trimester of pregnancy or as early as possible a risk assessment which shall include an assessment for drug and alcohol usage. If the results of the assessment indicate that the patient uses or abuses drugs or alcohol or uses unlawful controlled substances, the provider shall tell the patient about the potential health effects of continued substance abuse and recommend counseling by a trained drug or alcohol abuse counselor.

(2) The provider shall supply to the local public health administrator, **and to the Alcohol and Drug Policy Commission for purposes of the commission's accountability and data collection system**, demographic information concerning patients described in subsection (1) of this section without revealing the identity of the patients. The local administrator shall use forms prescribed by the Oregon Health Authority and shall send copies of the forms and any compilation made from the forms to the authority at such times as the authority may require by rule.

(3) The provider, if otherwise authorized, may administer or prescribe controlled substances that relieve withdrawal symptoms and assist the patient in reducing the need for unlawful controlled substances according to medically acceptable practices.

SECTION 39. ORS 471.432 is amended to read:

471.432. When a person is ordered to undergo assessment and treatment as provided in ORS 471.430, the court shall require the person to do all of the following:

(1) Pay to the court the fee described under ORS 813.030 in addition to any fine imposed under ORS 471.430.

(2) Complete an examination by an agency or organization designated by the court to determine whether the person has a problem condition involving alcohol as described in ORS 813.040. The designated agencies or organizations must meet *[the]* **minimum** standards *[set by the Director of the Oregon Health Authority]* **established under ORS 430.357** to perform the diagnostic assessment and treatment of problem drinking and alcoholism and must be certified by the Director **of the Oregon Health Authority**.

(3) Complete a treatment program, paid at the expense of the person convicted, as follows:

(a) If the examination required under this section shows that the person has a problem condition involving alcohol, a program for rehabilitation for alcoholism approved by the director.

(b) If the examination required by this section shows that the person does not have a problem condition involving alcohol, an alcohol information program approved by the director.

SECTION 40. ORS 657.665 is amended to read:

657.665. (1) Except as provided in subsections (2) to (4) of this section, all information in the records of the Employment Department pertaining to the administration of the unemployment insurance, employment service and labor market information programs:

(a) Is confidential and for the exclusive use and information of the Director of the Employment Department in administering the unemployment insurance, employment service and labor market information programs in Oregon.

(b) May not be used in any court action or in any proceeding pending in the court unless the director or the state is a party to the action or proceeding or unless the proceeding concerns the establishment, enforcement or modification of a support obligation and support services are being provided by the Division of Child Support or the district attorney pursuant to ORS 25.080.

(c) Is exempt from disclosure under ORS 192.410 to 192.505.

(2) The Employment Department shall disclose information:

(a) To any claimant or legal representative, at a hearing before an administrative law judge, to the extent necessary for the proper presentation of an unemployment insurance claim.

(b) Upon request to the United States Secretary of Labor. The Employment Department shall disclose the information in a form and containing the information that the United States Secretary of Labor may require. The information disclosed is confidential and may not be used for any other purpose.

(c) Pursuant to section 303(a)(7) of the Social Security Act, upon request to any agency of the United States charged with the administration of public works or assistance through public employment. Under this paragraph, the Employment Department shall disclose the name, address, ordinary occupation and employment status of each recipient of unemployment insurance benefits and a statement of the recipient's right to further benefits under this chapter. The information disclosed is confidential and may not be used for any other purpose.

(d) Pursuant to section 303(c)(1) of the Social Security Act, to the Railroad Retirement Board. Under this paragraph, the Employment Department shall disclose unemployment insurance records. The information disclosed is confidential and may not be used for any other purpose. The costs of disclosing information under this paragraph shall be paid by the board.

(e) Pursuant to section 303(d) of the Social Security Act, upon request to officers and employees of the United States Department of Agriculture and to officers or employees of any state Supplemental Nutrition Assistance Program agency for the purpose of determining an individual's eligibility for or the amount of supplemental nutrition assistance. The information disclosed is confidential and may not be used for any other purpose. The costs of disclosing information under this paragraph shall be paid by the United States Department of Agriculture.

(f) Pursuant to section 303(e)(1) and (2)(A)(ii) of the Social Security Act, to state or local child support enforcement agencies enforcing child support obligations under Title IV-D of the Social Security Act for the purposes of establishing child support obligations, locating individuals owing child support obligations and collecting child support obligations from those individuals. The information disclosed is confidential and may not be used for any other purpose. The costs of disclosing information under this paragraph shall be paid by the child support enforcement agency.

(g) Pursuant to sections 303(f) and 1137 of the Social Security Act, to agencies participating in the income and eligibility verification system for the purpose of verifying an individual's eligibility for benefits, or the amount of benefits, under unemployment insurance, temporary assistance for needy families, Medicaid, the Supplemental Nutrition Assistance Program, Supplemental Security Income, child support enforcement or Social Security programs. The information disclosed is confidential and may not be used for any other purpose. The costs of disclosing information under this paragraph shall be paid by the requesting agency.

(h) Pursuant to section 303(h) of the Social Security Act and section 3304(a)(16)(B) of the Federal Unemployment Tax Act, to the United States Department of Health and Human Services National Directory of New Hires. The information disclosed is confidential and may not be used for any other purpose. The costs of disclosing information under this paragraph shall be paid by the United States Department of Health and Human Services.

(i) Pursuant to section 303(i) of the Social Security Act, to officers and employees of the United States Department of Housing and Urban Development and to representatives of a public housing agency for the purpose of determining an individual's eligibility for benefits, or the amount of benefits, under a housing assistance program of the United States Department of Housing and Urban Development. The information disclosed is confidential and may not be used for any other purpose. The costs of disclosing information under this paragraph shall be paid by the United States Department of Housing and Urban Development or the public housing agency.

(j) Pursuant to regulations of the United States Secretary of Health and Human Services issued under section 3304(a)(16)(A) of the Federal Unemployment Tax Act, and except as required by section 303 of the Social Security Act, to the state, a political subdivision or a federally recognized Indian tribe that has signed an agreement with the Department of Human Services to administer Part A of Title IV of the Social Security Act for the purpose of determining an individual's eligibility for assistance, or the amount of assistance, under a program funded under Part A of Title IV

of the Social Security Act. The information disclosed is confidential and may not be used for any other purpose.

(k) Upon request, to the United States Attorney's Office. Under this paragraph, the Employment Department may disclose an individual's employment and wage information in response to a federal grand jury subpoena or for the purpose of collecting civil and criminal judgments, including restitution and special assessment fees. The information disclosed is confidential and may not be used for any other purpose. The costs of disclosing information under this paragraph shall be paid by the United States Attorney's Office.

(3) The Employment Department may disclose information secured from employing units:

(a) To agencies of this state, federal agencies and local government agencies to the extent necessary to properly carry out governmental planning, performance measurement, program analysis, socioeconomic analysis and policy analysis functions performed under applicable law. The information disclosed is confidential and may not be disclosed by the agencies in any manner that would identify individuals, claimants, employees or employing units. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the agency requesting the information.

(b) As part of a geographic information system. Points on a map may be used to represent economic data, including the location, employment size class and industrial classification of businesses in Oregon. Information presented as part of a geographic information system may not give specific details regarding a business's address, actual employment or proprietary information. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the party requesting the information.

(c) In accordance with ORS 657.673.

(4) The Employment Department may:

(a) Disclose information to public employees in the performance of their duties under state or federal laws relating to the payment of unemployment insurance benefits, the provision of employment services and the provision of labor market information.

(b) At the discretion of the Director of the Employment Department and subject to an interagency agreement, disclose information to public officials in the performance of their official duties administering or enforcing laws within their authority and to the agents or contractors of public officials. The public official shall agree to assume responsibility for misuse of the information by the official's agent or contractor.

(c) Disclose information pursuant to an informed consent, received from an employer or claimant, to disclose the information.

(d) Disclose information to partners under the federal Workforce Investment Act of 1998 for the purpose of administering state workforce programs under the Act. The information disclosed is confidential and may not be used for any other purpose. The costs of disclosing information under this paragraph shall be paid by the requesting partner.

(e) Disclose the names and addresses of employing units to the Bureau of Labor and Industries for the purpose of disseminating information to employing units. The names and addresses disclosed are confidential and may not be used for any other purpose. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the bureau.

(f) Disclose information to the Commissioner of the Bureau of Labor and Industries for the purpose of performing duties under ORS 279C.800 to 279C.870, 658.005 to 658.245 or 658.405 to 658.503 or ORS chapter 652, 653 or 659A. The information disclosed may include the names and addresses of employers and employees and payroll data of employers and employees. The information disclosed is confidential and may not be used for any other purpose. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the bureau.

(g) Disclose information required under ORS 657.660 (3) and (4) to the Public Employees Retirement System for the purpose of determining the eligibility of members of the retirement system

for disability retirement allowances under ORS chapter 238. The information disclosed is confidential and may not be used for any other purpose. The costs of disclosing information under this paragraph shall be paid by the Public Employees Retirement System.

(h) Disclose to the Oregon Business Development Commission information required by the commission in performing its duty under ORS 285A.050 to verify changes in employment levels following direct employer participation in Oregon Business Development Department programs or indirect participation through municipalities under ORS 285B.410 to 285B.482. The information disclosed to the commission may include an employer's employment level, total subject wages payroll and whole hours worked. The information disclosed is confidential and may not be used for any other purpose. The commission may not disclose the information in any manner that would identify an employing unit or employee except to the extent necessary to carry out the commission's duty under ORS 285A.050. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the commission.

(i) Disclose information to the Department of Revenue for the purpose of performing its duties under ORS 293.250 or under the revenue and tax laws of this state. The information disclosed may include the names and addresses of employers and employees and payroll data of employers and employees. The information disclosed is confidential and may not be disclosed by the Department of Revenue in any manner that would identify an employing unit or employee except to the extent necessary to carry out the department's duties under ORS 293.250 or in auditing or reviewing any report or return required or permitted to be filed under the revenue and tax laws administered by the department. The Department of Revenue may not disclose any information received to any private collection agency or for any other purpose. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the Department of Revenue.

(j) Disclose information to the Department of Consumer and Business Services for the purpose of performing its duties under ORS chapters 654 and 656. The information disclosed may include the name, address, number of employees and industrial classification code of an employer and payroll data of employers and employees. The information disclosed is confidential and may not be disclosed by the Department of Consumer and Business Services in any manner that would identify an employing unit or employee except to the extent necessary to carry out the department's duties under ORS chapters 654 and 656, including administrative hearings and court proceedings in which the Department of Consumer and Business Services is a party. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the Department of Consumer and Business Services.

(k) Disclose information to the Construction Contractors Board for the purpose of performing its duties under ORS chapter 701. The information disclosed to the board may include the names and addresses of employers and status of their compliance with this chapter. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the board.

(L) Disclose information to the State Fire Marshal to assist the State Fire Marshal in carrying out duties under ORS 453.307 to 453.414. The information disclosed may include the name, address, telephone number and industrial classification code of an employer. The information disclosed is confidential and may not be disclosed by the State Fire Marshal in any manner that would identify an employing unit except to the extent necessary to carry out duties under ORS 453.307 to 453.414. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the office of the State Fire Marshal.

(m) Disclose information to the Oregon Student Assistance Commission for the purpose of performing the commission's duties under ORS chapter 348 and Title IV of the Higher Education Act of 1965. The information disclosed may include the names and addresses of employers and employees and payroll data of employers and employees. The information disclosed is confidential and may not be disclosed by the commission in any manner that would identify an employing unit or employee

except to the extent necessary to carry out the commission's duties under ORS chapter 348 or Title IV of the Higher Education Act of 1965. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the commission.

(n) Disclose information to the Department of Transportation to assist the Department of Transportation in carrying out the duties of the Department of Transportation relating to collection of delinquent and liquidated debts, including taxes, under ORS 184.610 to 184.666, 184.670 to 184.733 and 805.263, ORS chapter 319 and the Oregon Vehicle Code. The information disclosed may include the names and addresses of employers and employees and payroll data of employers and employees. The information disclosed is confidential and may not be disclosed by the Department of Transportation in any manner that would identify an employing unit or employee except to the extent necessary to carry out the Department of Transportation's duties relating to collection of delinquent and liquidated debts or in auditing or reviewing any report or return required or permitted to be filed under the revenue and tax laws administered by the Department of Transportation. The Department of Transportation may not disclose any information received to any private collection agency or for any other purpose. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the Department of Transportation.

(o) Disclose to the Alcohol and Drug Policy Commission information required by the commission in evaluating and measuring the performance of alcohol and drug prevention and treatment programs under section 2 of this 2011 Act or the impact of the programs on employment. The information disclosed to the commission may include total subject wages payroll and whole hours worked. The information disclosed under this paragraph is confidential and may not be used for any other purpose. The commission may not disclose the information in any manner that would identify an employing unit or employee except to the extent necessary to carry out the commission's duties under section 2 of this 2011 Act. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the commission.

~~[(o)]~~ (p) Disclose to any person establishment level information secured pursuant to this chapter from federal, state and local government employing units. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the party requesting the information.

~~[(p)]~~ (q) Disclose to any person the industrial classification code assigned to an employing unit. If the information disclosed under this paragraph is not prepared for the use of the Employment Department, the costs of disclosing the information shall be paid by the party requesting the information.

(5) Any officer appointed by or any employee of the Director of the Employment Department who discloses confidential information, except with the authority of the director, pursuant to rules or as otherwise required by law, may be disqualified from holding any appointment or employment with the Employment Department.

(6) Any person or any officer or employee of an entity to whom information is disclosed by the Employment Department under this section who divulges or uses the information for any purpose other than that specified in the provision of law or agreement authorizing the use or disclosure may be disqualified from performing any service under contract or disqualified from holding any appointment or employment with the state agency that engaged or employed that person, officer or employee. The Employment Department may immediately cancel or modify any information sharing agreement with an entity when a person or an officer or employee of that entity discloses confidential information, other than as specified in law or agreement.

SECTION 41. ORS 660.333 is amended to read:

660.333. (1) The State Workforce Investment Board shall advise the Governor as required under section 2821 of the Workforce Investment Act of 1998 and on matters pertaining to the use of funds under section 2864 of the federal Act.

(2) As a part of the core services required by section 2864(d)(2)(E)(i) of the federal Act, the one-stop delivery system, as described in section 2864(c) of the federal Act, shall provide timely listings of all job opportunities, consistent with statute or rule, to a participant immediately upon application by the participant for services offered by the one-stop delivery system.

(3) Intensive services offered by the one-stop delivery system may include drug and alcohol rehabilitative services **meeting minimum standards established pursuant to ORS 430.357**.

(4) Local workforce investment boards shall determine whether funds will be used as provided in section 2864(e)(3) of the federal Act.

(5) Participants may receive training in accordance with section 2864 of the federal Act. In addition, a participant who is employed in a subsidized or unsubsidized job and who needs training may receive an individual training account that allows the participant to choose among training providers, except as provided in section 2864(d)(4)(G)(ii) of the federal Act.

(6) Any funds expended under ORS 660.300 to 660.364 shall be from funds appropriated by the Legislative Assembly or within any expenditure limitations placed on federal funds by the Legislative Assembly.

SECTION 42. ORS 675.523 is amended to read:

675.523. A person may not practice clinical social work unless the person is a clinical social worker licensed under ORS 675.530 or a clinical social work associate certified under ORS 675.537, except if the person is:

(1) Licensed or certified by the State of Oregon to provide mental health services, provided that the person is acting within the lawful scope of practice for the person's license or certification and does not represent that the person is a regulated social worker;

(2) Certified to provide alcohol and drug abuse prevention services, intervention services and treatment in compliance with rules adopted [*by the Director of Human Services*] under ORS 409.410 [(2)(f)] and [409.420 (1)] **430.357**, provided that the person is acting within the lawful scope of practice for the person's certification and does not represent that the person is a regulated social worker;

(3) Employed by or contracting with an entity that is certified or licensed by the State of Oregon under ORS 430.610 to 430.695 to provide mental health treatment or addiction services, provided that the person is practicing within the lawful scope of the person's employment or contract;

(4) A recognized member of the clergy, provided that the person is acting in the person's ministerial capacity and does not represent that the person is a regulated social worker; or

(5) A student in a social work graduate degree program that meets the requirements established by the State Board of Licensed Social Workers by rule.

SECTION 43. ORS 813.260 is amended to read:

813.260. (1) Courts having jurisdiction over driving while under the influence of intoxicants offenses shall designate agencies or organizations to perform the diagnostic assessment and treatment required under driving while under the influence of intoxicants diversion agreements described in ORS 813.200. The designated agencies or organizations must meet [*the*] **minimum** standards [*set by the Director of the Oregon Health Authority*] **established pursuant to ORS 430.357** to perform the diagnostic assessment and treatment of problem drinking, alcoholism and drug dependency and must be certified by the Director of the Oregon Health Authority. Wherever possible a court shall designate agencies or organizations to perform the diagnostic assessment that are separate from those that may be designated to carry out a program of treatment.

(2) Monitoring of a defendant's progress under a diversion agreement shall be the responsibility of the diagnostic assessment agency or organization. It shall make a report to the court stating the defendant's successful completion or failure to complete all or any part of the treatment program specified by the diagnostic assessment. The form of the report shall be determined by agreement between the court and the diagnostic assessment agency or organization. The court shall make the report of the diagnostic assessment agency or organization that is required by this subsection a part of the record of the case.

SECTION 44. Section 27, chapter 856, Oregon Laws 2009, is amended to read:
Sec. 27. ORS 430.250, 430.255, 430.257, 430.258 and 430.259 are repealed [*January 2, 2014*] on the effective date of this 2011 Act.

SECTION 45. (1) ORS 409.420 and 430.290 are repealed.

(2) Section 15, chapter 856, Oregon Laws 2009, as amended by section 32, chapter 856, Oregon Laws 2009, is repealed.

(3) Sections 28 and 34, chapter 856, Oregon Laws 2009, are repealed.

Passed by House June 22, 2011

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Ramona Kenady Line, Chief Clerk of House

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Bruce Hanna, Speaker of House

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Arnie Roblan, Speaker of House

Passed by Senate June 24, 2011

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Peter Courtney, President of Senate

Received by Governor:

.....M.,....., 2011

Approved:

.....M.,....., 2011

.....
John Kitzhaber, Governor

Filed in Office of Secretary of State:

.....M.,....., 2011

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Kate Brown, Secretary of State