

SB 1506 with amendments

The Central Oregon Health Council pursued the pilot program proposed in the original Senate Bill 1506 in order to provide better patient care for Oregon Health Plan patients who take prescription drugs that are classified as Schedule 7 or 11. Those drugs currently are "carved out" of capitation of MCO plans in Oregon. Because the PacificSource, the MCO in Central Oregon, does not pay for those drugs, it can't see the data on patient utilization. The Central Oregon Health Council seeks to coordinate the care of Central Oregon's Medicaid patients, and it can't achieve full coordination without seeing data about those drugs.

The Central Oregon Health Council proposed giving capitation for the drugs to PacificSource in order to collect the data and to provide better care for the patients they serve by having the ability to see all the data in real time and also the responsibility to care for all the patient needs. Because the Oregon Health Authority would be required, by statute, to pay an 8.5 percent administrative fee to PacificSource under those circumstances, the Central Oregon Health Council felt the cost would be too high for the state.

COHC proposes the following amendments, which will allow the MCO to see the data by getting it from the Oregon Health Authority instead of paying for the drugs directly. This does not allow them to enact programmatic changes at this time, but will allow them to study proposals and make projections about what could have happened.

The amendments require OHA to give data to the MCO that is part of the Central Oregon Health Council by July 1. The bill directs OHA to work with PacificSource, the MCO serving Deschutes, Crook and Jefferson Counties, to ensure the data is timely and in a useable format. The data OHA must provide is data on utilization of mental health drug classes 7 and 11, which the state pays for.

The amendments also create the Mental Health Clinical Advisory Group to study the data and develop recommendations for algorithms, proposed interventions and alternative treatments and report findings back to 2013 legislative assembly. The Mental Health Clinical Advisory Group members will be appointed jointly by the Central Oregon Health Council and the Oregon chapter of the National Alliance on Mental Illness.

Per request by the National Association of Social Workers, a licensed clinical social worker is included in membership of the Mental Health Clinical Advisory Group.