House Bill 2326

Sponsored by Representative BUCKLEY (Presession filed.)

SUMMARY

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

Modifies uses to which Oregon Health Authority may put Health System Fund moneys.

Authorizes authority to enter into contract with entity that coordinates efforts of school-based health centers for purpose of providing assistance to school-based health centers that receive certain grant moneys.

Directs authority to prepare report on cost-effectiveness of investing in and expanding grant program with respect to school-based health centers. Requires submission of report to interim committees of Legislative Assembly related to health and education on or before December 31, 2013. Sunsets January 2, 2014.

Declares emergency, effective on passage.

A BILL FOR AN ACT

2 Relating to school-based health centers; creating new provisions; amending section 1, chapter 867,

Oregon Laws 2009; and declaring an emergency.

Whereas school-based health centers are an evidence-based model of care that contain the cost of health care; and

Whereas school-based health centers utilize a cost-effective interdisciplinary team approach to delivering coordinated primary health care across physical, behavioral, emotional and social dimensions, within the context of family and community; and

Whereas school-based health centers can reduce inappropriate emergency room use, increase use of primary care and result in fewer hospitalizations among regular users; and

Whereas children who are uninsured are more likely to suffer from health problems; and

Whereas school-based health centers provide care to uninsured children; and

Whereas school-based health centers help uninsured children obtain comprehensive insurance coverage; and

Whereas school-based health centers are the first, and occasionally the only, access point for continuous and comprehensive care for young people with a variety of complex medical, behavioral and social needs; and

Whereas school-based health centers promote positive youth development by helping reduce risky behaviors associated with more serious social conditions, such as alcohol and drug abuse, juvenile crime, teen pregnancy, teen suicide and violent behaviors; and

Whereas school-based health centers support educational outcomes; and

Whereas educational achievement is a strong predictor of a person's long-term health; and

Whereas evidence shows that there is a profound connection between a student's health status and educational achievement; and

Whereas school-based health centers have been linked to decreased absenteeism and tardiness in school; and

Whereas school-based health centers have been linked to increased grade point averages among

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users of mental health services provided by the centers; and

Whereas school-based health centers that are supported by the state perform critical public health functions through the development and ongoing refinement of a system of care that meets the developmental needs of adolescents, promotes evidence-based practices for children and prioritizes public health through such activities as setting certification and performance standards, collecting and analyzing clinical data, conducting ongoing assessments and special studies and defining a statewide planning and development process; and

Whereas the development of budget priorities, the establishment of funding formulas and the contracting for state allocations to support school-based health centers is a leading priority of this state; and

Whereas the Oregon chapter of the National Assembly on School-Based Health Care advocates for local, state and national policies, programs and funding to expand and strengthen school-based health centers; and

Whereas the Oregon chapter of the National Assembly on School-Based Health Care provides technical assistance and community-specific and ongoing training to school-based health centers; now, therefore,

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

SECTION 1. Section 1, chapter 867, Oregon Laws 2009, as amended by section 46, chapter 828, Oregon Laws 2009, section 2, chapter 73, Oregon Laws 2010, and section 31, chapter 602, Oregon Laws 2011, is amended to read:

- Sec. 1. (1) The Health System Fund is established in the State Treasury, separate and distinct from the General Fund. Interest earned by the Health System Fund shall be credited to the fund.
- (2) Amounts in the Health System Fund are continuously appropriated to the Oregon Health Authority for the purpose of:
- (a) Funding the Health Care for All Oregon Children program established in ORS 414.231, health services described in ORS 414.025 (8)(a) to (j) and other health services[.]; and
 - (b) Providing grants under ORS 413.225 to school-based health centers.
 - (3) The authority may also use moneys in the fund [may also be used by the authority] to:
- (a) Provide grants under ORS 413.225 to community health centers and safety net clinics that are not school-based health centers [under ORS 413.225].
- (b) Pay refunds due under section 41, chapter 736, Oregon Laws 2003, and under section 11, chapter 867, Oregon Laws 2009.
- (c) Pay administrative costs incurred by the authority to administer the assessment in section 9, chapter 867, Oregon Laws 2009.
- (d) Provide health services described in ORS 414.025 (8) to individuals described in ORS 414.025 (3)(f)(B).
 - [(3)] (4) The authority shall develop a system for reimbursement by the authority to the Office of Private Health Partnerships out of the Health System Fund for costs associated with administering the private health option pursuant to ORS 414.826.
 - <u>SECTION 2.</u> (1) The Oregon Health Authority may enter into a contract with an entity that coordinates the efforts of school-based health centers for the purpose of providing assistance to school-based health centers that receive grant moneys under ORS 413.225.
 - (2) A contract entered into under this section must require the entity to:
 - (a) Provide technical assistance and community-specific ongoing training to school-based health centers, school districts and education service districts;

- (b) Assist school-based health centers in improving business practices, including practices related to billing and efficiencies; and
- (c) Assist school-based health centers in expanding their relationships with coordinated care organizations, sponsors of medical care for school-age children and other community-based providers of school-based health and mental health services.
- SECTION 3. (1) The Oregon Health Authority, in consultation with the Oregon chapter of the National Assembly on School-Based Health Care, shall prepare a report on the cost-effectiveness of investing in and expanding the grant program described in ORS 413.225 with respect to school-based health centers. The report shall include an analysis of and recommendations for the optimum number of school districts that need to receive services from a school-based health center in order to effectively expand the grant program and the number of existing school-based health centers that could provide those services.
- (2) The authority shall submit the report, and may submit recommendations for legislation, to the interim committees of the Legislative Assembly related to health and education on or before December 31, 2013.

SECTION 4. Section 3 of this 2013 Act is repealed on January 2, 2014.

<u>SECTION 5.</u> This 2013 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2013 Act takes effect on its passage.

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