

**Fiscal:** Has minimal fiscal impact

**Revenue:** No Revenue Impact

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**Action Date:** 06/24/15

**Action:** Do Pass As Amended And Be Printed Engrossed.

**Meeting Dates:** 06/22, 06/24

**Vote:**

Yeas: 8 - Barnhart, Gilliam, Hoyle, McLane, Nosse, Rayfield, Smith Warner, Wilson

Exc: 1 - Kennemer

**Prepared By:** Erin Seiler, Committee Administrator

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**WHAT THE MEASURE DOES:**

Establishes behavioral health homes to be used by coordinated care organizations (CCOs). Requires Oregon Health Authority (OHA) set standards for achieving integration of behavioral and physical health services in patient-centered primary care homes and behavioral health homes via rulemaking. Permits use of applicable billing codes by providers in patient-centered primary care homes and behavioral health homes. Creates necessary definitions, including "integrated behavioral health care" and "behavioral health home." Declares emergency, effective on passage.

**ISSUES DISCUSSED:**

- Integration of treatment for substance use, mental health and physical health in behavioral health homes
- Increased risk of physical health problems for those with mental health or substance use issues
- Benefits of behavioral health homes and coordinated care organizations
- Importance of integration for both hospitals and patients

**EFFECT OF COMMITTEE AMENDMENT:**

Resolves conflict with House Bill 2419 (2015).

**BACKGROUND:**

A coordinated care organization (CCO) is a network of all types of health care providers (physical health care, addictions and mental health care and sometimes dental care providers) who have agreed to work together in their local communities to serve people who receive health care coverage under the Oregon Health Plan (Medicaid). CCOs are focused on prevention and helping people manage chronic conditions like diabetes, which helps reduce unnecessary emergency room visits and gives people support to be healthy. Today, there are 16 CCOs operating in communities around Oregon.

CCOs are local entities that have one budget that grows at a fixed rate for mental, physical and dental care. They are accountable for the health outcomes of their population and are governed by a partnership among health care providers, community members and stakeholders.

Senate Bill 832-C establishes behavioral health homes to be used by CCOs and requires the Oregon Health Authority set standards for achieving integration of behavioral health care with other services CCOs deliver through patient-centered primary care homes and behavioral health homes.