

STAFF MEASURE SUMMARY

House Committee On Rules

Fiscal: No Fiscal Impact

Revenue: No Revenue Impact

Action Date: 07/01/15

Action: Do Pass.

Meeting Dates: 07/01

Vote:

Yeas: 7 - Gilliam, Hoyle, Kennemer, McLane, Nosse, Smith Warner, Wilson

Exc: 2 - Barnhart, Rayfield

Prepared By: Erin Seiler, Committee Administrator

WHAT THE MEASURE DOES:

Replaces “county” with “community mental health program” and “community mental health program director” throughout statutes governing process to initiate commitment of persons with mental illness to align responsibility for payment of associated costs. Accounts for possibility of public or private entity under contract with Oregon Health Authority to provide mental health programs. Establishes that community mental health program is responsible for cost when state funds provided to community mental health program are exhausted. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Provisions of measure

EFFECT OF COMMITTEE AMENDMENT:

No amendment.

BACKGROUND:

Current statutes that establish responsibility for payment of costs associated with commitment processes make references that may no longer be current or uniform among counties, since the creation of coordinated care organizations (CCOs) as part of the continuing health care transformation in Oregon.

A 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.

The 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 465-B replaces “county” with “community mental health program” and “community mental health program director” throughout the statutes that govern the process to initiate commitment of persons with mental illness to align responsibility for the payment of associated costs, and accounts for the possibility that a public or private entity may be under contract with Oregon Health Authority to provide mental health programs.