

Requested by Senator COURTNEY

**PROPOSED AMENDMENTS TO
A-ENGROSSED HOUSE BILL 2300**

1 On page 1 of the printed A-engrossed bill, line 2, after the first semicolon
2 delete the rest of the line and delete line 3 and insert “and declaring an
3 emergency.”.

4 In line 5, delete “Section 2 of this 2017 Act is” and insert “Sections 2 and
5 3 of this 2017 Act are”.

6 Delete lines 6 through 26 and delete pages 2 and 3 and insert:

7 **“SECTION 2. (1) The Mental Health Clinical Advisory Group is es-**
8 **tablished in the Oregon Health Authority. The Mental Health Clinical**
9 **Advisory Group shall develop evidence-based algorithms for mental**
10 **health treatments with mental health drugs based on:**

11 **“(a) The efficacy of the drug;**

12 **“(b) The cost of the drug;**

13 **“(c) Potential side effects of the drug;**

14 **“(d) A patient’s profile; and**

15 **“(e) A patient’s history with the drug.**

16 **“(2) The Mental Health Clinical Advisory Group consists of 15**
17 **members appointed by the authority as follows:**

18 **“(a) Two psychiatrists with active community practices;**

19 **“(b) One child and adolescent psychiatrist;**

20 **“(c) Two licensed clinical psychologists;**

21 **“(d) One psychiatric nurse practitioner with prescribing privileges;**

- 1 “(e) Two primary care providers;
- 2 “(f) Two pharmacists, one of whom must have experience in dis-
- 3 pensing to long term care facilities and to patients with special needs;
- 4 “(g) Two individuals, representing statewide mental health advo-
- 5 cacy organizations for children and adults with mental illness, who
- 6 have experience as consumers of mental health services or as a family
- 7 member of a consumer of mental health services;
- 8 “(h) Two individuals each representing a coordinated care organ-
- 9 ization; and
- 10 “(i) One consumer of mental health services or one family member
- 11 of a consumer of mental health services.
- 12 “(3) The Mental Health Clinical Advisory Group shall, in developing
- 13 treatment algorithms, consider all of the following:
- 14 “(a) Peer-reviewed medical literature;
- 15 “(b) Observational studies;
- 16 “(c) Studies of health economics;
- 17 “(d) Input from patients and physicians; and
- 18 “(e) Any other information that the group deems appropriate.
- 19 “(4) The Mental Health Clinical Advisory Group shall make recom-
- 20 mendations to the authority and the Pharmacy and Therapeutics
- 21 Committee including but not limited to:
- 22 “(a) Implementation of evidence-based algorithms.
- 23 “(b) Any changes needed to any preferred drug list used by the au-
- 24 thority.
- 25 “(c) Practice guidelines for the treatment of mental health disor-
- 26 ders with mental health drugs.
- 27 “(5) Recommendations of the Mental Health Clinical Advisory
- 28 Group shall be posted to the website of the authority no later than 30
- 29 days after the group approves the recommendations.
- 30 “(6) The Mental Health Clinical Advisory Group shall report to the

1 interim committees of the Legislative Assembly related to health:

2 “(a) No later than December 31, 2017, its progress in developing
3 evidence-based algorithms for mental health drugs; and

4 “(b) No later than December 31, 2018, its final recommendations
5 under subsection (4) of this section and any legislative changes needed
6 to fully implement the recommendations.

7 “(7) A member of the Mental Health Clinical Advisory Group is not
8 entitled to compensation but may be reimbursed for necessary travel
9 expenses incurred in the performance of the member’s official duties.

10 “(8) The Mental Health Clinical Advisory Group shall select one of
11 its members as chairperson and another as vice chairperson, for terms
12 and with duties and powers necessary for the performance of the
13 functions of the group.

14 “(9) A majority of the members of the Mental Health Clinical Ad-
15 visory Group constitutes a quorum for the transaction of business.

16 “(10) The Mental Health Clinical Advisory Group shall meet at least
17 once every two months at a time and place determined by the chair-
18 person. The group also may meet at other times and places specified
19 by the call of the chairperson or of a majority of the members of the
20 group. The group may meet in executive session when discussing fac-
21 tors listed in subsection (1) of this section.

22 “(11) In accordance with applicable provisions of ORS chapter 183,
23 the Mental Health Clinical Advisory Group may adopt rules necessary
24 for the administration of this section.

25 “(12) All agencies of state government, as defined in ORS 174.111,
26 are directed to assist the Mental Health Clinical Advisory Group in the
27 performance of duties of the group and, to the extent permitted by
28 laws relating to confidentiality, to furnish information and advice the
29 members of the group consider necessary to perform their duties.

30 **SECTION 3.** (1) As used in this section, ‘mental health drug’

1 means a type of legend drug defined by the Oregon Health Authority
2 by rule that includes but is not limited to:

3 “(a) Therapeutic class 7 ataractics-tranquilizers; and

4 “(b) Therapeutic class 11 psychostimulants-antidepressants.

5 “(2) Notwithstanding ORS 414.334, the authority shall reimburse the
6 cost of a mental health drug prescribed for a medical assistance re-
7 cipient if federal financial participation in the cost is available.

8 “SECTION 4. Section 3 of this 2017 Act becomes operative on Jan-
9 uary 2, 2018.

10 “SECTION 5. (1) Section 2 of this 2017 Act is repealed on December
11 31, 2018.

12 “(2) Section 3 of this 2017 Act is repealed on January 2, 2020.

13 “SECTION 6. This 2017 Act being necessary for the immediate
14 preservation of the public peace, health and safety, an emergency is
15 declared to exist, and this 2017 Act takes effect on its passage.”.

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