# HB 2624 STAFF MEASURE SUMMARY

## **House Committee On Health Care**

**Prepared By:** Oliver Droppers, LPRO Analyst

Sub-Referral To: Joint Committee On Ways and Means

Meeting Dates: 2/5

### WHAT THE MEASURE DOES:

Creates the Emergency Department Boarding Pilot Project in the Oregon Health Authority (OHA). Requires OHA grant funds to hospitals to provide treatment for individuals. Establishes a 13-member Task Force on Emergency Department Boarding.

REVENUE: May have revenue impact, but no statement yet issued. FISCAL: May have fiscal impact, but no statement yet issued.

### **ISSUES DISCUSSED:**

### **EFFECT OF AMENDMENT:**

No amendment.

### **BACKGROUND:**

Oregon State University (OSU) released a legislatively mandated report in 2016 highlighting the issue of "boarding" patients with mental illness in hospital emergency departments (EDs) (Senate Bill 5526, 2015). "Boarding" refers to patients with mental illnesses in a hospital ED who are waiting for beds in appropriate settings. The report identified factors that contribute to ED "boarding," outlined the impact of the problem, including 14.6 percent of ED visits attributed to psychiatric reasons, and proposed nine potential solutions. The OSU researchers found that during a one-year period, 2.1 percent of all hospital ED visits were psychiatric ED boarding episodes (29,763 visits); average boarding time for psychiatric and non-psychiatric visits were 18 and 17 hours respectively; and the cost of an ED psychiatric visit was higher than average per-visit cost. Identified causes of ED "boarding" are lack of community outpatient treatment and crisis response services, severity of psychiatric conditions, and limited inpatient resources.

House Bill 2624 establishes a hospital psychiatric boarding pilot project; creates a task force on hospital psychiatric boarding.