SB 141 -1 STAFF MEASURE SUMMARY

Senate Committee On Health Care

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Meeting Dates: 1/28, 1/30, 4/1

WHAT THE MEASURE DOES:

Requires the Oregon Health Authority (OHA) to issue grants to hospitals in the state for the purpose of establishing and maintaining a process for providing caring contact to patients who present in the emergency department with suicidal ideation or attempted suicide. Allows OHA to establish by rule the procedures by which a hospital may apply for grants. Requires OHA to study the barriers within each community in the state that limit the availability of appropriate follow-up care for a patient released or discharged from a hospital following treatment for a behavioral health crisis. Requires OHA to report to the Legislative Assembly by October 15, 2020, recommendations for increasing access to providers in each community to meet the needs of each patient released from an emergency department following treatment for a behavioral health crisis. Appropriate \$4,000,000 to the OHA out of the General Fund. Declares emergency, effective on passage.

REVENUE: No revenue impact
FISCAL: Fiscal statement issued

ISSUES DISCUSSED:

- Potential cost
- Current services available/offered
- Provisions of House Bill 3090

EFFECT OF AMENDMENT:

-1 Replaces measure.

BACKGROUND:

The Oregon Health Authority's (OHA) 2015-17 budget (Senate Bill 5526) included a budget note that required the OHA to report to the 2016 legislative session regarding the problem of "boarding" of patients with mental illness in hospital emergency departments while the patients wait for a bed in an appropriate setting. In response to the direction given in the budget note, OHA contracted with Oregon State University's College of Public Health and Human Services to conduct a study on "boarding" in Oregon hospital emergency departments (EDs). Completed in October 2016, the study found that psychiatric patients receive sub-optimal care in EDs; "boarding" negatively impacts the care of other ED patients by reducing ED capacity and increasing pressure on ED staff; and, "boarding" place significant financial strain on hospitals. The report made nine recommendations:

- Quantify and regularly monitor the extent of boarding
- Expand community health services
- Improve processes to restore individuals unable to aid and assist in their own defense
- Improve psychiatric services for individuals in EDs
- Provide alternatives to inpatient care
- Improve transitions for patients in community acute care and Oregon State Hospital
- Provide supportive services such as supported employment and substance use disorder treatment
- Promote insurance and health services reimbursement changes to incentivize community services
- Increase the transparency of waitlists for inpatient and Oregon State Hospital Beds

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Senate Bill 141 requires OHA to establish a statewide mental health crisis support access crisis line to provide assistance to hospital staff treating patients experiencing a behavioral health crisis. The bill also requires OHA to report back to the Legislative Assembly on community access and barriers to follow-up care for patients discharged from an emergency department after experiencing a behavioral health crisis.