

FISCAL IMPACT OF PROPOSED LEGISLATION

80th Oregon Legislative Assembly – 2019 Regular Session
Legislative Fiscal Office

Measure: SB 134 - A2

*Only Impacts on Original or Engrossed
Versions are Considered Official*

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Date: May 14, 2019

Measure Description:

Requires coordinated care organizations to publish on website document to educate members regarding treatment options and support resources available for members who have mental illnesses or substance use disorders.

Government Unit(s) Affected:

Oregon Health Authority (OHA)

Summary of Fiscal Impact:

Costs related to the measure are indeterminate, at this time, but anticipated to be minimal - See explanatory analysis.

Analysis:

SB 134 with the -A2 amendment requires coordinated care organizations (CCOs) to publish on their websites documents to educate members regarding treatment options and support resources available for members who have mental illnesses or substance use disorders. The bill requires the Oregon Health Authority (OHA) to adopt rules regarding coordinated care organizations' approach to addressing behavioral health care. In addition, the bill:

- Authorizes OHA to develop uniform contracting standards for the purchase of health care, including standards that accept and consider tribal-based practices for mental health and substance abuse prevention, counseling and treatment for persons who are Native American or Alaska Native as equivalent to evidence-based practices; and
- Stipulates that the medical assistance program must consider tribal-based practices for mental health and substance abuse prevention, counseling and treatment services for members who are Native American or Alaska Native as equivalent to evidence-based practices for purposes of meeting standards of care and shall reimburse for those tribal-based practices.

The Oregon Health Authority will use existing staff and resources to comply with the provisions of the bill, including developing codes and configuring the Medicaid Management Information System (MMIS) to allow billing for tribal best practices. The Medicaid reimbursement for these services is anticipated to be 100% federal funds, however the amount of additional federal Medicaid reimbursement resulting from passage of this bill is indeterminate, at this time.