

## HB 4082 -1, -4 STAFF MEASURE SUMMARY

### House Committee On Behavioral Health

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**Prepared By:** Zoe Larmer, LPRO Analyst

**Sub-Referral To:** Joint Committee On Ways and Means

**Meeting Dates:** 2/4, 2/6, 2/11

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#### WHAT THE MEASURE DOES:

Establishes the Behavioral Health Road Map Commission in the Legislative Assembly. Establishes membership, quorum, voting, meeting, and staffing requirements. Directs the Joint Commission to explain elements of Oregon's Behavioral Health Care system as it currently exists, define the attributes of an ideal health care system, estimate expenditures and identify sources of funding, recommend revenue proposals, highlight workforce needs and define outcome measurements. Specifies the Commission is to link with the planning and control functions of the executive branch and engage in intragovernmental collaboration. Directs the Legislative Policy and Research Office to provide staff support.

Requires the Commission to submit preliminary budget and policy recommendations no later than November 1, 2020; submit policy implementation recommendations no later than September 15, 2022. Commission is to be fully operational by January 23, 2023 and report to the Legislative Assembly by no later than September 15th of every even numbered year. Declares emergency, effective on passage.

#### ISSUES DISCUSSED:

- Possible amendments altering Commission membership to address diversity, equity, and tribal representation
- Participation of consumers
- Coordination with other boards engaged in behavioral health policy

#### EFFECT OF AMENDMENT:

-1 Modifies membership by adding the Chief Justice of Oregon Supreme Court or their designee; replaces reference for the Oregon Health Authority's (OHA) "director of behavioral health programs" with "Director" of OHA.

*REVENUE: Revenue impact statement issued: no impact.*

*FISCAL: Fiscal impact statement issued: fiscal impact*

-4 Modifies whereas statements. Adds "community-based" to the ideal behavioral health care system. Modifies terms for appointed members; allows OHA Director to serve without a term limit.

*REVENUE: Revenue impact statement issued: no impact.*

*FISCAL: Fiscal impact statement issued: fiscal impact*

#### BACKGROUND:

According to Mental Health America, among 15 measures compiled from data collected across all 50 states used to assess prevalence of mental illness and substance use, Oregon ranks at the bottom - 50th. Adults and youth in Oregon have higher rates of any mental illness (AMI) and substance use disorder (SUB) compared to other states, and ranks 24th among access to treatment, quality and costs. Oregon's behavioral health system is comprised of public and private entities that provide substance use and mental health services including inpatient hospitalization, crisis services, intensive case management, outpatient and peer-support services, and prevention, among others. The components of the behavioral health system are many and multi-faceted, involving the Oregon State Hospital, acute hospitals, community treatment centers, the criminal justice system, state and local

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housing programs, and K-12 educational settings.

According to the Oregon Health Authority (2019), as of 2019 there were 28 workgroups and advisory boards in Oregon related to behavioral health. One of these boards, the Behavioral Health Advisory Council, created by Governor Brown in October 2019 through Executive Order 19-06 is tasked with recommended an action plan to improving the behavioral health system for youth and adults with serious mental illness including individuals with co-occurring substance use disorders.

House Bill 4082 establishes a joint legislative commission to design a future integrated behavioral health system in Oregon.