

# Senate Bill 1553

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## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires Oregon Health Authority, under direction of Oregon Health Policy Board and in collaboration with specified stakeholder groups, to identify, assess and prepare report on regulatory and policy barriers to effective and timely behavioral health treatment for individuals with co-occurring disorders. Requires authority to submit report and recommendations for legislation to address barriers to interim committees and subcommittees of Legislative Assembly related to health and mental health.

Sunset on January 2, 2022.

Declares emergency, effective on passage.

## A BILL FOR AN ACT

1  
2 Relating to behavioral health care; and declaring an emergency.

3       Whereas regulatory, policy and administrative barriers currently exist that do not allow for effective utilization of Oregon's behavioral health workforce to treat individuals with mental health disorders and, in particular, individuals with co-occurring mental health disorders; now, therefore,

6 **Be It Enacted by the People of the State of Oregon:**

7       **SECTION 1. (1) As used in this section:**

8       **(a) "Behavioral health treatment" means:**

9       **(A) Outpatient behavioral health services and supports for children and adults;**

10       **(B) Intensive treatment services for children;**

11       **(C) Outpatient and residential substance use disorder treatment services;**

12       **(D) Detoxification services;**

13       **(E) Outpatient and residential problem gambling treatment services; or**

14       **(F) Other services or supports necessary to treat substance use disorder, problem gambling or other mental health issues.**

16       **(b) "Co-occurring disorders" means a diagnosis of a mental health disorder along with a diagnosis of substance use disorder or problem gambling.**

18       **(2) The Oregon Health Authority, under the direction of the Oregon Health Policy Board, and in collaboration with individuals representing appropriate state agencies and licensing boards, behavioral health treatment providers, institutions of higher education, coordinated care organizations, community mental health programs and consumers of mental health treatment, shall identify, assess and prepare a report on the regulatory and policy barriers that limit access to effective and timely treatment of co-occurring disorders. The report must include but is not limited to:**

25       **(a) Recommendations for the development of individual and facility licensing and credentialing to treat co-occurring disorders;**

27       **(b) The estimated costs for implementing an enhanced Medicaid billing code that takes**

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 into account the increased complexity in providing services to individuals with co-occurring  
2 disorders;

3 (c) The paperwork requirements and other administrative barriers identified by the au-  
4 thority and stakeholders that limit access to appropriate behavioral health treatment for  
5 individuals with co-occurring disorders; and

6 (d) Recommendations for improving the registration of and access to peer support spe-  
7 cialists and peer wellness specialists, as defined in ORS 414.025.

8 (3) No later than September 15, 2020, the authority shall submit to the interim commit-  
9 tees and subcommittees of the Legislative Assembly related to health and mental health:

10 (a) The report described in subsection (2) of this section;

11 (b) A description of the steps the authority has taken to reduce barriers to access that  
12 are identified in the report; and

13 (c) Recommendations for comprehensive legislation, for the 2021 regular session of the  
14 Legislative Assembly, necessary to ensure that individuals with co-occurring disorders have  
15 access to timely and effective treatment.

16 SECTION 2. Section 1 of this 2020 Act is repealed on January 2, 2022.

17 SECTION 3. This 2020 Act being necessary for the immediate preservation of the public  
18 peace, health and safety, an emergency is declared to exist, and this 2020 Act takes effect  
19 on its passage.

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