HB 2086 -1, -2, -4 STAFF MEASURE SUMMARY

House Committee On Behavioral Health

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Sub-Referral To: Joint Committee On Ways and Means

Meeting Dates: 3/17, 4/12

WHAT THE MEASURE DOES:

Directs OHA to design a statewide crisis system. Appropriates General Fund money to the Oregon Health Authority (OHA) to establish specified behavioral health programs. Directs OHA to continually evaluate and revise administrative rules governing behavioral health programs and services to reduce the administrative burden of documentation for providers seeking certificates of approval. Directs OHA to create a behavioral health incentive fund for recruitment and retention in the behavioral health care workforce to increase the number of people of color, tribal members and rurally based workers. Requires OHA to increase access to services for rural and underserved communities, implement and sustain culturally based practices, and develop curricula for the behavioral health workforce in specific areas. Requires OHA report to Legislative Assembly no later than February 1, 2022 with recommendations on achieving living wage for behavioral health care workers. Transfers Housing for Mental Health Fund from the Housing and Community Services Department to OHA. Directs OHA to adopt rules for coordinated care organizations to provide housing navigation services and address the social determinants of health. Appropriates General Fund money to the Mental Health Fund to provide incentive funding for the development of new housing including long term care, short term respite care, and independent and integrated housing. Appropriates General Fund money to OHA to increase funding for rental assistance, to create a residential fund to fill gaps in the residential continuum, aid transitions from inpatient care or correctional facilities to the community by providing residential support for those who do not meet the criteria for assertive community treatment, and to fund three secure residential treatment facilities. Declares emergency, effective on passage.

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

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

ISSUES DISCUSSED:

- Need for increased behavioral health services in Oregon
- History of the Governor's Behavioral Health Advisory Council
- Possible amendments
- Overlap with other legislation

EFFECT OF AMENDMENT:

-1 Replaces measure. Appropriate General Fund money to the Oregon Health Authority (OHA) to expend on programs responsive to and driven people of color, tribal communities, and people with lived experience; and increasing funding to reintegrate criminal defendants into community who have been found unfit to proceed in a criminal proceeding due to mental incapacity. Defines behavioral health treatment and co-occurring disorder. Establishes a task force to develop educational curriculum, training, and workforce development programming for providers of co-occurring disorder treatment. Directs OHA and the Higher Education Coordinating Commission, in collaboration with all state licensing boards, to convene task force. Sunsets task force on December 31, 2024. Directs OHA in collaboration with task force to establish requirements for providers and program that contract with the authority providing co-occurring disorder treatment. Requires OHA to reimburse the cost of co-occurring disorder treatment at an enhanced rate and provide one-time start up funding for behavioral health treatment

programs that provide integrated co-occurring disorder treatment. Appropriates \$10.2 million dollars of General Fund Money. Directs OHA to conduct study of reimbursement rate for co-occurring disorder treatment report recommendations for future rate development to the Legislative Assembly by December 1, 2022. Directs OHA to continually evaluate and revise administrative rules governing behavioral health programs and services to reduce the administrative burden of documentation for providers seeking certificates of approval. Requires OHA report recommendations of achieving a living wage for behavioral health workers to the Legislative Assembly by February 1, 2022. Directs OHA create workforce training and establish endorsement s and certifications for behavioral health providers of co-occurring disorder treatment. Directs OHA to adopt rules for coordinated care organizations to provide housing navigation services and address the social determinants of health. Replaces terms.

- -2 Replaces measure. Appropriate General Fund money to the Oregon Health Authority (OHA) to expend on programs responsive to and driven people of color, tribal communities, and people with lived experience; and increasing funding to reintegrate criminal defendants into community who have been found unfit to proceed in a criminal proceeding due to mental incapacity. Directs OHA to reimburse the cost of co-occurring disorder treatment at an enhanced rate and to conduct study of reimbursement rate for co-occurring disorder treatment report recommendations for future rate development to the Legislative Assembly by December 1, 2022. Appropriates \$10.2 in General Fund money for this purpose. Directs OHA to continually evaluate and revise administrative rules governing behavioral health programs and services to reduce the administrative burden of documentation for providers seeking certificates of approval. Requires OHA report recommendations of achieving a living wage for behavioral health workers to the Legislative Assembly by February 1, 2022. Directs OHA create workforce training and establish endorsement s and certifications for behavioral health providers of co-occurring disorder treatment. Directs OHA to adopt rules for coordinated care organizations to provide housing navigation services and address the social determinants of health. Replaces terms. Directs intensive behavioral health treatment providers to collect data on the demand for and capacity to provide treatment of children and adolescents presenting with high acuity behavioral health needs. Requires data be provided to the Oregon Health Authority. Defines terms. Appropriates \$400,000 of General Fund money for this purpose. Requires OHA report findings to Legislative Assembly by December 1, 2022.
- -4 Allows Oregon Health Authority (OHA) to establish minimum rates of reimbursement paid by OHA or coordinated care organizations (CCOs) to addiction treatment providers. Directs OHA to consider increasing amount of global payment to CCO for addiction services. Directs OHA to increase aggregate fee-for-service reimbursement rates for addiction treatment providers by 25 percent above rates on effective date. Allows OHA to require providers report data or other information regarding the use of increased payments quarterly. Directs OHA to ensure reimbursement paid to addiction treatment provider is equivalent to reimbursement paid to mental health treatment providers. Requires OHA monitor impact of increased rates on improving low barrier access to addiction treatment and improving ability of addiction treatment providers to expand staff and improve staff experience. Requires OHA seek any form of approval from the Centers for Medicare and Medicaid Services and notify Legislative Counsel upon receipt of approval or denial. Directs OHA to contract with a third party vendor to survey medical assistance recipients about their experiences with behavioral health care and services using a standardized survey tool

BACKGROUND:

The Governor's Behavioral Health Advisory Council (Council) was established by Executive Order in October 2019 for the purpose of developing recommendations aimed at improving access to effective behavioral health services and supports for all Oregon adults and transitional-aged youth with serious mental illness or co-occurring mental illness and substance use disorders. The Council met 12 times between October 2019 and September 2020 and

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submitted a report outlining their recommendations to the Oregon State Legislature In October 2020. HB 2086 codifies the recommendations of the council.