FISCAL IMPACT OF PROPOSED LEGISLATION

81st Oregon Legislative Assembly – 2021 Regular Session Legislative Fiscal Office

Only Impacts on Original or Engrossed Versions are Considered Official

Measure: HB 2086 - 4

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Measure Description:

Appropriates moneys to Oregon Health Authority to undertake specified steps to address needs of individuals with behavioral health disorders for services, treatment and housing.

Government Unit(s) Affected:

Department of Human Services (DHS), Oregon Health Authority (OHA)

Analysis:

This fiscal impact statement is for the purpose of transmitting the measure from the House Committee on Behavioral Health to the Joint Committee on Ways and Means.

HB 2046 requires the Oregon Health Authority (OHA) to design a statewide crisis system to consolidate exiting crisis lines, offer no barrier emotional support, offer a centralized search engine for locating providers, and provide a registry of available residential treatment placements. The measure includes a blank General Fund appropriation for OHA which may be expended for programs that are directly responsive to and driven by people of color, tribal communities, and people of lived experience, which includes medical assistance reimbursement of tribal-based practices and a pilot project to operate three non-clinical peer run respite centers; expansion of the Early Assessment and Support Alliance program; doubling the program size of the Young Adult Hubs; funding the nine existing Certified Community Behavioral Health Clinic demonstration sites; and increasing funding to reintegrate into the community criminal defendants have been unfit to proceed in a criminal proceeding due to a mental incapacity.

The measure requires the Oregon Health Authority to report to the interim committees of the Legislative Assembly related to behavioral and mental health no later than February 1, 2022 on OHA's progress in developing a sustainable payment model for certified community behavioral health clinics.

OHA is directed to create a behavioral health incentive fund for recruitment and retention in the behavioral health care workforce and expand funding for other incentives for workers in the behavioral health field. OHA is to report to the interim committees of the Legislative Assembly related to behavioral and mental health no later than February 1, 2022 on recommendations to achieve a living wage for behavioral health care workers.

The - 4 amendment states that OHA, with the advice of stakeholders and the Alcohol and Drug Policy Commission, may establish minimum rates of reimbursement paid by OHA or coordinated care organizations to addiction treatment providers to ensure access by medical assistance recipients to all modalities of addiction treatment across the state. OHA is to consider increasing the amount of the global payment to coordinated care organizations for addiction services. OHA is to increase the aggregate fee-for-service reimbursement rate for addiction treatment providers by 25% above the rates paid currently, but withhold 10% of the increase as performance pay that will be paid to providers each year for achieving diversity, vacancy reduction, retention, and achieving goals identified by the authority. OHA must ensure that the reimbursement paid to addiction treatment providers is equal to the reimbursement paid to mental health treatment providers that have equivalent levels of education and training. OHA and the Alcohol and Drug Policy Commission are required to

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monitor the impact of increased rates on improving low barrier access to addiction treatment. The measure also requires 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. This part of the measure becomes operative on January 1, 2022 or the date the Centers for Medicare and Medicaid Services provide approval, if necessary, to carry out this portion of the act.

The introduced measure contains two additional blank General Fund appropriations to OHA. One of these appropriations must be deposited in the Housing for Mental Health Fund for the purpose of providing incentive funding for the development of new housing. The second appropriation is for increasing funding for rental assistance and improving housing stability.

A more complete fiscal analysis on the measure will be prepared as the measure is considered in the Joint Committee on Ways and Means.

Further Analysis Required

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