# 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 2585

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## **Measure Description:**

Imposes requirements upon mental health treatment professionals and programs to ensure culturally and linguistically affirmative mental health services for individuals who are deaf, deaf-blind or hard of hearing.

## **Government Unit(s) Affected:**

Occupational Therapy Licensing Board (OTLB), Board of Licensed Social Workers (BLSW), Oregon State Board of Nursing (OSBN), Department of Education (ODE), Higher Education Coordinating Commission (HECC), Oregon Board of Psychology, Board of Examiners for Speech-Language Pathology and Audiology (BSPA), Oregon Health Authority (OHA), Board of Licensed Professional Counselors and Therapists (BLPCT), Oregon Medical Board (OMB), Oregon Commission for the Blind (OCB), Mental Health Regulatory Agency (MHRA), Department of Corrections (DOC), Oregon Youth Authority (OYA)

# **Summary of Fiscal Impact:**

Costs related to the measure are indeterminate at this time - See explanatory analysis.

#### **Analysis:**

HB 2585 requires the Oregon Health Authority (OHA) to make mental health programs available across the state that provide culturally and linguistically affirmative mental health services to deaf, deaf-blind, and hard of hearing individuals in their primary communication mode, style, or language. The scope and cost of the work required of OHA are not entirely known at this time.

The bill directs OHA to do the following in relation to mental health services provided to individuals who are deaf, deaf-blind, or hard of hearing:

- Develop, train, and retain a qualified and licensed mental health workforce sufficient to ensure appropriate culturally and linguistically affirmative mental health services are available;
- Monitor certain state-funded services and facilities to ensure that all deaf, deaf-blind, and hard of hearing individuals are served;
- Allocate adequate funding to provide accessible mental health services based on individuals' communication needs;
- Address the unmet need for mental health professionals adequately trained in communication modes necessary to serve clients; and
- Authorize the use of technology in treatment to allow a patient to receive appropriate care.

The measure also requires a qualified staff member or team to be assigned to individuals who are deaf, deafblind, or hard of hearing for coordinating the individual's treatment plan upon admission to a hospital or residential treatment center. It further directs hospitals and residential treatment centers to ensure these individuals are provided direct access to licensed mental health treatment professionals fluent in the communication style or language preferred by the individual, or free language assistance if mental health professionals cannot provide the needed communication.

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OHA must appoint a 10-member advisory committee to develop and implement statewide access to mental health treatment as required under this measure. OHA is directed to provide an administrative assistant to assist the committee. The measure declares an emergency and takes effect on passage.

### **Potential OHA Costs**

The largest OHA cost that can be estimated at a high level at this time is in the Oregon State Hospital (OSH), and would result from the provision of adequate services for the hospital's deaf, deaf-blind, and hard of hearing patients and management of their individual treatment plans. OSH does not have the required number and variety of qualified mental health treatment staff with the level of sign language fluency or other modes of communication envisioned by the bill. This would require the addition of a position to provide diagnostic testing of incoming admissions, as well as contracted staff to communicate the day to day care of individuals needing this support. The hospital currently has three patients who would qualify for these services. If each of these patients require an interpreter service every day of the year, the hospital's biennial costs would total up to \$6.3 million General Fund for 24 hours per day based on an average contractual rate of \$80 per hour per interpreter, and after accounting for approximately \$720,000 in expenses already budgeted for more narrowly scoped services.

Additional costs would be necessary for a position to work with the advisory group to develop recommendations for improving access to behavioral health services across the state for the client population. This position would be hired as a limited-duration Operations and Policy Analyst 3 for two years at the cost of \$222,840. Estimated expenses of \$120,000 are also related to outreach and communications expenses, which includes resources to communicate with deaf, deaf-blind, and hard of hearing individuals.

While some costs resulting from the measure can be estimated for OHA such as staffing needs and services directly provided by the agency, the overall fiscal impact of this measure remains indeterminate. Key elements of how the requirements will be implemented remain unclear, including the extent to which OHA will need to make mental health programs available across the state for this population, the type of statewide infrastructure needed to develop, train, and retain a sufficient licensed mental health professional workforce, and how OHA will address the unmet need for services in certain geographic areas. The number of Oregon Health Plan clients who are deaf, deaf-blind, or hard of hearing who would the use mental health services outlined in this measure also remains unknown.

# **Other Agencies**

There is no fiscal impact reported by any of the state health licensing boards or higher education institutions, the Department of Corrections, Oregon Youth Authority, Department of Education, Higher Education Coordinating Commission, Department of Human Services, or the Oregon Commission for the Blind. However, there may be an increased need under this measure for qualified mental health practitioners and interpreters in state-funded agencies that provide services directly to Oregonians, such as school districts or the Oregon Youth Authority.

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