

House Bill 2337

Sponsored by Representative SALINAS (Pre-session filed.)

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 state agencies and third party contractors that collect demographic data on behalf of state agencies to comply with rules adopted by Oregon Health Authority for collection of data on race, ethnicity, preferred spoken and written languages and disability status.

Requires authority to fund mobile health units to provide linguistically and culturally appropriate services in every region of state based on recommendations of work groups convened by local health authorities. Specifies services to be provided by mobile health units. Requires mobile health units to collect and report to authority specified data that authority then reports to Legislative Assembly.

Requires authority, based on recommendations from task forces convened by Oregon Advocacy Commissions Office, to establish and fund robust culturally and linguistically specific intervention programs designed to prevent or intervene in health conditions that result in inequitable and negative outcomes for individuals who are Black or indigenous and people of color. Requires office to report recommendations to Legislative Assembly.

Requires authority to audit coordinated care organizations, providers of health care to medical assistance recipients and licensed health care facilities to ensure compliance with language access requirements of Title VI of the Civil Rights Act of 1964.

Requires Legislative Equity Office to conduct racial health equity impact analysis on all legislation passing in originating chamber and report findings to committees of Legislative Assembly related to health.

Requires Legislative Equity Officer to employ Equity Coordinator to coordinate language access and physical access for individuals with disabilities to enable participation in legislative process. Requires Equity Coordinator to conduct community outreach to promote more diverse participation in legislative process. Requires biennial report to Legislative Assembly of activities of Equity Coordinator.

Makes appropriations to Oregon Health Authority, Oregon Advocacy Commissions Office and Legislative Equity Office to carry out new responsibilities.

Declares emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to equity; and declaring an emergency.

3 Whereas racism is pervasive and is integrated into every institution and system that is con-
4 nected to the social determinants of health, and ultimately impacts each Oregonian's ability to be
5 healthy and well to the fullest potential; and

6 Whereas incidents of racism consistently experienced by Black and indigenous communities,
7 people of color and tribes create racial disparities in social, health, economic, legal and academic
8 outcomes; and

9 Whereas white supremacy was institutionalized through the development of policies and systems
10 that ensure power, privilege and resources remain in the hands of white men; and

11 Whereas racism in Oregon has left a legacy of trauma from one generation to the next, im-
12 pacting Oregon tribes, Black and indigenous communities and people of color through a cumulative
13 effect; and

14 Whereas Oregon has deep roots of racism, including the Donation Land Act of 1850 that made
15 it legal to steal land from Native American tribes, the 1887 murder of Chinese miners, Black
16 exclusionary laws with lashing as punishment, Japanese internment camps during World War II,

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 segregation in education and real estate red-lining that drove down values and reduced home own-
2 ership in the Black community; and

3 Whereas racial justice requires the formation and purposeful reinforcement of policies, prac-
4 tices, ideologies and behaviors that create equitable power, access, opportunity, treatment and out-
5 comes for all people regardless of race and redistribute resources to invest where inequities are
6 greatest; and

7 Whereas racism in Oregon and nationwide has created a situation that is untenable and where
8 immediate action must be taken to mitigate further harm and violence against Black and indigenous
9 Oregonians, people of color and tribes; now, therefore,

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

11 **SECTION 1. The Legislative Assembly declares that racism is a public health crisis in**
12 **this state.**

13 **SECTION 2. (1) A state agency that collects demographic data within the course of op-**
14 **erations shall comply with the standards, adopted by the Oregon Health Authority by rule**
15 **under ORS 413.161, for the collection of data on race, ethnicity, preferred spoken and written**
16 **languages and disability status.**

17 **(2) A state agency that procures services from a third-party that involve the collection**
18 **of demographic data shall ensure that in the collection of the data the third party complies**
19 **with the standards described in subsection (1) of this section.**

20 **SECTION 3. (1) As used in this section:**

21 **(a) “Local public health authority” has the meaning given that term in ORS 431.003.**

22 **(b) “Region” includes:**

23 **(A) The Oregon coast;**

24 **(B) The Portland metropolitan region;**

25 **(C) The Willamette Valley;**

26 **(D) The Columbia River gorge;**

27 **(E) Eastern Oregon; and**

28 **(F) Southern Oregon.**

29 **(2) The Oregon Health Authority shall provide funding to local public health authorities**
30 **to operate mobile health units in every region of this state.**

31 **(3) Each mobile health unit shall be staffed by individuals who reflect the population they**
32 **serve and provide the following culturally and linguistically appropriate services, prioritizing**
33 **services to Black and indigenous communities and people of color:**

34 **(a) Basic health services;**

35 **(b) Behavioral health services;**

36 **(c) Oral health services;**

37 **(d) Harm reduction screenings; and**

38 **(e) Connections to resources related to:**

39 **(A) Housing;**

40 **(B) Food;**

41 **(C) Education;**

42 **(D) Transportation;**

43 **(E) Domestic violence; and**

44 **(F) Criminal justice system involvement.**

45 **(4) Local public health authorities shall convene work groups to identify the number of**

1 mobile health units and the diverse staff needed for each region.

2 (5) Mobile health units shall collect the following data and report the data to the au-
3 thority in the form and manner prescribed by the authority:

4 (a) Number of individuals served;

5 (b) Demographic data collected in accordance with standards adopted by the authority
6 by rule under ORS 413.161;

7 (c) Services provided; and

8 (d) Services needed but not available locally.

9 (6) The authority shall compile the data reported under subsection (5) of this section and
10 annually report the aggregate data to the Legislative Assembly in the manner provided in
11 ORS 192.245.

12 SECTION 4. (1) The Oregon Advocacy Commissions Office, in collaboration with cul-
13 turally specific community-based organizations, shall convene affinity group task forces
14 consisting of leaders of Black and indigenous communities, people of color and the nine
15 federally recognized tribes in Oregon. The task forces shall discuss and research the specific
16 needs of the communities they represent and develop recommendations for specific allo-
17 cations of resources to address the communities' needs and health inequities faced by the
18 communities. The task forces shall also make recommendations on whether their work
19 should continue beyond June 30, 2023.

20 (2) Based on the research and recommendations of the affinity group task forces, the
21 Oregon Health Authority shall establish and fund robust culturally and linguistically specific
22 intervention programs designed to prevent or intervene in the health conditions that result
23 in inequitable and negative outcomes for individuals who are Black or indigenous, people of
24 color and tribes. The interventions must focus on aspects of the social determinants of
25 health including housing, access to food, neighborhood safety, education, transportation and
26 involvement with the criminal justice system.

27 (3) The Oregon Advocacy Commissions Office shall report the recommendations of the
28 task forces to the Legislative Assembly, in the manner provided in ORS 192.245, no later than
29 September 15, 2022.

30 SECTION 5. Section 6 of this 2021 Act is added to and made a part of ORS chapter 413.

31 SECTION 6. (1) The Oregon Health Authority shall conduct periodic audits of coordinated
32 care organizations and of providers who are reimbursed by the authority or coordinated care
33 organizations to provide health care to recipients of medical assistance to ensure that the
34 coordinated care organizations and providers are complying with the language access re-
35 quirements of Title VI of the Civil Rights Act of 1964.

36 (2) The authority shall provide technical assistance to providers as necessary to ensure
37 that providers have the tools and resources needed to promote greater access to services for
38 individuals with limited English proficiency or who communicate in sign language.

39 (3) The authority shall report the findings from the audits and actions taken in response
40 to the findings to the Legislative Assembly, in the manner provided in ORS 192.245, every two
41 years.

42 SECTION 7. (1) The Oregon Health Authority shall conduct periodic audits of health care
43 facilities licensed under ORS 441.020 and health systems to ensure that the facilities and
44 health systems are complying with the language access requirements of Title VI of the Civil
45 Rights Act of 1964.

1 (2) The authority shall report the findings from the audits and actions taken in response
 2 to the findings to the Legislative Assembly, in the manner provided in ORS 192.245, every two
 3 years.

4 **SECTION 8.** (1) The Legislative Equity Office shall conduct a racial health equity analysis
 5 for each measure reported out of a committee of the Legislative Assembly in the chamber
 6 where the measure originated and report the findings to the committees of the Legislative
 7 Assembly related to health care. The Legislative Equity Officer shall develop the criteria for
 8 the analysis, which must include an explanation or statement of:

- 9 (a) What the measure does;
- 10 (b) What communities the measure is most likely to impact;
- 11 (c) Whether communities likely to be impacted were involved in the development of the
 12 measure and, if so, how;
- 13 (d) If the measure will impact any of the federally recognized tribes in Oregon, whether
 14 the tribes were consulted;
- 15 (e) Whether the measure poses negative consequences for Black or indigenous commu-
 16 nities, people of color or tribes;
- 17 (f) How to strengthen positive impacts from the measure on Black and indigenous com-
 18 munities, people of color and tribes; and
- 19 (g) What organizations, individuals, data or other sources were used in conducting the
 20 analysis.

21 (2)(a) The Legislative Equity Officer shall employ an Equity Coordinator to coordinate
 22 and address language barriers and barriers faced by individuals with disabilities who wish to
 23 participate in the legislative process, including by ensuring language translation and closed
 24 captioning and ensuring that materials are available in alternative formats.

25 (b) The Equity Coordinator shall conduct community outreach to inform community-
 26 based organizations statewide about steps implemented under paragraph (a) of this sub-
 27 section and to encourage diverse members of the public to engage in the legislative process.

28 (c) The Equity Coordinator shall prepare a biennial report of:

- 29 (A) The number and type of accommodations that were provided;
- 30 (B) A summary of the outreach provided and to whom it was provided; and
- 31 (C) Lessons learned by the Equity Officer.

32 **SECTION 9.** In addition to and not in lieu of any other appropriation, there is appropri-
 33 ated to the Oregon Health Authority, for the biennium beginning July 1, 2021, out of the
 34 General Fund, the amount of \$_____, which may be expended for carrying out sections 2
 35 to 4, 6 and 7 of this 2021 Act.

36 **SECTION 10.** In addition to and not in lieu of any other appropriation, there is appro-
 37 priated to the Legislative Assembly, for the biennium beginning July 1, 2021, out of the
 38 General Fund, the amount of \$_____, for the Legislative Equity Office to carry out section
 39 8 of this 2021 Act.

40 **SECTION 11.** In addition to and not in lieu of any other appropriation, there is appro-
 41 priated to the Oregon Advocacy Commissions Office, for the biennium beginning July 1, 2021,
 42 out of the General Fund, the amount of \$_____, which may be expended for carrying out
 43 section 4 of this 2021 Act.

44 **SECTION 12.** Sections 2 to 4 and 6 to 8 of this 2021 Act become operative on January 1,
 45 2022.

1 **SECTION 13.** Section 3 of this 2021 Act is repealed on January 2, 2024.

2 **SECTION 14.** This 2021 Act being necessary for the immediate preservation of the public
3 peace, health and safety, an emergency is declared to exist, and this 2021 Act takes effect
4 on its passage.

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