HOUSE AMENDMENTS TO HOUSE BILL 2980

By COMMITTEE ON BEHAVIORAL HEALTH

April 6

On page 1 of the printed bill, delete lines 5 through 29.

On page 2, delete lines 1 through 5 and insert: "SECTION 1. (1) As used in this section:

4	"(a) 'Peer respite services' means voluntary, nonclinical, short-term residential peer
5	support provided:
6	"(A) In a homelike setting to individuals with mental illness or trauma response symp
7	toms who are experiencing acute distress, anxiety or emotional pain that may lead to the
8	need for a higher level of care such as psychiatric inpatient hospital services; and
9	"(B) By a peer-run organization and directed and delivered by individuals with lived ex
10	perience in coping with, seeking recovery from or overcoming mental illness or trauma re
11	sponse challenges.
12	"(b) 'Peer-run organization' means an organization:
13	"(A) In which a majority of the individuals who oversee the organization's operation and
14	who are in positions of control have received mental health services;
15	"(B) That is fully independent, separate and autonomous from other mental health
16	agencies; and
17	"(C) That has the authority and responsibility for all oversight and decision-making or
18	governance, financial, personnel, policy and program issues in the organization.
19	"(c) 'Peer support' means assistance provided by individuals who are current or former
20	consumers of mental health treatment in:
21	"(A) Addressing financial problems and other issues affecting the social determinants of
22	health;
23	"(B) Managing trauma using natural supports; and
24	"(C) Assisting with crisis management and coping with potential crisis situations.
25	"(2)(a) The Oregon Health Authority shall provide funding to one or more peer-run or
26	ganizations to operate three peer respite centers to complement existing local crisis response
27	services, one each to be located in the Portland metropolitan area, the southern Oregon re
28	gion and the central and eastern Oregon region. Each peer respite center shall provide up
29	to two weeks of continuous peer respite services to six or fewer individuals.
30	"(b) At least one of the peer respite centers must participate in a pilot project designed
31	specifically to provide culturally responsive services to a community of color, such as Black

African American, Latino, Asian, Asian American or Pacific Islander communities, or to the

ceiving funding under this section and may require peer respite centers to provide data and

"(3) The authority shall prescribe by rule the requirements for peer respite centers re-

nine federally recognized tribes in this state.

32 33

34

35

1

other reports to enable the authority to monitor and evaluate the services provided by the peer respite centers.

- "(4) The authority shall collaborate with county behavioral health departments or contractors of county behavioral health departments to incorporate peer respite services into the continuum of care provided by the departments or contractors to individuals who are experiencing behavioral health crises or who may be at risk of experiencing behavioral health crises.
- "(5) As a condition of the receipt of funding, peer-run organizations must allow the authority or the authority's designees access to the peer respite centers to conduct investigations and assessments, as necessary, to ensure that residents receive the quality and scope of services required.

"SECTION 2. In addition to and not in lieu of any other appropriation, there is appropriated to the Oregon Health Authority, for the biennium beginning July 1, 2021, out of the General Fund, the amount of \$4,500,000, which shall be expended for providing \$750,000 to each peer respite center each year as described in section 1 of this 2021 Act.".

HA to HB 2980 Page 2