SB 755-6 (LC 3429) 3/16/21 (LHF/ps)

Requested by SENATE COMMITTEE ON JUDICIARY AND BALLOT MEASURE 110 IMPLE-MENTATION (at the request of Senator Prozanski)

## PROPOSED AMENDMENTS TO SENATE BILL 755

- On page 1 of the printed bill, line 18, before "health" insert screening,".
- z sercening, .
- In line 21, before "health" insert "screening,".
- 4 Delete lines 30 and 31.
- 5 Delete pages 2 through 4.
- On page 5, delete lines 1 through 12 and insert:
- 7 "SECTION 1. Section 2, chapter 2, Oregon Laws 2021 (Ballot Measure
- 8 110 (2020)), is amended to read:
- 9 "Sec. 2. [Grants Program. (1) The Oversight and Accountability Council
- shall oversee and approve grants to implement Addiction Recovery Centers and
- increase access to community care, as set forth below.]
- "[(2) Addiction Recovery Centers. The Oversight and Accountability Coun-
- cil shall provide grants to existing agencies or organizations, whether govern-
- 14 ment or community-based, to create Addiction Recovery Centers for the
- 15 purposes of immediately triaging the acute needs of people who use drugs and
- assessing and addressing any on-going needs thorough intensive case manage-
- 17 ment and linkage to care and services.]
- "[(a) Grants must be disbursed such that at least one center shall be es-
- 19 tablished within each existing coordinated care organization service area.
- 20 Centers within each existing coordinated care organization service area shall
- be established and operational by October 1, 2021.]

- "[(b) Grantees must be able to provide or display an ability to provide the following services to any Oregon resident who requests it, in order to receive funding as an Addiction Recovery Center:]
- "[(i) 24/7 triage: Centers shall assess a client's need for immediate medical or other treatment shortly upon the client's arrival to determine what acute care is needed and where it can be best provided. Centers shall provide this service twenty-four hours a day, seven days a week, 365 days a year.]
- "[(ii) Health assessment: Centers shall conduct a comprehensive behavioral health needs assessment for each client, including a substance use disorder screening by a certified alcohol and drug counselor or other credentialed addiction treatment professional. The assessment shall prioritize the selfidentified needs of the client.]
- "[(iii) Individual intervention plan, intensive case management and con-13 nection to services: If, after the completion of the assessment, the client indi-14 cates a desire to address some or all of the identified needs, a case manager 15 shall work with the client to design an individual intervention plan. The plan 16 must address the client's need for substance use disorder treatment, coexisting 17 health problems, housing, employment and training, childcare and other ser-18 vices. Intensive case management requires, in the least, that case managers 19 have a sufficiently low staff-to-client ratio to provide daily support as needed 20 to connect clients to services and care needed to fulfill the individual inter-21 vention plan and have the capacity to follow-up to ensure clients are accessing 22care and, if not, to reconnect clients to care as necessary and as desired by 23 clients.] 24
- "[(iv) Peer support: Each center shall offer ongoing peer counseling and support from triage and assessment through implementation of individual intervention plans as well as provide peer outreach workers to engage directly with marginalized community members who could potentially benefit from the center's services.]
  - "[(v) Outreach: Each center shall assess the need for, and provide, mobile

- or virtual outreach services to reach clients who are unable to access the center.]
- "[(A) Notwithstanding subsection (2)(a) of this section, only one center within each coordinated care organization service area is required to provide the triage assessments set forth in subsection (2)(b)(i) of this section.]
- "[(c) All services provided at the centers must be evidence-informed, trauma-informed, culturally responsive, patient-centered, non-judgmental, and centered on principles of harm reduction. The goal of the individual intervention plan and intensive case management shall be to address effectively the client's substance use disorder and any other factors driving problematic behaviors without employing coercion or shame or mandating abstinence.]
- "[(d) The centers shall be adequately staffed to address the needs of people with substance use disorder within their regions as determined by the Oversight and Accountability Council, but must include, at a minimum, at least one person qualified in each of the following categories:]
- "[Certified alcohol and drug counselor or other credentialed addiction treatment professional;]
- "[Intensive case manager; and,]
- "[(C) Peer support specialist.]
- "[(e) Each center shall provide timely verification on behalf of any client who has completed a health assessment, as set forth in subsection (2)(b)(ii) of this section, if the client requests such verification to comply with section 22 or section 23 (2) of this Act.]
- "[(3) <u>Increasing Community Access to Care.</u> The Oversight and Accountability Council shall provide grants to existing agencies or organizations, whether government or community based, to increase access to one or more of the following:]
- "[(a) Low barrier substance use disorder treatment that is evidenceinformed, trauma-informed, culturally responsive, patient-centered, and nonjudgmental;]

"[(b) Peer support and recovery services;]

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- "[(c) Transitional, supportive, and permanent housing for persons with substance use disorder;]
- "[(d) Harm reduction interventions including, but not limited to, overdose prevention education, access to naloxone hydrochloride and sterile syringes, and stimulant-specific drug education and outreach.]
- "[(4) The council shall prioritize providing grants to community-based nonprofit organizations within each coordinated care organization service area. However, if within any such service area a community-based nonprofit organization does not apply for a grant or grants are not sought within that service area for which services are needed, then the council may request and fund grants to any community care organization or county within that service area.]
  - "[(5) Services provided by grantees, including services provided by Addiction Recovery Centers, shall be free of charge to the persons receiving the services. To the extent consistent with applicable law, grantees and service providers may seek and obtain reimbursement for services provided to any person from any insurer or entity providing insurance to that person.]
  - "(1) The Oversight and Accountability Council shall oversee and approve grants to implement Behavioral Health Resource Networks and increase access to community care, as set forth below. A Behavioral Health Resource Network is an entity or collection of entities that provide the services described in subsection (2)(c) of this section.
  - "(2)(a) The Oversight and Accountability Council and the Oregon Health Authority shall provide grants and funding to existing agencies or organizations, whether government or community based, to establish Behavioral Health Resource Networks for the purposes of immediately screening the acute needs of people who use drugs and assessing and addressing any ongoing needs through ongoing case management, harm reduction, treatment, housing and linkage to

1 other care and services.

- "(b) Grants and funding must be disbursed such that at least one network shall be established within each county. At least one network shall be established and operational by October 1, 2021.
  - "(c) A network must have the capacity to provide the following services and any other services specified by the council by rule:
  - "(A) Screening by peer support mentors or other qualified persons designated by the council to determine a client's need for immediate medical or other treatment to determine what acute care is needed and where it can be best provided, identify other needs and link the client to other appropriate local or statewide services, including treatment for substance abuse and coexisting health problems, housing, employment, training and child care. Networks shall provide this service 24 hours a day, seven days a week, 365 days a year. Notwithstanding paragraph (b) of this subsection, only one grantee in each network within each county is required to provide the screenings described in this subparagraph.
    - "(B) Comprehensive behavioral health needs assessment, including a substance use disorder screening by a certified alcohol and drug counselor or other credentialed addiction treatment professional. The assessment shall prioritize the self-identified needs of a client.
  - "(C) Individual intervention planning, case management and connection to services. If, after the completion of a screening, a client indicates a desire to address some or all of the identified needs, a case manager shall work with the client to design an individual intervention plan. The plan must address the client's need for substance use disorder treatment, coexisting health problems, housing, employment and training, child care and other services.
  - "(D) Ongoing peer counseling and support from screening and assessment through implementation of individual intervention plans as

- well as peer outreach workers to engage directly with marginalized community members who could potentially benefit from the network's services.
- "(E) Assessment of the need for, and provision of, mobile or virtual outreach services to reach clients who are unable to access the network.
- "(d) All services provided through the networks must be evidenceinformed, trauma-informed, culturally specific, linguistically responsive, patient-centered, nonjudgmental and centered on principles of
  harm reduction. The goal shall be to address effectively the client's
  substance use and any other social determinants of health.
  - "(e) The networks must be adequately staffed to address the needs of people with substance use disorders within their regions as prescribed by the council by rule, including, at a minimum, at least one person qualified in each of the following categories:
- 16 "(A) Certified alcohol and drug counselor or other credentialed ad-17 diction treatment professional;
  - "(B) Case manager; and

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- "(C) Peer support specialist.
- "(f) Each network shall provide timely verification on behalf of any client who has completed a screening, as set forth in subsection (2)(c)(B) of this section, if the client requests such verification to comply with section 22 or 23 (2), chapter 2, Oregon Laws 2021 (Ballot Measure 110 (2020)).
- 25 "(3) The council shall provide grants to existing agencies or organ-26 izations, whether government or community based, to increase access 27 to one or more of the following:
- "(a) Low barrier substance use disorder treatment that is evidence-informed, trauma-informed, culturally specific, linguistically responsive, patient-centered and nonjudgmental;

"(b) Peer support and recovery services;

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- "(c) Transitional, supportive and permanent housing for persons  $\mathbf{2}$ with substance use disorder; or 3
  - "(d) Harm reduction interventions including, but not limited to, overdose prevention education, access to naloxone hydrochloride and sterile syringes and stimulant-specific drug education and outreach.
- "(4) The council shall prioritize providing grants to community-7 based nonprofit organizations within each county. However, if within 8 any such service area a community-based nonprofit organization does not apply for a grant or grants are not sought within that service area for which services are needed, then the council may request and fund grants to any community care organization or county within that service area.
  - "(5) Services provided by grantees and networks, shall be free of charge any client receiving the services. To the extent consistent with applicable law, networks and grantees in each network may seek and retain reimbursement for services provided from any insurer or entity providing insurance to the client.
- "SECTION 3. Section 3, chapter 2, Oregon Laws 2021 (Ballot Measure 19 110 (2020)), is amended to read: 20
- "Sec. 3. [Oversight and Accountability Council.] (1)(a) The Director of the 21 Oregon Health Authority shall establish an Oversight and Accountability 22 Council for the purpose of determining how funds will be distributed to grant 23 applicants and to oversee the implementation of the [Centers] Behavioral 24 Health Resource Networks pursuant to section 2, chapter 2, Oregon 25 26 Laws 2021 (Ballot Measure 110 (2020)). The council shall be formed on or before February 1, 2021. 27
- "[(a)] (b) The council shall [be comprised] consist of qualified individuals 28 with experience in substance use disorder treatment and other addiction 29 services. The council shall consist of at least one member from each of the 30

- 1 following categories only:
- <sup>2</sup> "[(i)] (A) A representative of the Oregon Health Authority, Health Sys-
- 3 tems Division Behavioral Health Services;
- 4 "[(ii)] (B) Three members of communities that have been disproportion-
- 5 ately impacted by arrests, prosecution or sentencing for conduct that has
- 6 been classified or reclassified as a Class E violation pursuant to [section 11
- 7 to section 19.] ORS 153.012, 153.018, 475.752, 475.824, 475.834, 475.854,
- 8 475.874, 475.884 and 475.894;
- 9 "[(iii)] (C) A physician specializing in addiction medicine;
- "[(iv)] (**D**) A licensed clinical social worker;
- "[(v)] (**E**) An evidence-based substance use disorder provider;
- "[(vi)] (**F**) A harm reduction services provider;
- "[(vii)] (G) A person specializing in housing services for people with
- substance use disorder or a diagnosed mental health condition;
- "[(viii)] (H) An academic researcher specializing in drug use or drug pol-
- 16 icy;
- "[(ix)] (I) At least two people who suffered or suffer from substance use
- 18 disorder;
- "[(x)] (**J**) At least two recovery peers;
- "[(xi)] (**K**) A mental or behavioral health provider;
- "[(xii)] (**L**) A representative of a coordinated care organization; and[,]
- "[(xiii)] (M) A person who works for a [non-profit] nonprofit organization
- 23 that advocates for persons who experience or have experienced substance use
- 24 disorder.
- 25 "(2) A quorum consists of nine members of the council.
- 26 "(3) The term of office for a member of the council [shall be] is four years.
- 27 Vacancies shall be appointed for the unexpired term.
- 28 "(4)(a) To the extent permissible by law, a member of the council per-
- 29 forming services for the council may receive compensation from [his or her]
- 30 the member's employer for time spent performing services as a council

1 member.

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- "(b) If a member of the council is not compensated by [their] the
  member's employer as set forth in [subsection (4)(a) of this section] paragraph (a) of this subsection, that member shall be entitled to compensation
  and expenses as provided in ORS 292.495.
- "(c) Nothing in this subsection [(4) of this section] excuses or exempts a
  member of the council [form] **from** complying with any applicable provision
  of Oregon's ethics laws and regulations, including the provisions of ORS
  chapter 244.
- "SECTION 4. Section 4, chapter 2, Oregon Laws 2021 (Ballot Measure 11 110 (2020)), is amended to read:
- "Sec. 4. [Administration.] (1)(a) On or before June 30, 2021, the Oversight and Accountability Council shall adopt rules that establish general criteria and requirements for the [Addiction Recovery Centers] Behavioral Health Resource Networks and the grants and funding required by section 2, chapter 2, Oregon Laws 2021 (Ballot Measure 110 (2020)).
  - "(b) The council shall from time to time adopt such rules, and amend and revise rules [it] the council has adopted, as [it] the council deems proper and necessary for the administration of [this Act] chapter 2, Oregon Laws 2021 (Ballot Measure 110 (2020)), and the performance of [its] the council's work.
  - "(2) The council shall have and retain the authority to implement and oversee the [Addiction Recovery Centers created by] Behavioral Health Resource Networks established under section 2, chapter 2, Oregon Laws 2021 (Ballot Measure 110 (2020)), and the grants [program created and required by] and funding under section 2, chapter 2, Oregon Laws 2021 (Ballot Measure 110 (2020)).
- "(3) The Oregon Health Authority[, Health Systems Division Behavioral Health Services] shall administer and provide all necessary support to ensure the implementation of [this Act] chapter 2, Oregon Laws 2021 (Ballot

## 1 **Measure 110 (2020)**).

- 2 "(4)(a) The [Oregon Health Authority, Health Systems Division Behavioral
- 3 Health Services, authority, in consultation with the council, may enter into
- 4 interagency agreements to ensure proper distribution of funds for the grants
- 5 [created and] required by section 2, chapter 2, Oregon Laws 2021 (Ballot
- 6 Measure 110 (2020)).
- 7 "(b) The [Oregon Health Authority, Health Systems Division Behavioral
- 8 Health Services] authority shall encourage and take all reasonable measures
- 9 to ensure that grant recipients cooperate, coordinate and act jointly with one
- another to offer the services described in section 2, chapter 2, Oregon Laws
- 11 **2021** (Ballot Measure 110 (2020)).
- "(5) The [Oregon Health Authority, Health Systems Division Behavioral
- 13 Health Services] authority shall provide requested technical, logistical and
- other support to the council to assist the council with [its] the council's
- 15 duties and obligations.".
- On page 6, line 34, delete "Addiction Recovery".
- In line 35, delete "Centers" and insert "Behavioral Health Resource Net-
- works".
- On page 9, line 35, delete "health assessment" and insert "screening".
- On page 14, delete lines 31 through 45.
- On page 15, delete lines 1 through 22 and insert:
- "SECTION 22. Section 22, chapter 2, Oregon Laws 2021 (Ballot Measure
- 23 110 (2020)), is amended to read:
- "Sec. 22. Any person subject to the penalty set forth in ORS 153.018 (2)(e)
- 25 for a violation that has been classified or reclassified as a Class E violation
- 26 pursuant to [section 11 to section 19,] **ORS 153.012, 153.018, 475.752, 475.824,**
- 27 **475.834, 475.854, 475.874, 475.884 and 475.894** shall be fined up to \$100, but
- in lieu of the fine[,] may complete a [health assessment] screening, as set
- forth in section 2 [(2)(b)(ii), at an Addiction Recovery Center ] (2)(c)(B),
- 30 chapter 2, Oregon Laws 2021 (Ballot Measure 110 (2020)), through a

- 1 Behavioral Health Resource Network. Upon verification that the person
- 2 has received a [health assessment at an Addiction Recovery Center] screening
- 3 from a Behavioral Health Resource Network within 45 days of when the
- 4 person receives a citation for a violation subject to the penalty set forth in
- 5 ORS 153.018 (2)(e), the fine shall be waived. Failure to pay the fine shall not
- 6 be a basis for further penalties or for a term of incarceration.
- <sup>7</sup> "SECTION 23. Section 23, chapter 2, Oregon Laws 2021 (Ballot Measure
- 8 110 (2020)), is amended to read:
- 9 "Sec. 23. [Implementation. (1) Not later than February 1, 2021, the Oregon
- 10 Health Authority, Health Systems Division Behavioral Health Services shall
- 11 establish a statewide temporary telephone Addiction Recovery Center. The
- 12 temporary telephone Addiction Recovery Center shall be staffed twenty-four
- 13 hours a day, seven days a week, 365 days a year. The temporary telephone
- 14 Addiction Recovery Center shall provide the services set forth in section 2
- 15 (2)(b)(i)-(iii) and the verification set forth in section 2 (2)(e).
- "[(2) Until such time as an Addiction Recovery Center is established in the
- 17 coordinated care organization service area where a person subject to the pen-
- 18 alty set forth in ORS 153.018 (2)(e) for a violation that has been classified or
- $^{19}$  reclassified as a Class E violation pursuant to section 11 to section 19 resides,
- 20 the person shall be fined up to \$100, but in lieu of the fine may complete a
- 21 health assessment, as set forth in section 2 (2)(b)(ii), through the temporary
- 22 telephone Addiction Recovery Center. Upon verification that the person has
- 23 received a health assessment through the temporary telephone Addiction Re-
- 24 covery Center within 45 days of when the person receives a citation for a vio-
- 25 lation subject to the penalty set forth in ORS 153.018 (2)(e), the fine shall be
- 26 waived. Failure to pay the fine shall not be a basis for further penalties or for
- 27 a term of incarceration.]
- 28 "[(3) When an Addiction Recovery Center is established in each coordinated
- 29 care organization service area, and not later than October 1, 2021, the tempo-
- 30 rary telephone Addiction Recovery Center shall be terminated.]

- "(1) Not later than February 1, 2021, the Oregon Health Authority shall establish a Behavioral Health Resource Network telephone hotline to:
- "(a) Provide screenings under section 2 (2)(c), chapter 2, Oregon Laws 2021 (Ballot Measure 110 (2020)), to any resident in this state by peer support mentors or other qualified persons designated by the Oversight and Accountability Council;
- 8 "(b) Assess a caller's need for immediate medical care or other 9 treatment and determine what acute care is needed and where it can 10 be provided;
  - "(c) Identify other needs of the caller; and

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- "(d) Link the caller to other appropriate local or statewide services, including treatment for substance abuse and other coexisting health problems, housing, employment, training and child care.
- "(2) The telephone hotline shall be staffed 24 hours a day, seven days a week, 365 days a year. Following a screening, at the request of a caller, the telephone hotline shall provide the verification set forth in section 2 (2)(f), chapter 2, Oregon Laws 2021 (Ballot Measure 110 (2020)).
- "(3) A person subject to the penalty set forth in ORS 153.018 (2)(e) 20 for a violation that has been classified or reclassified as a Class E vi-21 olation pursuant to ORS 153.012, 153.018, 475.752, 475.824, 475.834, 475.854, 22 475.874, 475.884 and 475.894 may, in lieu of the fine, complete a screen-23 ing, as set forth in section 2 (2)(c)(B), chapter 2, Oregon Laws 2021 24 (Ballot Measure 110 (2020)), or any other equivalent or more intensive 25 treatment contact, through a Behavioral Health Resource Network, 26 including the telephone hotline described in subsection (1) of this sec-27 tion. Upon verification that the person has received a screening or 28 other treatment contact through a Behavioral Health Resource Net-29 work, including the telephone hotline described in subsection (1) of 30

- 1 this section, within 45 days of when the person receives a citation for
- a violation subject to the penalty set forth in ORS 153.018 (2)(e), the
- 3 fine shall be waived. Failure to pay the fine shall not be a basis for
- 4 further penalties or for a term of incarceration.".
- In line 39, delete "Addiction Recovery Centers" and insert "Behavioral
- 6 Health Resource Networks".
- 7 In line 40, delete "center" and insert "network".
- 8 In line 41, delete "center" and insert "network".
- 9 In line 44, delete "center" and insert "network".
- On page 16, line 1, delete "center" and insert "network".
- In line 4, delete "center" and insert "network".