

# House Bill 2463

Sponsored by Representative NOSSE, Senator LIEBER (Presession 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 Oregon Health Authority to convene two work groups to study statutory and regulatory framework for behavioral health systems and make recommendations to reduce administrative burdens on behavioral health care providers and increase system efficiencies. Specifies membership and duties of work groups. Requires authority to report recommendations of work groups for legislative changes to interim committees of Legislative Assembly no later than September 15 of each even-numbered year.

Directs authority to take specific actions apart from work groups to identify and eliminate administrative burdens on behavioral health care providers.

Sunset January 2, 2027.

Declares emergency, effective on passage.

## A BILL FOR AN ACT

1  
2 Relating to behavioral health care; and declaring an emergency.

3       Whereas the current statutory and regulatory framework for Oregon's publicly funded behav-  
4       ioral health system was developed many decades ago when Oregon counties were the sole providers  
5       of publicly funded behavioral health services; and

6       Whereas over the past two decades, the behavioral health landscape has drastically changed and  
7       services are provided by hundreds of organizations and practitioners across this state; and

8       Whereas unlike the regulatory structure for commercial and privately funded organizations, the  
9       publicly funded system relies heavily on an unregulated workforce and Oregon is in a historic  
10       workforce crisis, placing the entire administrative burden on the backs of provider organizations;  
11       and

12       Whereas the outdated statutory and regulatory structure for behavioral health has left the  
13       various entities that constitute the current behavioral health system in this state confused, burdened  
14       and at risk of delivering services in a manner that is inconsistent with the current construct; and

15       Whereas statutory and regulatory changes are needed to eliminate administrative burdens on  
16       behavioral health providers and increase efficiencies in behavioral health systems by targeting un-  
17       necessary barriers to care, decreasing community behavioral health workforce burnout, reducing  
18       overall system costs and strengthening person-centered behavioral health care; now, therefore,

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

20       **SECTION 1. (1) The Oregon Health Authority shall convene a work group to evaluate and**  
21 **make recommendations for revisions to the statutes in ORS chapter 430 to reflect the cur-**  
22 **rent structure of the publicly funded behavioral health system in this state and the roles of**  
23 **counties, coordinated care organizations, private behavioral health care providers and com-**  
24 **munity mental health programs. The work group shall, at a minimum:**

25       **(a) Identify redundancies, contradictions and outdated language in the provisions in ORS**  
26 **chapter 430 and recommend changes to the provisions or new provisions to achieve greater**  
27 **clarity for behavioral health care providers and to better meet the needs of the individuals**

**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 who receive behavioral health services; and

2 (b) Define and clarify the roles and responsibilities of all major behavioral health system  
 3 partners that constitute the public behavioral health system, including coordinated care or-  
 4 ganizations, community mental health programs, behavioral health organizations, county  
 5 governments, the authority, the Department of Human Services and the Judicial Depart-  
 6 ment.

7 (2) The work group must consist of members who represent the major behavioral health  
 8 system partners that constitute the public behavioral health system and include meaningful  
 9 participation by consumers of behavioral health services and their advocates.

10 (3) Members of the work group who are not government employees are entitled to com-  
 11 pensation and reimbursement of travel and other expenses as provided in ORS 292.495, from  
 12 funds available to the authority.

13 (4) The authority shall compile the recommendations of the work group and submit a  
 14 report, in the manner provided in ORS 192.245, containing recommended legislative changes  
 15 to the interim committees of the Legislative Assembly related to health no later than Sep-  
 16 tember 15 of each even-numbered year.

17 **SECTION 2.** (1) The Oregon Health Authority shall convene a work group to evaluate and  
 18 make recommendations for revisions to the current regulatory structure of the publicly  
 19 funded behavioral health system in this state, including statutes, administrative rules, the  
 20 state Medicaid plan, state contracts with behavioral health care providers and workflows, to  
 21 identify efficiencies, reduce administrative burdens, eliminate duplication and increase  
 22 transparency. The recommendations should ensure a regulatory framework that:

- 23 (a) Maximizes access to behavioral health services;
- 24 (b) Creates portability and accountability for the behavioral health workforce;
- 25 (c) Promotes behavioral and physical health integration; and
- 26 (d) Closes the gap between the regulatory structures for commercially funded and pub-  
 27 licly funded health systems in this state.

28 (2) Consumers of behavioral health services and their advocates must have meaningful  
 29 participation in the work group. The work group must also include, but is not limited to,  
 30 representatives of:

- 31 (a) Coordinated care organizations;
- 32 (b) Community mental health programs;
- 33 (c) Behavioral health organizations;
- 34 (d) County governments;
- 35 (e) The authority;
- 36 (f) The Mental Health Regulatory Agency; and
- 37 (g) The Judicial Department.

38 (3) Members of the work group who are not government employees are entitled to com-  
 39 pensation and reimbursement of travel and other expenses as provided in ORS 292.495, from  
 40 funds available to the authority.

41 (4) The authority shall compile the recommendations of the work group and submit a  
 42 report, in the manner provided in ORS 192.245, containing recommended legislative changes,  
 43 if any are needed, to the interim committees of the Legislative Assembly related to health  
 44 no later than September 15 of each even-numbered year.

45 **SECTION 3.** (1) The Oregon Health Authority shall put systems in place to track the

1 progress of the work groups convened in accordance with sections 1 and 2 of this 2023 Act  
2 so that recommendations of the work groups are consistent. The authority also shall con-  
3 sider inviting some cross-representation between the two work groups.

4 (2) Apart from the work groups convened under sections 1 and 2 of this 2023 Act, the  
5 authority shall:

6 (a) Explore changes to the existing Oregon Administrative Rules to reduce administrative  
7 burdens on the behavioral health workforce;

8 (b) Work with coordinated care organizations to clarify the obligations and responsibil-  
9 ities of coordinated care organizations under ORS 430.637; and

10 (c) Evaluate licensing, certification and audit procedures to identify and eliminate undue  
11 administrative burdens on behavioral health care provider organizations and to ensure that  
12 the existing Oregon Administrative Rules are interpreted consistently across all of the  
13 authority's divisions.

14 SECTION 4. Sections 1, 2 and 3 of this 2023 Act are repealed on January 2, 2027.

15 SECTION 5. This 2023 Act being necessary for the immediate preservation of the public  
16 peace, health and safety, an emergency is declared to exist, and this 2023 Act takes effect  
17 on its passage.

18