

# Senate Bill 432

Sponsored by Senator HAYDEN (at the request of Oregon Mental Health Consumers Association) (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 develop, implement and administer program to support consumer engagement efforts aimed at increasing and optimizing consumer involvement in planning and decision-making surrounding the access to, and the delivery of, behavioral health services in this state. Directs authority to enter into contracts with peer-run organizations to provide technical and financial assistance to such organizations in carrying out activities that accomplish purpose of program.

Requires peer-run organizations that contract with authority to submit annual progress reports to authority.

Modifies definition of "consumer" for purposes of Consumer Advisory Council.

Makes conforming changes.

Declares emergency, effective on passage.

## A BILL FOR AN ACT

1  
2 Relating to consumer engagement in decisions concerning behavioral health services; creating new  
3 provisions; amending ORS 423.565 and 430.073; and declaring an emergency.

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

5 **SECTION 1. Sections 2 and 3 of this 2023 Act shall be known and may be cited as the**  
6 **Oregon Behavioral Health Consumer Engagement Act.**

7 **SECTION 2. The Legislative Assembly finds and declares that:**

8 (1) **Increased participation by consumers of behavioral health services promotes identifi-**  
9 **cation of existing gaps in the delivery of services provided within the mental and behavioral**  
10 **health system, improves the quality of behavioral health services delivered and results in**  
11 **positive experiences and improved behavioral health outcomes for consumers.**

12 (2) **A coordinated system is necessary to increase consumer engagement decision-making**  
13 **and strategic input regarding the service delivery options that are available within the ex-**  
14 **isting behavioral health system.**

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

16 (a) **"Consumer" means a person who has received or is receiving behavioral health ser-**  
17 **vices.**

18 (b) **"Peer-run organization" means an organization:**

19 (A) **In which a majority of the individuals who oversee the organization's operation and**  
20 **who are in positions of control have received behavioral health services;**

21 (B) **That is fully independent, separate and autonomous from other behavioral health**  
22 **services; and**

23 (C) **In which a majority of the leadership and staff who perform oversight and decision-**  
24 **making on governance, financial, personnel, policy and program issues in the organization**  
25 **are individuals who have received behavioral health services.**

26 (2) **The Oregon Health Authority shall develop, implement and administer a program to**

**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 support consumer engagement efforts aimed at increasing and optimizing consumer in-  
 2 volvement in planning and decision-making surrounding the access to, and the delivery of,  
 3 behavioral health services in this state. In implementing the program, the authority shall  
 4 enter into contracts with peer-run organizations to provide technical and financial assistance  
 5 to such organizations to carry out activities that may include, but need not be limited to:

6 (a) Identifying and creating opportunities for consumer involvement in policy-making  
 7 initiatives concerning the quality of services delivered within the behavioral health system.

8 (b) Offering training for consumer education on:

9 (A) How to navigate the coordinated behavioral health system in this state.

10 (B) Self-directed care or peer-operated service models as behavioral health care options.

11 (c) Developing and preparing informational and instructional materials, to be distributed  
 12 throughout the state, regarding the ways in which consumers may participate in policy-  
 13 making and legislative processes.

14 (d) Working with state and local behavioral health organizations, county behavioral  
 15 health programs and other local agencies and coordinated care organizations, to develop  
 16 methods to facilitate consumer participation and representation in policy discussions re-  
 17 garding the quality and type of behavioral health services delivered to consumers.

18 (e) Representing the interests of consumers of historically marginalized communities or  
 19 groups in advocating for increased consumer engagement.

20 (f) Improving the quality of services delivered within the behavioral health system.

21 (g) Reducing barriers to accessing culturally and linguistically competent behavioral  
 22 health care for consumers of historically marginalized groups.

23 (h) Participating in national, state and local consumer self-help initiatives.

24 (i) Collaborating with and providing technical assistance to community behavioral health  
 25 organizations to improve delivery of behavioral services.

26 (3) The authority shall prescribe by rule the requirements for peer-run organizations that  
 27 receive funding under this section.

28 (4) A peer-run organization that contracts with the authority shall submit an annual  
 29 progress report to the authority setting forth, at a minimum, the following:

30 (a) The status of consumer engagement efforts and results of the outreach projects  
 31 conducted by the peer-run organization.

32 (b) Data and metrics associated with the consumer engagement efforts described under  
 33 subsection (2) of this section, including the number and demographics of consumers reached,  
 34 geographic access to state and local behavioral health services and behavioral health out-  
 35 comes.

36 (c) A description of any consumer training developed and implemented throughout this  
 37 state by the peer-run organization.

38 (d) A description of any technical assistance provided by the peer-run organization.

39 (e) Identified areas within the behavioral health system that are in need of improvement.

40 (f) Any coordinated initiatives directed at increasing opportunities for consumer in-  
 41 volvement in the behavioral health workforce.

42 **SECTION 4.** ORS 430.073, as amended by section 2, chapter 5, Oregon Laws 2022, is amended  
 43 to read:

44 430.073. (1)(a) As used in this section and ORS 430.075, “consumer” means a person who has  
 45 received or is receiving mental or behavioral health, addiction or substance use disorder services.

1       **(b) “Consumer” does not include individuals who receive compensation for performing**  
 2       **work as an employee or a contractor within the mental or behavioral health systems.**

3       (2) Consistent with the principles embodied in ORS 430.071 to support and promote independence  
 4       and self-determination for persons receiving mental health, addiction or substance use disorder ser-  
 5       vices, the Director of the Oregon Health Authority shall maintain a Consumer Advisory Council to:

6       (a) Advise the director on the provision of mental health, addiction and substance use disorder  
 7       services by the Oregon Health Authority and operate as a representative body that facilitates input  
 8       from and communication with the peer constituency of the council.

9       (b) Review, evaluate and provide feedback, as permitted by federal law, on select deidentified  
 10       site review reports related to mental health, addiction and substance use disorder services provided  
 11       by the authority.

12       (c) Review, evaluate or publish impacts, advisories or fiscal benefit estimates for the director  
 13       or the peer constituency of the council, or as public information, concerning any policy proposals  
 14       developed in accordance with ORS 430.071.

15       (d) Recommend policies in accordance with ORS 430.071.

16       (e) Provide perspectives and experiences.

17       (f) Communicate concerns, emergency needs or general conditions related to the delivery of  
 18       mental health, addiction and substance use disorder services.

19       (3) The director shall appoint 15 to 25 consumers to the council from a list of candidates sub-  
 20       mitted by:

21       (a) Existing consumers on the council; or

22       (b) A seven-person committee, appointed by the members of the council, consisting of individuals  
 23       who represent independent consumer-run organizations, consumer-run advocacy organizations and  
 24       consumer-operated advisory councils that are active or headquartered in this state.

25       (4) In selecting the candidates to be submitted to the director under subsection (3) of this sec-  
 26       tion, the council or committee shall strive for the balance described in subsection (5) of this section  
 27       and otherwise encourage outreach to new members and diverse groups in the consumer or peer  
 28       community.

29       (5) In making appointments to the council, the director shall strive to balance the representation  
 30       according to geographic areas of the state, race, ethnicity, gender identity and age.

31       (6) The authority shall provide administrative support to the council.

32       (7) A member of the council is entitled to compensation in an amount determined by the director  
 33       and to actual and necessary travel expenses incurred by the member in the performance of the  
 34       member’s official duties. Claims for compensation and expenses shall be paid out of funds appropri-  
 35       ated to the authority for purposes of the council.

36       **SECTION 5.** ORS 423.565 is amended to read:

37       423.565. In addition to the duties assigned to it under ORS 423.560, the local public safety co-  
 38       ordinating council convened by the board of commissioners shall, at a minimum:

39       (1) Develop and recommend to the county board of commissioners the plan for use of state re-  
 40       sources to serve the local adjudicated youth population.

41       (2) Coordinate local juvenile justice policy among affected juvenile justice entities.

42       (3) Develop and recommend to the county board of commissioners a plan designed to prevent  
 43       criminal involvement by youth. The plan must provide for coordination of community-wide services  
 44       involving treatment, education, employment and intervention strategies aimed at crime prevention.

45       (4) Create a facility advisory subcommittee when provided with the information described in

1 ORS 169.690. The subcommittee shall be composed of the following persons:

2 (a) The affected law enforcement officer described in ORS 423.560 (1)(a) or (b);

3 (b) A district attorney;

4 (c) A mental health director;

5 (d) A designee of the city council or county board of commissioners, whichever is affected;

6 (e) A representative of an organization that advocates on behalf of persons with mental illness;

7 and

8 (f) A consumer [*as defined in ORS 430.073*] **who has received or is receiving mental health,**  
9 **addiction or substance use disorder services.**

10 (5) If a written plan of action has been provided to the council under ORS 165.127, annually  
11 review the plan and, if appropriate, make written recommendations to the affected district attorney  
12 for plan improvements.

13 **SECTION 6. The Oregon Health Authority shall take all steps necessary before the op-**  
14 **erative date specified in section 8 of this 2023 Act to enable the authority to carry out, on**  
15 **and after the operative date specified in section 8 of this 2023 Act, the provisions of section**  
16 **3 of this 2023 Act.**

17 **SECTION 7. In addition to and not in lieu of any other appropriation, there is appropri-**  
18 **ated to the Oregon Health Authority, for the biennium beginning July 1, 2023, out of the**  
19 **General Fund, the amount of \$1,500,000, which shall be expended for carrying out the pro-**  
20 **visions of section 3 of this 2023 Act.**

21 **SECTION 8. Section 3 of this 2023 Act becomes operative on January 1, 2024.**

22 **SECTION 9. This 2023 Act being necessary for the immediate preservation of the public**  
23 **peace, health and safety, an emergency is declared to exist, and this 2023 Act takes effect**  
24 **on its passage.**

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