HOUSE AMENDMENTS TO HOUSE BILL 4092

By COMMITTEE ON BEHAVIORAL HEALTH AND HEALTH CARE

February 22

1	On page 1 of the printed bill, line 17, after "430.880" insert "except ORS 430.630".
2	Delete lines 18 through 20 and delete <u>page 2</u> .
3	On <u>page 3</u> , delete lines 1 through 40 and insert:
4	"(d) ORS 430.627, 430.628, 430.629 and 430.630.
5	"(3) The authority shall compile a report of the authority's findings about the costs of providing
6	the services and performing the functions described in the sections listed in:
7	"(a) Subsection (2)(a), (b) and (d) of this section and make the report available on the authority's
8	website no later than January 1, 2025, and every five years thereafter; and
9	"(b) Subsection (2)(c) of this section and make the report available on the authority's website
10	no later than January 1, 2026, and every five years thereafter.
11	"SECTION 2. (1) The Oregon Health Authority shall contract with the Oregon Council for
12	Behavioral Health to convene a group of behavioral health partners to conduct a study to:
13	"(a) Evaluate the provisions in ORS chapters 414 and 430, administrative rules and state
14	contracts affecting behavioral health care providers, coordinated care organizations, private
15	behavioral health care providers and community mental health programs; and
16	"(b) Make recommendations for revisions to the statutes, administrative rules and con-
17	tracts.
18	"(2) The study shall:
19	"(a) Identify redundancies, contradictions and outdated language in the provisions in ORS
20	chapters 414 and 430 and recommend solutions that address or resolve those redundancies,
21	contradictions or outdated language to increase efficiencies in the publicly funded behavioral
22	health system to better serve Oregonians;
23	"(b) Define and clarify the roles and responsibilities under ORS chapters 414 and 430 and
24	related contract expectations and deliverables of all major behavioral health system partners
25	that constitute the public behavioral health system, including but not limited to coordinated
26	care organizations, community mental health programs, behavioral health organizations,
27	county governments and the Oregon Health Authority; and
28	"(c) Develop recommendations to ensure a regulatory framework that is better for the
29	population of behavioral health care consumers and the publicly funded providers needed to
30	serve the population, including by:
31	"(A) Maximizing access to behavioral health services;
32	"(B) Creating portability and accountability for the behavioral health workforce;
33	"(C) Promoting behavioral and physical health integration; and
34	"(D) Addressing the differences between the regulatory structures for privately funded
35	and publicly funded health systems in this state.

"(3) The group conducting the study must include representatives of: 1 2 "(a) Consumers of behavioral health services; 3 "(b) Coordinated care organizations; 4 "(c) Community mental health programs; "(d) Culturally-specific behavioral health organizations; 5 6 "(e) Behavioral health advocacy organizations; "(f) County governments; 7 "(g) The Mental Health Regulatory Agency; 8 9 "(h) Behavioral health care providers that contract with the state or with local govern-10 ments; "(i) Labor organizations that represent the behavioral health workforce; 11 "(i) Hospitals; 12 "(k) The Mental Health and Addiction Certification Board of Oregon; 13"(L) The units of the Oregon Health Authority responsible for Medicaid, behavioral health 14 services, quality, compliance and program integrity; 15"(m) The nine federally recognized tribes in Oregon; and 16 17"(n) The Judicial Department. 18 "(4) Consumers of behavioral health services who serve on the group conducting the 19 study must be ensured a meaningful opportunity to participate in developing the group's 20recommendations. 21"(5) Members of the group conducting the study who are not employed by a state agency, 22county government or city government are entitled to a stipend and reimbursement of travel or other expenses as provided in ORS 292.495. Stipends shall be paid in a manner that allows 23the stipends to be excluded from income in determining eligibility for medical assistance, to 24 25the extent practicable under federal law. "(6) All agencies of state government, as defined in ORS 174.111, are directed to assist 2627the group in conducting the study and, to the extent permitted by laws relating to 28 confidentiality, to furnish information and advice the members of the group consider necessary to conduct the study and develop recommendations. 29 "(7) The council shall work in partnership with two to four members of the group to 30 conduct a procurement, no later than June 30, 2024, to hire a consultant to assist the group 3132in conducting the study. "(8) No later than December 15, 2024, to the greatest extent practicable, the group shall 33 report the group's preliminary recommendations for legislative changes related to subsection 34(2)(a) of this section to the interim committees of the Legislative Assembly related to be-35 havioral health. The report need not comply with ORS 192.245. 36 (9) No later than December 15, 2025, the group shall submit a final report of the group's 37 38 findings and recommendations developed under subsections (1) and (2) of this section, in the manner provided in ORS 192.245, to the interim committees of the Legislative Assembly re-39 40 lated to behavioral health. The recommendations may include proposed legislation. 41 "SECTION 3. Section 1 of this 2024 Act is amended to read: "Sec. 1. (1) The Oregon Health Authority, in consultation with counties and community mental 42health programs, shall conduct a study to determine the funding required for each community mental 43 44 health program to provide the services and perform the functions required by law related to indi-

45 viduals with behavioral health disorders in the following age groups:

1 "(a) Newborns through youth 17 years of age;

2 "(b) Ages 18 through 25; and

3 "(c) Ages 26 and older.

4 "(2) The study must include, but is not limited to, the costs of providing the services and per-5 forming the functions described in:

6 "(a) ORS 161.315 to 161.351, 161.355 to 161.371, 161.385 to 161.395 and 161.505 to 161.585.

7 "(b) ORS 426.005 to 426.390, 426.510 to 426.680, 426.701 and 426.702.

8 "(c) ORS 430.021, 430.210, 430.230 to 430.236, 430.265 to 430.380, 430.397 to 430.401, 430.405 to 9 430.565 and 430.610 to 430.880 except ORS 430.630.

10 "(d) ORS 430.627, 430.628, 430.629 and 430.630.

In line 41, delete "6" and insert "7".

11 "(3) The authority shall compile [a report] **reports** of the authority's findings about the costs 12 of providing the services and performing the functions described in [the sections listed in:]

"[(a) Subsection (2)(a), (b) and (d) of this section and make the report available on the authority's
website no later than January 1, 2025, and every five years thereafter; and]

"[(b) Subsection (2)(c) of this section and make the report available on the authority's website no later than January 1, 2026, and every five years thereafter] subsection (2) of this section every five years and make the reports available on the authority's website.

18 "<u>SECTION 4.</u> The amendments to section 1 of this 2024 Act by section 3 of this 2024 Act
 19 become operative on January 2, 2026.

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"SECTION 5. Section 2 of this 2024 Act is repealed on January 2, 2026.

21 "SECTION 6. In addition to and not in lieu of any other appropriation, there is appro-22 priated to the Oregon Health Authority, for the biennium ending June 30, 2025, out of the 23 General Fund, the amount of \$_____, which shall be paid to the Oregon Council for Be-24 havioral Health for the hiring of the consultant under section 2 (7) of this 2024 Act and for 25 the stipends and reimbursement of travel or other expenses under section 2 (5) of this 2024 26 Act.".

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