Requested by Representative MANNIX

PROPOSED AMENDMENTS TO HOUSE BILL 4002

- In line 2 of the printed bill, delete the period and insert "creating new
- 2 provisions; amending ORS 109.675, 109.680 and 430.397; and declaring an
- 3 emergency.".

- Delete lines 4 through 8 and insert:
- ⁵ "SECTION 1. (1) As used in this section:
- "(a) 'Minor' means an unemancipated individual who has not attained the age of majority, as described in ORS 109.510.
- 8 "(b) 'Treatment facility' has the meaning given that term in ORS 9 430.306.
- "(2) When the director of a treatment facility receives an application under ORS 430.397 from the parent of a minor for the voluntary admission of the minor for inpatient diagnosis, evaluation and treatment of a substance use disorder and the minor objects to the admission, the director may admit the minor only if, in the opinion of the director of the treatment facility:
 - "(a) The minor has a substance use disorder and:
- "(A) The minor has lost the ability to control the minor's personal use of a controlled substance or another substance with abuse potential; or
- 20 "(B) The minor's use is to the extent that the health of the minor
 21 is substantially impaired or endangered or the social or economic

- 1 functioning of the minor is substantially disrupted;
- "(b) There is no less restrictive alternative available for the minor's treatment;
- "(c) There is reason to believe that the minor's substance use disorder could be improved by the recommended course of treatment or would deteriorate further if left untreated; and
- "(d) The minor's condition or circumstances meet any other criteria for admission established by the Oregon Health Authority by rule.
- 9 "(3) A minor admitted to a treatment facility under this section 10 shall be discharged from the treatment facility:
 - "(a) No later than 72 hours after the facility receives notice, in writing, from the minor's parent requesting the discharge; or
 - "(b) If the director of the treatment facility determines that the minor will no longer benefit from continued treatment and the minor is not dangerous to self or others. Before discharging the minor under this paragraph, the treatment facility shall give notice, in writing, of the pending discharge to the child's parent.
 - "(4) To the extent permitted under federal law, the treatment facility may disclose information regarding the minor's evaluation, diagnosis and treatment, or need for treatment, to the minor's parent, without the consent of the minor. The treatment facility shall encourage the minor to sign an authorization for the disclosure of information that is necessary for the parent to participate in the minor's discharge planning and to provide appropriate support to the minor following discharge.
 - "(5) This section does not apply to:
- 27 "(a) The voluntary admission of a minor to a state hospital under 28 ORS 426.220; or
- 29 "(b) The placement of a child or ward in a congregate care resi-30 dential setting by the Department of Human Services under ORS

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- "(6) The authority shall adopt rules for the implementation of this section. The rules must prioritize the best interests of the minor and take into consideration any applicable due process rights of the minor, the rights and duties of the minor's parent to safeguard the mental and physical well-being of the minor and the state's interest in providing treatment and recovery services and supports for minors experiencing substance use disorders.
- 9 **"SECTION 2.** ORS 430.397 is amended to read:
- "430.397. (1) Any person may voluntarily apply for admission to any treatment facility operated pursuant to rules of the Oregon Health Authority.
- "(2) The director of the treatment facility shall determine whether the person shall be admitted as a patient, or referred to another appropriate treatment facility or denied referral or admission.
- "(3) If the person is under 18 years of age or an incompetent, the director of the treatment facility shall notify the person's parents or guardian of the admission or referral.
 - "(4) An application for admission of a minor to a treatment facility made by the minor's parent is subject to the provisions of section 1 of this 2024 Act.
 - **"SECTION 3.** ORS 109.675 is amended to read:
- 23 "109.675. (1) A minor 14 years of age or older may obtain, without par-24 ental knowledge or consent:
- "(a) Outpatient diagnosis or treatment of a mental or emotional disorder or a chemical dependency, excluding methadone maintenance, by a physician or physician assistant licensed by the Oregon Medical Board, a psychologist licensed by the Oregon Board of Psychology, a nurse practitioner registered by the Oregon State Board of Nursing, a clinical social worker licensed by the State Board of Licensed Social Workers, a professional counselor or

- 1 marriage and family therapist licensed by the Oregon Board of Licensed
- 2 Professional Counselors and Therapists, a naturopathic physician licensed
- 3 by the Oregon Board of Naturopathic Medicine or a community mental
- 4 health program established and operated pursuant to ORS 430.620 when ap-
- 5 proved to do so by the Oregon Health Authority pursuant to rule.
- 6 "(b) Outpatient applied behavior analysis, as defined in ORS 676.802, as
- 7 a treatment of a mental or emotional disorder or a chemical dependency,
- 8 excluding methadone maintenance, by a behavior analyst or assistant be-
- 9 havior analyst licensed under ORS 676.810 or a behavior analysis
- interventionist registered by the Health Licensing Office under ORS 676.815
- if the treatment is within the scope of practice of the behavior analyst, as-
- 12 sistant behavior analyst or behavior analysis interventionist.
- 13 "(2) However, the person providing treatment shall have the parents of
- the minor involved before the end of treatment unless the parents refuse or
- unless there are clear clinical indications to the contrary, which shall be
- documented in the treatment record. The provisions of this subsection do not
- 17 apply to:

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- "(a) A minor who has been sexually abused by a parent; or
- 19 "(b) An emancipated minor, whether emancipated under the provisions of
- 20 ORS 109.510 and 109.520 or 419B.550 to 419B.558 or, for the purpose of this
- section only, emancipated by virtue of having lived apart from the parents
- or legal guardian while being self-sustaining for a period of 90 days prior to
- obtaining treatment as provided by this section.
 - "(3) Nothing in this section limits the right of a parent to consent
 - to chemical dependency treatment on behalf of the parent's minor
 - child when the child objects to the treatment or does not otherwise
- 27 consent to the treatment.
- "SECTION 4. ORS 109.680 is amended to read:
- "109.680. (1) As used in this section, 'mental health care provider' means
- a physician or physician assistant licensed by the Oregon Medical Board,

- 1 psychologist licensed by the Oregon Board of Psychology, nurse practitioner
- 2 registered by the Oregon State Board of Nursing, clinical social worker li-
- 3 censed under ORS 675.530, professional counselor or marriage and family
- 4 therapist licensed by the Oregon Board of Licensed Professional Counselors
- 5 and Therapists, naturopathic physician licensed under ORS chapter 685 or
- 6 community mental health program established and operated pursuant to ORS
- 7 430.620 when approved to do so by the Oregon Health Authority pursuant to
- 8 rule.
- 9 "(2)(a) A mental health care provider that is providing services to a minor
- pursuant to ORS 109.675 (1) may disclose relevant health information about
- the minor without the minor's consent as provided in ORS 109.675 (2) and
- 12 this subsection.
- "(b) If the minor's condition has deteriorated or the risk of a suicide at-
- 14 tempt has become such that inpatient treatment is necessary, or if the
- 15 minor's condition requires detoxification in a residential or acute care fa-
- cility, the minor's mental health care provider may disclose the relevant in-
- 17 formation regarding the minor's diagnosis and treatment to the minor's
- 18 parent or legal guardian to the extent the mental health care provider de-
- 19 termines the disclosure is clinically appropriate and will serve the best in-
- 20 terests of the minor's treatment.
- 21 "(c) If the mental health care provider assesses the minor to be at serious
- 22 and imminent risk of a suicide attempt but inpatient treatment is not nec-
- 23 essary or practicable:
- 24 "(A) The mental health care provider shall disclose relevant information
- 25 about the minor to and engage in safety planning with the minor's parent,
- legal guardian or other individuals the provider reasonably believes may be
- 27 able to prevent or lessen the minor's risk of a suicide attempt.
- 28 "(B) The mental health care provider may disclose relevant information
- 29 regarding the minor's treatment and diagnosis that the mental health care
- 30 provider determines is necessary to further the minor's treatment to those

- organizations, including appropriate schools and social service entities, that
- 2 the mental health care provider reasonably believes will provide treatment
- 3 support to the minor to the extent the mental health care provider deter-
- 4 mines necessary.
- 5 "(d) Except as provided in ORS 109.675 (2) and paragraphs (a) and (b) of
- 6 this subsection, if a mental health care provider has provided the minor with
- 7 the opportunity to object to the disclosure and the minor has not expressed
- 8 an objection, the mental health care provider may disclose information re-
- 9 lated to the minor's treatment and diagnosis to individuals, including the
- 10 minor's parent or legal guardian, and organizations when the information
- 11 directly relates to the individual's or organization's involvement in the
- 12 minor's treatment.
- "(3) Notwithstanding subsection (2)(c)(A) of this section, a mental health
- care provider is not required to disclose to an individual the [minor's]
- 15 treatment and diagnosis information of a minor the mental health care
- provider is providing services to pursuant to ORS 109.675 (1) [to an in-
- 17 dividual if the mental health care provider:
- "(a) Reasonably believes the individual has abused or neglected the minor
- or subjected the minor to domestic violence or may abuse or neglect the
- 20 minor or subject the minor to domestic violence;
- 21 "(b) Reasonably believes disclosure of the minor's information to the in-
- 22 dividual could endanger the minor; or
 - "(c) Determines that it is not in the minor's best interest to disclose the
- 24 information to the individual.
- 25 "(4) Nothing in this section is intended to limit a mental health care
- 26 provider's authority to disclose information related to the minor:
- "(a) With the minor's consent[.]; or
- 28 "(b) Without the minor's consent, if:
- 29 "(A) The information is related to the minor's chemical depend-
- 30 **ency**;

"(B) The disclosure is to the minor's parent;

- "(C) The parent consented to the minor's chemical dependency treatment on the minor's behalf; and
- "(D) The minor objected to the treatment or did not otherwise consent to the treatment.
- "(5) If a mental health care provider discloses a minor's information as provided in subsection (2) of this section in good faith, the mental health care provider is immune from civil liability for making the disclosure without the consent of the minor.
- "SECTION 5. Section 1 of this 2024 Act and the amendments to ORS 109.675, 109.680 and 430.397 by sections 2 to 4 of this 2024 Act apply to treatment provided or admission for treatment occurring, and information and records related to such treatment or admission, on or after the effective date of this 2024 Act.
- "SECTION 6. This 2024 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2024 Act takes effect on its passage."
