Memorandum

PREPARED FOR: Interim Committees related to health

DATE: September 12, 2025

BY: LPRO Staff

RE: Preliminary Report on Behalf of the Task Force on

Regional Behavioral Health Accountability



This memorandum provides an update on the work of the **Joint Task Force on Regional Behavioral Health Accountability**, including

- background on the Task Force charge outlined in <u>House Bill 4002</u> (2024),
- an overview of Task Force membership and leadership,
- a description of the initial assessment and planning work completed,
- upcoming Task Force meetings, and
- plans for development of forthcoming recommendations and a report to the Legislative Assembly by December 15, 2025.

This memorandum was prepared by staff from the Legislative Policy and Research Office (LPRO) and approved by the Task Force on 9/8/2025.

Background – House Bill 4002 Requirements

House Bill 4002, enacted during the 2024 short session, established the Joint Task Force on Regional Behavioral Accountability. Prior to 2024, the possession of controlled substances was decriminalized via Ballot Measure 110 (the "Drug Addiction Treatment and Recovery Act") in November 2020. The primary focus of HB 4002 was the reintroduction of potential criminal penalties for the possession of controlled substances. HB 4002 created pathways for individuals cited for drug possession to avoid criminal penalties through the successful completion of diversion/deflection, whereby a person cited for drug possession may voluntarily seek treatment for substance use in lieu of arrest/citation. Recognizing the additional strain that these new treatment pathways could put on the state's behavioral health system, a number of other provisions aimed at mitigating these impacts were included in HB 4002, including establishment of the Joint Task Force on Regional Behavioral Health Accountability, to develop recommendations to improve governance and evidence-based funding decisions.

The Task Force is directed to develop recommendations to

- a) improve collaboration and accountability across federal, state and local behavioral health and substance use disorder treatment programs and funding:
- b) ensure equitable outcomes in publicly supported treatment settings across Oregon communities;
- c) provide greater cost efficiencies in the continuum of care of Oregon's behavioral health system; and
- d) establish broad access to methadone and other opioid use disorder medications through mobile devices, telehealth, and pharmacy-based

services to measurably increase the engagement statewide of individuals with opioid use disorder in opioid use disorder treatment.

The Legislative Assembly directed the Task Force to submit preliminary recommendations by September 15, 2025, and final recommendations by December 15, 2025. Task Force appointments were finalized in September of 2024, allowing the Task Force to begin meeting in early November and to hold three meetings before the commencement of the 2025 legislative session. Capacity considerations limited the ability for task forces to meet during session; the Joint Task Force on Regional Behavioral Health Accountability was limited to one meeting during this period, which spanned January 21 to June 27, 2025.

The Task Force is providing this status update on its planned work and will submit its full recommendations to the assembly in its final December report.

Task Force Overview

At the first meeting of the Task Force November 1, members elected Senators Kate Lieber and Dick Anderson as Co-Chairs.

As directed in HB 4002, Task Force membership represents a large range of stakeholders across Oregon's behavioral health systems, including

- The Oregon Health Authority and Department of Human Services:
- The Alcohol and Drug Policy Commission;
- coordinated care organizations, hospitals, pharmacists, and the insurance industry;
- behavioral health workers and providers, including county mental health providers; and
- Oregon cities, counties, and tribal populations

A complete list of Task Force members is included in Exhibit 1.

EXHIBIT 1: TASK FORCE MEMBERS

Co-Chair Sen. Kate Lieber

Co-Chair Sen. Dick Anderson

Rep. Darcey Edwards

Rep. Rob Nosse

Marris Alden

Dee Butler

Andrew Cherry

Ebony Clarke

Annaliese Dolph

Melissa Eckstein

Ann Ford

Bennett Garner

Ana Gonzalez

Amanda Gray

Holly Harris

Mahad Hassan

Heather Jefferis

Kimberly Lindsay

Alison Noice

Korin Richardson

Jennifer Sewitsky

John Shafer

Michele Vowell

Nan Waller

Scott Winkels

Lamar Wise



Initial Assessment and Planning

Task Force members engaged in a needs assessment survey to gather preliminary information regarding member perspectives on key components of HB 4002 and the Task Force charge, as well as to identify overarching goals, policy opportunities for future recommendations, and emerging priorities among Task Force membership.

Member responses were analyzed by staff and a <u>summary</u> was <u>presented</u> to the Task Force during their December 9 <u>meeting</u>.

Members identified three initial overarching priority areas for developing Task Force recommendations, high-level themes are expanded upon in the <u>Needs Assessment summary</u> and included

- achieving a statewide behavioral health system,
- aligning governance and funding structures, and
- increasing system transparency, particularly regarding performance and funding investment.

Task Force members identified both process and outcome-specific goals for their work. Outcome goals included

- concrete recommendations with measurable outcomes;
- measurable improvements across Oregon's public behavioral health system with priorities for the client/patient, organizational, provider, payor, and governance levels; and
- an overarching vision for Oregon's public behavioral health system.

Members identified several process goals to consider when approaching their work

- defining the problem and operationalizing key terms,
- agreeing to goals that are realistic given the timeline,
- understanding the current landscape of behavioral health care in Oregon, and
- balancing information gathering with engaging in meaningful discussion.



Past and Upcoming Task Force Meetings

EXHIBIT 2: TASK FORCE MEETING AND EVENT TIMELINE



- November 1: Initial Organizational and Informational Meeting.
 - Election of Task Force Co-Chairs, review of HB 4002 requirements, needs assessment preview and kickoff.
- <u>December 9</u>: Landscape Overview.
 - Oregon's Behavioral Health Landscape, National Behavioral Health State Rankings using SAMHSA data, discussion.
- <u>January 6</u>: Capacity and Coordination.
 - Oregon's Behavioral Health Coordination Center and Mental Health Treatment Capacity Model, discussion.
- January 21: Convening of 2025 Legislative Session
- May 2: Oregon's Behavioral Health Funding Landscape.
 - Mid-Session Informational Meeting; presentation of LPRO research findings, discussion.
- June 27: Adjournment of 2025 Legislative Session
- July 7: Recent Behavioral Health System Changes.
 - Lessons from the Governor's Office convening of regional behavioral health discussions, updates on County Financial Assistance Agreements, highlights from the 2025 legislative session, discussion.
- August 4: State Models of Regional Coordination.
 - Presentations from Colorado and Arizona, presentation of additional LPRO research findings, discussion.
- September 8: Regional Coordination Continued.
 - Presentation from Minnesota, LPRO summary of other state models, discussion.
- October 6: Task Force Recommendation Development.
 - Discussion of initial proposal(s).



- November 3: Finalize Task Force Recommendations.
 - Task Force discussion and refinement of ideas for final report, opportunity for public comment.
- December 8: Adoption of Task Force Report.
 - Final vote.

Exhibit 2 shows a visual representation of the Task Force timeline, including meeting dates and other relevant events. Dates and topics for forthcoming meetings may change as the Co-Chairs develop the agendas.

Forthcoming Report and Recommendations

As required in HB 4002, the Task Force will submit its final recommendations to the interim committees of the Legislative Assembly related to health no later than December 15, 2025.

On July 4, 2025, President Trump signed <u>H.R. 1</u> (the "One Big Beautiful Bill Act") into law. On August 11, the Oregon Department of Administrative Services (DAS) released a <u>report</u> outlining the preliminary estimated impacts of H.R. 1 on state agencies and programs, including impacts to the Oregon Health Authority and Department of Human Services. At the time of this report's finalization and submission, the Task Force was still considering how the potential impacts of H.R.1 should impact Task Force recommendations.

Task Force meeting dates, agendas, and supporting materials for the 2025-2026 interim, materials from meetings held during the 2023-2024 interim, as well as materials from the 2025-2026 interim, as well as materials from the 2025-2025-2025 interim, as well as materials from the 2025-2025-2025 interim, as well as materials from the 2025-2025-2025 interim, as well as materials from the 2025-2025-2025 interim, as well as materials from the 2025-2025-2025 interim, as well as materials from the 2025-2025-2025 interim, as well as materials from the 2025-2025 interim, as well as materials from the 2025-2025 interim, as well as materials from the 2025-2025 interim from the 2025-2025 interim from the <a href="2025-

