HB 2621 STAFF MEASURE SUMMARY

House Committee On Health Care

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WHAT THE MEASURE DOES:

Defines terms. Requires the Oregon Health Authority (OHA) to establish or contract for a statewide mental health crisis support access line to provide hospitals specified services. Requires crisis support access line to initiate contact within 48 hours of a patient's release from hospital. Directs OHA to report on barriers to care within communities and recommendations to increase access to behavioral health providers.

REVENUE: May have revenue impact, but no statement yet issued. FISCAL: May have fiscal impact, but no statement yet issued.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

Oregon State University (OSU) released a legislatively mandated report in 2016 highlighting the issue of "boarding" patients with mental illnesses in hospital emergency departments (EDs) (Senate Bill 5526, 2015). "Boarding" refers to patients with mental illnesses in a hospital ED who are waiting for beds in appropriate settings. The report identified factors that contribute to ED "boarding," outlined the impact of the problem, including 14.6 percent of ED visits attributed to psychiatric reasons, and proposed nine potential solutions. The OSU researchers found that during a one-year period, 2.1 percent of all hospital ED visits were psychiatric ED boarding episodes (29,763 visits); average boarding time for psychiatric and non-psychiatric visits were 18 and 17 hours respectively; and the cost of an ED psychiatric visit was higher than average per-visit cost. Identified causes of ED "boarding" are lack of community outpatient treatment and crisis response services, severity of psychiatric conditions, and limited inpatient resources.

House Bill 2621 creates a statewide mental health crisis support access line to aid hospitals in treating individuals experiencing a behavioral health crisis.