

SB 134 A -A2 STAFF MEASURE SUMMARY

House Committee On Health Care

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Meeting Dates: 5/14

WHAT THE MEASURE DOES:

Requires criteria adopted by the Oregon Health Authority (OHA) for coordinated care organizations (CCOs) to include requirement that CCOs publish online information to educate members about behavioral health best practices, care quality expectation, screening practice, treatment options, and other support resources available for members who have mental illnesses or substance use disorders. Takes effect on 91st day following adjournment sine die.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

-A2 Authorizes OHA to establish standards to accept tribal-based practices for mental health and substance use prevention service for individual who are Native American or Alaska Native. Specifies tribal-based practices are equivalent to evidence-based practices and that Medicaid will reimburse for tribal-based practices.

REVENUE: No revenue impact.

FISCAL: Indeterminate.

BACKGROUND:

With the passage of House Bill 3650 (2011) and Senate Bill 1580 (2012), the Legislative Assembly authorized the delivery of Oregon Health Plan (Medicaid) services through coordinated care organizations (CCOs). One of the key changes emphasized by the CCO model has been the integration and coordination of physical and behavioral/mental health services at the community level. In 2016, the Oregon Health Authority (OHA) convened the Behavioral Health Collaborative (BHC) to bring together providers, patients, and other stakeholders to develop recommendations to help create a coordinated, seamless, and patient-centered health care system. The BHCs recommendations included consideration of standardized protocols for identification, assessment, coordination of care, and treatment across entry points. In 2018, the Oregon Health Policy Board released a comprehensive set of policy recommendations referred to as CCO 2.0 that included a focus on improving the behavioral health system and addressing barriers to care.

Senate Bill 134 A requires CCOs to publish a standardized format with service information for persons who have mental illnesses or substance use disorders.

1st Chamber vote (Senate): Ayes, 29; Excused, 1.