

HB 3165 A STAFF MEASURE SUMMARY

Joint Committee On Ways and Means

Prepared By: Kim To, Budget Analyst

Meeting Dates: 6/10

WHAT THE MEASURE DOES:

Directs the Oregon Health Authority (OHA) to consult with the Department of Education (DOE) to select 10 school or education service districts to receive grants for planning and technical assistance to support school-based health care. Specifies grant criteria. Requires grantees to contract with a nonprofit organization with experience in community projects to facilitate planning and provide technical assistance. Requires grantees to solicit community participation in the planning process including federally qualified health centers (FQHCs) and coordinated care organizations (CCOs) in the education service district. Directs OHA to contract with a statewide nonprofit organization to create tools and provide support to grantees. Directs OHA to select six school-based health center (SBHC) medical sponsors to receive operating funds to open a state-certified SBHC after two years of planning. Allows OHA to select up to four school or education service districts for a five-year pilot program to provide services in an alternative model. Requires entities selected for pilot program to partner with a CCO, FQHC, a local public health authority or other major medical sponsor, and to identify funding for service costs. Requires selected districts to establish a school-based health center or propose an alternative model to OHA and the Legislative Assembly by end of fourth year of pilot. Requires OHA to work with the Centers for Medicare and Medicaid Services to identify additional federal funding for SBHC expenditures. Appropriates \$950,000 of the General Fund. Declares emergency, effective on passage.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

A2: Defines regional health equity coalition and specifies that each grantee must solicit community participation in the planning process, including the participation of the local public health authority, any federally qualified health centers located in the district, a regional health equity coalition, if any, serving the district, and every coordinated care organization with members residing in the district.

A4: Makes clarifying changes including: requiring grantees to consult with a nonprofit organization to facilitate the planning process; permitting instead of requiring OHA to contract with a statewide nonprofit organization to create tools and provide support to grantees; and allowing OHA to select up to four school districts for five-year grants contingent upon available funding.

BACKGROUND:

According to the Oregon Health Authority, school-based health centers (SBHCs) are required to provide physical, mental, and preventive services to all students regardless of the student's ability to pay. SBHCs are located within a school or on school grounds. As of July 2017, there were 78 certified SBHCs in 25 counties, 43 located in high schools, seven in middle schools, 12 in elementary schools, and 16 at combined-grade campuses. Approximately 77 percent of SBHCs operate as federally qualified health centers and 47 percent are recognized as patient-centered primary care homes. During the 2016-2017 school year, SBHCs provided over 114,000 individual visits for 35,000 clients with 61 percent of visits for primary care, 37 percent for behavioral health, and two percent for dental care. Utilization of SBHCs rose between the 2014-2015 and 2016-2017 school year, from 92,000 to 114,000 visits, attributed to an increase in availability of mental health and dental services, and the opening of eight new SBHCs. (Oregon Health Authority, 2018 report.) Among SBHC clients, approximately 49 percent were

HB 3165 A STAFF MEASURE SUMMARY

enrolled in Medicaid, 19 percent in private coverage, 27 percent unknown or uninsured, and five percent in other public insurance.

House Bill 3165 funds schools and education service districts to plan for and pilot school-based health services.

PRELIMINARY