

HB 2627 A STAFF MEASURE SUMMARY

House Committee On Health Care

Action Date: 04/09/19

Action: Do pass with amendments and be referred to Ways and Means by prior reference.
(Printed A-Eng.)

Vote: 10-0-1-0

Yeas: 10 - Alonso Leon, Drazan, Greenlick, Hayden, Keny-Guyer, Mitchell, Noble, Nosse, Prusak, Salinas

Exc: 1 - Boles

Fiscal: Fiscal impact issued

Revenue: Revenue impact issued

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Meeting Dates: 2/5, 4/9

WHAT THE MEASURE DOES:

Defines Recovery Community Organization (RCO) as a 501(c)(3) taxexempt organization managed by individuals in recovery from substance use disorders, offering peer support services for individuals seeking or in recovery from substance use disorders. Requires the Oregon Health Authority (OHA) to contract with at least four RCOs, each in a different county. Specifies that RCO under contract with OHA may use an existing nonprofit organization as its fiscal sponsor and solicit and accept funds from public or private sources. Requires RCO establishment and operation by January 1, 2021. Requires OHA to appoint a full-time Recovery Advocate to administer, develop, and maintain the RCO network. Authorizes the Alcohol and Drug Policy Commission to establish criteria for selection of RCO locations and annual performance goals by rule. Directs OHA to use \$150,000 for outreach in rural areas to help individuals connect with peer support services using telemedicine. Modifies distribution of moneys transferred from Oregon Marijuana Account.

ISSUES DISCUSSED:

- Role and impact of peer recovery centers
- Closing the gap in recovery services through creation of recovery community organizations (RCOs)
- Peer-led and peer-managed organizations in Oregon
- Different types of peer recovery services, community-based organizations
- Investments in peer recovery centers among public and private payers
- Funding sources for the proposed program in 2017-19 and 2019-21 biennia
- Elimination of the original requirement specifying centers were to be located in cities with a population of 100,000 or more

EFFECT OF AMENDMENT:

Replaces the measure.

BACKGROUND:

The Centers for Medicare and Medicaid Services recognize peer-delivery services as a tool for treating behavioral health disorders. Peer-delivered services often involve outreach, social support, problem-solving, help navigating community and medical services, and recovery promotion such as wellness skills. Such services are provided by individuals who are receiving mental health services or are in recovery from addiction disorders. The Oregon Health Authority (OHA) operates a training and certification program for peer support specialists.

House Bill 2627-A directs OHA to operate at least four peer-managed recovery centers in Oregon.