

# House Bill 2627

Sponsored by Representative SANCHEZ; Senator MONNES ANDERSON (Pre-session filed.)

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires Oregon Health Authority to operate peer managed recovery centers in cities in this state with populations of 100,000 or more to provide peer mentor support and peer support services to individuals in recovery from addiction. Specifies requirements for centers.

## A BILL FOR AN ACT

1  
2 Relating to peer support for individuals in recovery from substance use disorders; creating new  
3 provisions; and amending ORS 430.256.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1. (1) As used in this section:**

6 (a) **“Peer mentor support” means mentoring provided by a peer support specialist.**

7 (b) **“Peer support services” means supportive services provided by a peer support spe-**  
8 **cialist.**

9 (c) **“Peer support specialist” has the meaning given that term in ORS 414.025.**

10 (2) **The Oregon Health Authority shall operate a peer managed recovery center in every**  
11 **city in this state that has a population of 100,000 or more. Each peer managed recovery**  
12 **center shall, at a minimum:**

13 (a) **Offer culturally specific peer mentor support 24 hours per day;**

14 (b) **Maintain a 24-hour telephone advice line;**

15 (c) **Offer in-person peer support services for 12 hours each day;**

16 (d) **Host five cognitive behavioral therapy sessions each day using a range of recovery**  
17 **models; and**

18 (e) **Establish a memorandum of understanding with all residential and outpatient sub-**  
19 **stance use disorder treatment providers within a 100-mile radius of the center to enable the**  
20 **center to connect with individuals completing treatment and advise the individuals of the**  
21 **services available from the center.**

22 **SECTION 2. ORS 430.256 is amended to read:**

23 430.256. (1) The Director of the Oregon Health Authority shall administer alcohol and drug  
24 abuse programs, including but not limited to programs or components of programs described in ORS  
25 430.397 to 430.401 and 475.225 **and section 1 of this 2019 Act** and ORS chapters 430 and [801 to  
26 822] **813.**

27 (2) Subject to ORS 417.300 and 417.305, the director shall:

28 (a) Report to the Alcohol and Drug Policy Commission on accomplishments and issues occurring  
29 during each biennium, and report on a new biennial plan describing resources, needs and priorities  
30 for all alcohol and drug abuse programs.

31 (b) Develop within the Oregon Health Authority priorities for alcohol and drug abuse programs

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1 and activities.

2 (c) Conduct statewide and special planning processes that provide for participation from state  
3 and local agencies, groups and individuals.

4 (d) Identify the needs of special populations including minorities, elderly, youth, women and in-  
5 dividuals with disabilities.

6 (e) Subject to ORS chapter 183, adopt such rules as are necessary for the performance of the  
7 duties and functions specified by this section.

8 (3) The director may apply for, receive and administer funds, including federal funds and grants,  
9 from sources other than the state. Subject to expenditure limitation set by the Legislative Assembly,  
10 funds received under this subsection may be expended by the director:

11 (a) For the study, prevention or treatment of alcohol and drug abuse and dependence in this  
12 state.

13 (b) To provide training, both within this state and in other states, in the prevention and treat-  
14 ment of alcohol and drug abuse and dependence.

15 (4) The director shall, in consultation with state agencies and counties, establish guidelines to  
16 coordinate program review and audit activities by state agencies and counties that provide funds to  
17 alcohol and drug prevention and treatment programs. The purpose of the guidelines is to minimize  
18 duplication of auditing and program review requirements imposed by state agencies and counties on  
19 alcohol and drug prevention and treatment programs that receive state funds, including programs  
20 that receive beer and wine tax revenues under ORS 430.380 and 471.810.

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