80th OREGON LEGISLATIVE ASSEMBLY--2019 Regular Session

Senate Bill 1

Sponsored by Senator COURTNEY (at the request of Governor Kate Brown, Chief Justice Martha L. Walters) (Presession 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**.

Establishes Statewide System of Care Task Force. Directs task force to make series of reports and recommend legislation to Legislative Assembly and Governor. Directs task force to make recommendations to Director of Oregon Health Authority, Director of Oregon Youth Authority and Director of Human Services regarding systems of care. Directs task force to create data dashboard regarding youths being served by Oregon Youth Authority, Oregon Health Authority and Department of Human Services. Appropriates moneys from General Fund to Oregon Health Authority for biennial expenses related to task force. Directs Oregon Health Authority, in consultation with Department of Human Services and

Directs Oregon Health Authority, in consultation with Department of Human Services and Oregon Youth Authority, to prepare and publish requests for proposals for regional evaluation and care teams. Appropriates moneys from General Fund to Department of Human Services for biennial expenses related to regional evaluation and care teams.

Declares emergency, effective July 1, 2019.

1	A BILL FOR AN ACT
2	Relating to youth with specialized needs; and declaring an emergency.
3	Be It Enacted by the People of the State of Oregon:
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5	STATEWIDE SYSTEM OF CARE TASK FORCE
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7	SECTION 1. (1) As used in this section:
8	(a) "Services and supports" means public, private and community resources that assist
9	youth in the achievement of positive outcomes.
10	(b) "System of care" means a coordinated network of services including education, child
11	welfare, public health, primary care, pediatric care, juvenile justice, mental health treat-
12	ment, substance use treatment, developmental disability services and any other services and
13	supports to the identified population that integrates care planning and management across
14	multiple levels, that is culturally and linguistically competent, that is designed to build
15	meaningful partnerships with families and youth in the delivery and management of services
16	and the development of policy and that has a supportive policy and management
17	infrastructure.
18	(c) "Youth" means an individual 25 years of age or younger.
19	(2) The Statewide System of Care Task Force is established.
20	(3) The task force consists of 22 members appointed as follows:
21	(a) The Chief Justice of the Supreme Court shall appoint one representative from the
22	Judicial Department.
23	(b) The Governor shall appoint:
24	(A) Two members who are representatives of the Department of Human Services with
25	extensive knowledge of systems of care, one of whom has direct experience with develop-

mental disabilities programs. 1 2 (B) One member who is a representative of the Oregon Youth Authority with extensive knowledge of systems of care. 3 (C) One member who is a representative of the Oregon Health Authority with extensive 4 knowledge of systems of care. 5 (D) One member who is a representative of the Department of Education. 6 (E) One member who is a representative of a coordinated care organization meeting the 7 criteria adopted by the Oregon Health Authority under ORS 414.625. 8 9 (F) One psychiatrist, one psychologist and one pediatric physician, each of whom have clinical experience with youth. 10 11 (G) One member who is a representative of an entity that offers commercial insurance. 12(H) Three members who are representatives of agencies that provide different services and supports to youth and families of youth. 13 (I) One member who is a representative of organizations that advocate for youth. 14 15 (J) One member who is a representative of organizations that advocate for families of youth with specialized needs. 16 (K) Two members of the public, each of whom are family members of: 1718 (i) Persons with developmental disabilities or mental illness; or 19 (ii) Persons who are currently or were previously in the foster care system or the youth criminal justice system. 20(L) Two members of the public who are no more than 21 years of age and who: 21 22(i) Are persons with developmental disabilities or mental illness; or 23(ii) Are currently or were previously in the foster care system or the youth criminal justice system. 24 (M) A county juvenile department director. 25(N) A county mental health program director. 2627(4) The task force shall: (a) Provide recommendations to the Director of the Oregon Health Authority, the Di-28rector of the Oregon Youth Authority and the Director of Human Services as necessary for 2930 the agencies to maintain and strengthen the systems of care. 31 (b) Make recommendations to the Director of the Oregon Health Authority, the Director of the Oregon Youth Authority and the Director of Human Services to reduce barriers to 32implementation of systems of care. 33 34 (c) Create a data dashboard to include, at a minimum, the following regional and statewide data: 35(A) The number of youth being served by the Oregon Youth Authority, the Oregon Health 36 37 Authority and the Department of Human Services; 38 (B) The number of youth identified in this paragraph who are currently living in each of the following: 39 (i) At home; 40 (ii) In substitute care; or 41 (iii) In specific placement; 42 (C) The number of youth identified in this paragraph who were in danger of being re-43 moved but who have been able to remain in their homes; 44

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45 (D) The number of youth identified in this paragraph who are living in hotels, out-of-state

placements or emergency department boarding; 1 2 (E) The length of time the youth identified in this paragraph have been waiting to access services or appropriate placements; and 3 (F) Outcomes of services that are provided to youth by the Oregon Youth Authority, the 4 Oregon Health Authority and the Department of Human Services. 5 (d) Continually monitor and update the data described in paragraph (c) of this subsection, 6 with a specific focus on the number of youth placed in hotels, out-of-state placements, 7 emergency department boarding or Oregon Youth Authority custody. 8 9 (5) A majority of the members of the task force constitutes a quorum for the transaction 10 of business. (6) Official action by the task force requires the approval of a majority of the members 12of the task force. 13 (7) The task force shall elect one of its members to serve as chairperson. (8) If there is a vacancy for any cause, the appointing authority shall make an appoint-15 ment to become immediately effective. (9) The task force shall meet at times and places specified by the call of the chairperson 16 or of a majority of the members of the task force. 18 (10) The task force may adopt rules necessary for the operation of the task force. (11) The task force shall submit the following reports in the manner provided in ORS 192.245, including recommendations for legislation, to an interim committee of the Legisla-20tive Assembly related to youth with specialized needs, and to the Governor: 22(a) No later than May 1, 2020, a description of all gains agencies have made in strengthening the service continuum, including the work done by agencies participating in systems 23of care, and a description of the data the task force is tracking to demonstrate outcomes of enhanced services and supports. 25(b) No later than June 1, 2020, a description of the data dashboard created under sub-26section (4)(c) of this section, with instructions for how to access the data. (c) No later than September 15, 2020, a description of the task force's recommendations 28to resolve the barriers and challenges to implementation of systems of care. 2930 (d) No later than February 1, 2021, recommendations regarding the following: 31 (A) Propose legislation to establish a single statewide system of accountability to best serve youth who are at risk of developing emotional, behavioral or substance use related 32needs, and who are involved with two or more systems of care. 33 34 (B) Opportunities for braided and blended funding, including consideration of grants to 35agencies participating in systems of care to support innovation and the shift to more community-based and home-based services and supports. 36

37 (12) The Oregon Health Authority, in coordination with the Department of Human Ser-38 vices, shall provide staff support to the task force.

(13) Members of the task force are not entitled to compensation or reimbursement for 39 expenses and serve as volunteers on the task force. 40

(14) All agencies of state government, as defined in ORS 174.111, are directed to assist 41 the task force in the performance of the duties of the task force and, to the extent permitted 42 by laws relating to confidentiality, to furnish information and advice the members of the task 43 force consider necessary to perform their duties. 44

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REGIONAL EVALUATION AND CARE TEAMS 1 2 SECTION 2. (1) The Department of Human Services, the Oregon Health Authority and 3 the Oregon Youth Authority may contract with a public or private provider to establish re-4 gional evaluation and care teams to provide services to youth, as defined in ORS 418.975, who 5 have or are at risk of developing emotional, behavioral or substance use related needs, and 6 who are involved with two or more systems of care, as defined in ORS 418.975. 7 (2)(a) Each regional evaluation and care team includes an evaluation team and a care 8 9 planning team. (b) Each evaluation team shall include members who are: 10 (A) Behavioral health professionals and providers, including psychiatrists, developmental 11 12 pediatricians and psychologists; 13 (B) Social workers; (C) Occupational therapists; 14 15 (D) Speech therapists; and (E) Other similar professionals as appropriate. 16 (c) Each care planning team shall be individualized to the needs of the specific youth it 17 is providing care planning services to and may include members who are any of the following: 18 (A) Representatives of the evaluation team; 19 (B) Representatives of the Department of Human Services or the Oregon Health Au-20thority; 21 22(C) Family navigators; (D) Representatives of coordinated care organizations; or 23(E) Any other similar care planning professionals as appropriate. 94 (3) A regional evaluation and care team shall: 25(a) Provide evaluation of youth and referrals for treatment. 2627(b) Provide care planning and coordination for youth. (c) Increase telemedicine evaluation, assessment and treatment capacity in rural com-28munities, with specific emphasis on increasing access to psychiatric and developmental as-2930 sessments in communities that otherwise lack appropriate providers. 31 (d) Prioritize evaluation, assessment and stabilization services provided to youth in the regional evaluation and care team's region who are placed in hotels, in out-of-state facilities, 32in emergency department boarding, in county detention facilities or in the custody of the 33 34 **Oregon Youth Authority.** 35(4) The Oregon Health Authority, in consultation with the Department of Human Services and the Oregon Youth Authority, shall establish criteria for proposals, prepare and 36 37 publish requests for proposals, receive proposals and award contracts to eligible providers. 38 **APPROPRIATIONS** 39 40 SECTION 3. In addition to and not in lieu of any other appropriation, there is appropri-41 ated to the Oregon Health Authority, for the biennium beginning July 1, 2019, out of the 42 General Fund, the amount of \$_____ for the purpose of carrying out the provisions of sec-43 tion 1 of this 2019 Act. 44 SECTION 4. In addition to and not in lieu of any other appropriation, there is appropri-45

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1	ated to the Department of Human Services, for the biennium beginning July 1, 2019, out of
2	the General Fund, the amount of \$10,400,000 for the purpose of carrying out the provisions
3	of section 2 of this 2019 Act.
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5	MISCELLANEOUS
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7	SECTION 5. The requests for proposals described in section 2 of this 2019 Act must be
8	first published no later than December 1, 2019.
9	SECTION 6. (1) Section 5 of this 2019 Act is repealed on December 31, 2020.
10	(2) Section 1 of this 2019 Act is repealed on December 31, 2024.
11	SECTION 7. The unit captions used in this 2019 Act are provided only for the convenience
12	of the reader and do not become part of the statutory law of this state or express any leg-
13	islative intent in the enactment of this 2019 Act.
14	SECTION 8. This 2019 Act being necessary for the immediate preservation of the public
15	peace, health and safety, an emergency is declared to exist, and this 2019 Act takes effect
16	on July 1, 2019.
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