

**B-Engrossed**  
**Senate Bill 1552**

Ordered by the Senate February 28  
Including Senate Amendments dated February 12 and February 28

Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President (at the request of Senate Interim Committee on Mental Health)

**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.

Directs Oregon Health Authority to evaluate specified issues related to certified community behavioral health clinics and report findings and analysis to interim committees of Legislative Assembly by December 1, 2020. Sunsets June 30, 2021, or earlier if federal funding for demonstration program terminates.

Declares emergency, effective on passage.

**A BILL FOR AN ACT**

1  
2 Relating to behavioral health treatment; and declaring an emergency.

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

4 **SECTION 1. (1) The Oregon Health Authority shall administer the certified community**  
5 **behavioral health clinic demonstration program under section 223 of the Protecting Access**  
6 **to Medicare Act of 2014 (P.L. 113-93) and evaluate:**

7 **(a) Whether certified community behavioral health clinics increase access to behavioral**  
8 **health treatment for residents of this state;**

9 **(b) Whether access to services offered by certified community behavioral health clinics**  
10 **results in improved health outcomes, lower overall health care costs and improved overall**  
11 **community health;**

12 **(c) Whether the certified community behavioral health clinic model is compatible with**  
13 **the Oregon Integrated and Coordinated Health Care Delivery System established in ORS**  
14 **414.570 and whether the model assists coordinated care organizations in reducing the cost**  
15 **of care for coordinated care organization members;**

16 **(d) Whether the certified community behavioral health clinic model should be continued**  
17 **or expanded in this state;**

18 **(e) The costs of including certified community behavioral health clinic services as health**  
19 **services reimbursed by the medical assistance program, the effect of the costs on the 3.4**  
20 **percent annual rate of growth budgeted for medical assistance expenditures and the capacity**  
21 **of medical assistance program providers to meet the demand for the services;**

22 **(f) The certified community behavioral health clinic model's effect on the total cost of**  
23 **providing health care in Oregon;**

24 **(g) Potential alternative payment methodologies and value-based payments for services**  
25 **provided by certified community behavioral health clinics;**

**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       **(h) Potential risk-sharing arrangements between the state and counties in the provision**  
2 **of services by certified community behavioral health clinics; and**

3       **(i) Cost containment measures that should be considered if the certified community be-**  
4 **havioral health clinic model or a similar model is adopted.**

5       **(2) No later than December 1, 2020, the authority shall report its findings and analysis**  
6 **under subsection (1) of this section, in the manner provided in ORS 192.245, to the interim**  
7 **committees and subcommittees of the Legislative Assembly related to health and mental**  
8 **health and to the interim subcommittee of the Joint Committee on Ways and Means with**  
9 **authority over human services agencies' budgets.**

10       **SECTION 2.** **Section 1 of this 2020 Act is repealed on the earlier of:**

11       **(1) June 30, 2021; or**

12       **(2) The termination of federal funding for the demonstration program under section 223**  
13 **of the Protecting Access to Medicare Act of 2014 (P.L. 113-93).**

14       **SECTION 3.** **Notwithstanding any other provision of law, in addition to the amounts ap-**  
15 **propriated by section 1, chapter 695, Oregon Laws 2019, for the biennium ending June 30,**  
16 **2021, as modified by legislative or Emergency Board action, the amount specified for Health**  
17 **Systems, Health Policy and Analytics, and Public Health, under section 1 (1), chapter 695,**  
18 **Oregon Laws 2019, is increased by \$15,322,368, for the purpose of carrying out section 1 of**  
19 **this 2020 Act.**

20       **SECTION 4.** **Notwithstanding any other law limiting expenditures, the limitation on**  
21 **expenditures established by section 4 (1), chapter 695, Oregon Laws 2019, for the biennium**  
22 **ending June 30, 2021, as the maximum limit for payment of expenses from federal funds,**  
23 **excluding federal funds described in section 2, chapter 695, Oregon Laws 2019, collected or**  
24 **received by the Oregon Health Authority for Health Systems, Health Policy and Analytics,**  
25 **and Public Health, is increased by \$62,936,671, for the purpose of carrying out the provisions**  
26 **of section 1 of this 2020 Act.**

27       **SECTION 5.** **This 2020 Act being necessary for the immediate preservation of the public**  
28 **peace, health and safety, an emergency is declared to exist, and this 2020 Act takes effect**  
29 **on its passage.**

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