

SB 680 STAFF MEASURE SUMMARY

Senate Committee On Human Services, Mental Health and Recovery

Prepared By: C. Ross, Counsel

Meeting Dates: 3/23, 3/25, 4/8

WHAT THE MEASURE DOES:

Requires the Oregon Health Authority (OHA) to fund and monitor at least one peer-run organization that operates three peer respite centers, each capable of serving up to six persons in distress with mental illness for two weeks. Directs OHA to adopt rules establishing eligibility criteria for organization to receive funding. Specifies one center each in Portland metropolitan area, southern Oregon region, and eastern and central Oregon region. Appropriates \$2,250,000 million General Fund to OHA for biennium beginning July 1, 2021. Directs OHA to distribute \$750,000 to each center. Becomes operative January 1, 2022. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Value of peer providers to those in need of assistance; "game changer"
- Failure of medical/hospital model to treat or heal; moreover, medical/hospital model causing harm
- Financial value of successful peer support as compared to exorbitant cost of failed medical model
- Medical/hospital model treating individuals like children or prisoners; "prison with medication"
- Peer support treating individuals as guests, equals, adults
- Medical/hospital model taking away personal effects, friend and family access, dignity; responsible for stigma
- Peer support being the polar opposite; respect for individuals in need, their family and friends and self-sufficiency; "stigma-free"
- Peers capable of demonstrating recovery for one another, while providing support
- Designating one center to serve Black, indigenous, people of color
- Expanding number of centers to include the coast
- Aligning with House Bill 2980

EFFECT OF AMENDMENT:

[-1 amendment dated 4/5/21] Increases appropriation from \$2,250,000 to \$4,500,000. Requires one center to pilot services for a community of color. Refines definitions.

[-2 amendment dated 4/6/21] Adds a respite center on the coast.

BACKGROUND:

According to the National Conference of State Legislatures, states' use of peer support providers and services to improve mental health treatment and outcomes has been gaining momentum over the past decade. The Centers for Medicare and Medicaid Services ruled in 2007 to authorize Medicaid billing for such services, based on research identifying it as model, evidence-based care. Proponents and individuals who receive services and support from peers with shared experiences, assert it is more effective overall, than support offered by other providers; and that peer support can increase current service capacities, bridge gaps in care especially for those in need of short-term stabilization, lower health care costs by helping prevent emergency room visits and unnecessary, inappropriate hospitalizations, as well as result in expanded access to appropriate care.

Senate Bill 680 appropriates \$2,250,000 million to the Oregon Health Authority (OHA) to fund at least one peer-run organization to provide peer respite centers in the Portland metropolitan area, the southern region of Oregon, and the eastern and central region of Oregon, operative January 1, 2022.