# SB 564 STAFF MEASURE SUMMARY

# Senate Committee On Health Care

Prepared By:Maya Green, LPRO AnalystSub-Referral To:Joint Committee On Ways and MeansMeeting Dates:2/1, 3/20

# WHAT THE MEASURE DOES:

Provides funding for five additional regional health equity coalitions for a statewide total of 15. Funds two additional full-time staff members for each coalition. Provides funding for facility costs, childcare, transportation, and interpretation and translation services. Funds stipends for coalition members to attend meetings. Makes appropriations from the General Fund. Declares emergency, effective July 1, 2023.

REVENUE: No revenue impact

FISCAL: Fiscal impact issued

### **ISSUES DISCUSSED:**

• Process for determining where Regional Health Equity Coalitions (RHECs) will be established

# **EFFECT OF AMENDMENT:**

No amendment.

### BACKGROUND:

<u>Regional Health Equity Coalitions</u> (RHECs) are collaborative, community-led, cross-sector groups organized regionally to identify and address health equity issues. RHECs work with communities to identify sustainable, long-term, policy, system, and environmental solutions to increase health equity for communities of color, Tribal communities, immigrants, refugees, migrant and seasonal farmworkers, individuals and families with low income, people with disabilities, and LGBTQ communities, with communities of color as the leading priority.

Oregon's first three RHECs were established beginning in 2011 with funding from state and federal sources (link to <u>2017 Oregon Regional Health Equity Coalitions Evaluation Report)</u>. The first RHECs included the Oregon Health Equity Alliance (Clackamas, Multnomah, and Washington Counties), Linn Benton Health Equity Alliance (Linn and Benton Counties), and the Confederated Tribes of Warm Springs. In 2014, with additional funding from the Centers for Medicare & Medicaid Innovation, the initiative expanded to include Mid-Columbia Health Equity Advocates (Hood River and Wasco Counties) and SO Health-E (Jackson and Josephine Counties).

Senate Bill 70 (2021) directed OHA to provide grants to existing and prospective RHECs and to work with each coalition to serve priority populations, as defined in the bill, throughout Oregon. Additionally, OHA was directed to ensure adequate staffing to support grantees with ongoing technical assistance, contract administration, program planning, and operational support. In August of 2022, OHA announced the formation of new RHECs including the Mid-Willamette Valley Health Equity Coalition (Marion and Polk Counties), South Coast Equity Coalition (Coos and Curry Counties), Transponder (Lane and Douglas Counties). The Eastern Oregon Health Equity Alliance expanded to include a coalition for Morrow and Union Counties in addition to its existing coalition for Malheur and Umatilla Counties.

Senate Bill 564 provides funding for five additional regional health equity coalitions, two additional full-time staff for each coalition, and facility costs, childcare, interpretation, and stipends for coalition members to attend meetings.