

House Bill 2993

Sponsored by Representative TRAN (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 adopt by rule qualification criteria for community education workers as additional category of traditional health workers.

Takes effect on 91st day following adjournment sine die.

A BILL FOR AN ACT

1
2 Relating to community education workers; creating new provisions; amending ORS 413.600, 414.025
3 and 414.665; and prescribing an effective date.

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

5 **SECTION 1.** ORS 414.665 is amended to read:

6 414.665. (1) As used in this section, "traditional health worker" includes any of the following:

7 (a) A community health worker.

8 (b) A personal health navigator.

9 (c) A peer wellness specialist.

10 (d) A peer support specialist.

11 (e) A doula.

12 (f) A tribal traditional health worker.

13 **(g) A community education worker.**

14 (2) In consultation with the Traditional Health Workers Commission established under ORS
15 413.600, the Oregon Health Authority, for purposes related to the regulation of traditional health
16 workers, shall adopt by rule:

17 (a) The qualification criteria, including education and training requirements, for the traditional
18 health workers utilized by coordinated care organizations;

19 (b) Appropriate professional designations for supervisors of the traditional health workers; and

20 (c) Processes by which other occupational classifications may be approved to supervise the tra-
21 ditional health workers.

22 (3) The criteria and requirements established under subsection (2) of this section:

23 (a) Must be broad enough to encompass the potential unique needs of any coordinated care or-
24 ganization;

25 (b) Must meet requirements of the Centers for Medicare and Medicaid Services to qualify for
26 federal financial participation; and

27 (c) May not require certification by the Home Care Commission.

28 **SECTION 2.** ORS 414.025 is amended to read:

29 414.025. As used in this chapter and ORS chapters 411 and 413, unless the context or a specially
30 applicable statutory definition requires otherwise:

31 (1)(a) "Alternative payment methodology" means a payment other than a fee-for-services pay-

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 ment, used by coordinated care organizations as compensation for the provision of integrated and
 2 coordinated health care and services.

3 (b) “Alternative payment methodology” includes, but is not limited to:

- 4 (A) Shared savings arrangements;
- 5 (B) Bundled payments; and
- 6 (C) Payments based on episodes.

7 (2) “Behavioral health assessment” means an evaluation by a behavioral health clinician, in
 8 person or using telemedicine, to determine a patient’s need for immediate crisis stabilization.

9 (3) “Behavioral health clinician” means:

- 10 (a) A licensed psychiatrist;
- 11 (b) A licensed psychologist;
- 12 (c) A licensed nurse practitioner with a specialty in psychiatric mental health;
- 13 (d) A licensed clinical social worker;
- 14 (e) A licensed professional counselor or licensed marriage and family therapist;
- 15 (f) A certified clinical social work associate;
- 16 (g) An intern or resident who is working under a board-approved supervisory contract in a
 17 clinical mental health field; or
- 18 (h) Any other clinician whose authorized scope of practice includes mental health diagnosis and
 19 treatment.

20 (4) “Behavioral health crisis” means a disruption in an individual’s mental or emotional stability
 21 or functioning resulting in an urgent need for immediate outpatient treatment in an emergency de-
 22 partment or admission to a hospital to prevent a serious deterioration in the individual’s mental or
 23 physical health.

24 (5) “Behavioral health home” means a mental health disorder or substance use disorder treat-
 25 ment organization, as defined by the Oregon Health Authority by rule, that provides integrated
 26 health care to individuals whose primary diagnoses are mental health disorders or substance use
 27 disorders.

28 (6) “Category of aid” means assistance provided by the Oregon Supplemental Income Program,
 29 aid granted under ORS 411.877 to 411.896 and 412.001 to 412.069 or federal Supplemental Security
 30 Income payments.

31 **(7) “Community education worker” means an individual who meets qualification criteria**
 32 **adopted by the authority under ORS 414.665 and who:**

- 33 **(a) Has completed training in child development;**
- 34 **(b) Has completed training in culturally responsive pedagogy and practices that support**
 35 **parents as partners in a child’s learning and development;**
- 36 **(c) Has faced difficulties accessing education and health services that are culturally and**
 37 **linguistically appropriate;**
- 38 **(d) Works with family support systems, such as education and health care, to better**
 39 **equip those systems to meet the needs of families;**
- 40 **(e) To the extent practicable, shares ethnicity, language, socioeconomic status and life**
 41 **experiences with the residents of the community the worker serves;**
- 42 **(f) Provides education and information that is culturally appropriate to the individuals**
 43 **being served; and**
- 44 **(g) Provides members of the community with information and education about how to**
 45 **access resources for children, including but not limited to early learning education and social**

1 **services.**

2 [(7)] (8) “Community health worker” means an individual who meets qualification criteria
 3 adopted by the authority under ORS 414.665 and who:

4 (a) Has expertise or experience in public health;

5 (b) Works in an urban or rural community, either for pay or as a volunteer in association with
 6 a local health care system;

7 (c) To the extent practicable, shares ethnicity, language, socioeconomic status and life experi-
 8 ences with the residents of the community the worker serves;

9 (d) Assists members of the community to improve their health and increases the capacity of the
 10 community to meet the health care needs of its residents and achieve wellness;

11 (e) Provides health education and information that is culturally appropriate to the individuals
 12 being served;

13 (f) Assists community residents in receiving the care they need;

14 (g) May give peer counseling and guidance on health behaviors; and

15 (h) May provide direct services such as first aid or blood pressure screening.

16 [(8)] (9) “Coordinated care organization” means an organization meeting criteria adopted by the
 17 Oregon Health Authority under ORS 414.572.

18 [(9)] (10) “Dually eligible for Medicare and Medicaid” means, with respect to eligibility for en-
 19 rollment in a coordinated care organization, that an individual is eligible for health services funded
 20 by Title XIX of the Social Security Act and is:

21 (a) Eligible for or enrolled in Part A of Title XVIII of the Social Security Act; or

22 (b) Enrolled in Part B of Title XVIII of the Social Security Act.

23 [(10)(a)] (11)(a) “Family support specialist” means an individual who meets qualification criteria
 24 adopted by the authority under ORS 414.665 and who provides supportive services to and has experi-
 25 ence parenting a child who:

26 (A) Is a current or former consumer of mental health or addiction treatment; or

27 (B) Is facing or has faced difficulties in accessing education, health and wellness services due
 28 to a mental health or behavioral health barrier.

29 (b) A “family support specialist” may be a peer wellness specialist or a peer support specialist.

30 [(11)] (12) “Global budget” means a total amount established prospectively by the Oregon Health
 31 Authority to be paid to a coordinated care organization for the delivery of, management of, access
 32 to and quality of the health care delivered to members of the coordinated care organization.

33 [(12)] (13) “Health insurance exchange” or “exchange” means an American Health Benefit Ex-
 34 change described in 42 U.S.C. 18031, 18032, 18033 and 18041.

35 [(13)] (14) “Health services” means at least so much of each of the following as are funded by
 36 the Legislative Assembly based upon the prioritized list of health services compiled by the Health
 37 Evidence Review Commission under ORS 414.690:

38 (a) Services required by federal law to be included in the state’s medical assistance program in
 39 order for the program to qualify for federal funds;

40 (b) Services provided by a physician as defined in ORS 677.010, a nurse practitioner licensed
 41 under ORS 678.375, a behavioral health clinician or other licensed practitioner within the scope of
 42 the practitioner’s practice as defined by state law, and ambulance services;

43 (c) Prescription drugs;

44 (d) Laboratory and X-ray services;

45 (e) Medical equipment and supplies;

- 1 (f) Mental health services;
- 2 (g) Chemical dependency services;
- 3 (h) Emergency dental services;
- 4 (i) Nonemergency dental services;
- 5 (j) Provider services, other than services described in paragraphs (a) to (i), (k), (L) and (m) of
- 6 this subsection, defined by federal law that may be included in the state’s medical assistance pro-
- 7 gram;
- 8 (k) Emergency hospital services;
- 9 (L) Outpatient hospital services; and
- 10 (m) Inpatient hospital services.

11 [(14)] (15) “Income” has the meaning given that term in ORS 411.704.

12 [(15)(a)] (16)(a) “Integrated health care” means care provided to individuals and their families
 13 in a patient centered primary care home or behavioral health home by licensed primary care
 14 clinicians, behavioral health clinicians and other care team members, working together to address
 15 one or more of the following:

- 16 (A) Mental illness.
- 17 (B) Substance use disorders.
- 18 (C) Health behaviors that contribute to chronic illness.
- 19 (D) Life stressors and crises.
- 20 (E) Developmental risks and conditions.
- 21 (F) Stress-related physical symptoms.
- 22 (G) Preventive care.
- 23 (H) Ineffective patterns of health care utilization.

24 (b) As used in this subsection, “other care team members” includes but is not limited to:

- 25 (A) Qualified mental health professionals or qualified mental health associates meeting require-
- 26 ments adopted by the Oregon Health Authority by rule;
- 27 (B) Peer wellness specialists;
- 28 (C) Peer support specialists;
- 29 (D) Community health workers who have completed a state-certified training program;
- 30 (E) Personal health navigators; or
- 31 (F) Other qualified individuals approved by the Oregon Health Authority.

32 [(16)] (17) “Investments and savings” means cash, securities as defined in ORS 59.015, negotiable
 33 instruments as defined in ORS 73.0104 and such similar investments or savings as the department
 34 or the authority may establish by rule that are available to the applicant or recipient to contribute
 35 toward meeting the needs of the applicant or recipient.

36 [(17)] (18) “Medical assistance” means so much of the medical, mental health, preventive, sup-
 37 portive, palliative and remedial care and services as may be prescribed by the authority according
 38 to the standards established pursuant to ORS 414.065, including premium assistance under ORS
 39 413.610 to 413.613, 414.115 and 414.117, payments made for services provided under an insurance or
 40 other contractual arrangement and money paid directly to the recipient for the purchase of health
 41 services and for services described in ORS 414.710.

42 [(18)] (19) “Medical assistance” includes any care or services for any individual who is a patient
 43 in a medical institution or any care or services for any individual who has attained 65 years of age
 44 or is under 22 years of age, and who is a patient in a private or public institution for mental dis-
 45 eases. Except as provided in ORS 411.439 and 411.447, “medical assistance” does not include care

1 or services for a resident of a nonmedical public institution.

2 [(19)] (20) "Patient centered primary care home" means a health care team or clinic that is or-
3 ganized in accordance with the standards established by the Oregon Health Authority under ORS
4 414.655 and that incorporates the following core attributes:

- 5 (a) Access to care;
- 6 (b) Accountability to consumers and to the community;
- 7 (c) Comprehensive whole person care;
- 8 (d) Continuity of care;
- 9 (e) Coordination and integration of care; and
- 10 (f) Person and family centered care.

11 [(20)] (21) "Peer support specialist" means any of the following individuals who meet qualifica-
12 tion criteria adopted by the authority under ORS 414.665 and who provide supportive services to a
13 current or former consumer of mental health or addiction treatment:

- 14 (a) An individual who is a current or former consumer of mental health treatment; or
- 15 (b) An individual who is in recovery, as defined by the Oregon Health Authority by rule, from
16 an addiction disorder.

17 [(21)] (22) "Peer wellness specialist" means an individual who meets qualification criteria
18 adopted by the authority under ORS 414.665 and who is responsible for assessing mental health and
19 substance use disorder service and support needs of a member of a coordinated care organization
20 through community outreach, assisting members with access to available services and resources,
21 addressing barriers to services and providing education and information about available resources
22 for individuals with mental health or substance use disorders in order to reduce stigma and dis-
23 crimination toward consumers of mental health and substance use disorder services and to assist the
24 member in creating and maintaining recovery, health and wellness.

25 [(22)] (23) "Person centered care" means care that:

- 26 (a) Reflects the individual patient's strengths and preferences;
- 27 (b) Reflects the clinical needs of the patient as identified through an individualized assessment;
- 28 and
- 29 (c) Is based upon the patient's goals and will assist the patient in achieving the goals.

30 [(23)] (24) "Personal health navigator" means an individual who meets qualification criteria
31 adopted by the authority under ORS 414.665 and who provides information, assistance, tools and
32 support to enable a patient to make the best health care decisions in the patient's particular cir-
33 cumstances and in light of the patient's needs, lifestyle, combination of conditions and desired out-
34 comes.

35 [(24)] (25) "Prepaid managed care health services organization" means a managed dental care,
36 mental health or chemical dependency organization that contracts with the authority under ORS
37 414.654 or with a coordinated care organization on a prepaid capitated basis to provide health ser-
38 vices to medical assistance recipients.

39 [(25)] (26) "Quality measure" means the health outcome and quality measures and benchmarks
40 identified by the Health Plan Quality Metrics Committee and the metrics and scoring subcommittee
41 in accordance with ORS 413.017 (4) and 414.638 and the quality metrics developed by the Behavioral
42 Health Committee in accordance with ORS 413.017 (5).

43 [(26)] (27) "Resources" has the meaning given that term in ORS 411.704. For eligibility purposes,
44 "resources" does not include charitable contributions raised by a community to assist with medical
45 expenses.

1 [(27)] **(28)** “Tribal traditional health worker” means an individual who meets qualification cri-
 2 teria adopted by the authority under ORS 414.665 and who:

3 (a) Has expertise or experience in public health;

4 (b) Works in a tribal community or an urban Indian community, either for pay or as a volunteer
 5 in association with a local health care system;

6 (c) To the extent practicable, shares ethnicity, language, socioeconomic status and life experi-
 7 ences with the residents of the community the worker serves;

8 (d) Assists members of the community to improve their health, including physical, behavioral and
 9 oral health, and increases the capacity of the community to meet the health care needs of its resi-
 10 dents and achieve wellness;

11 (e) Provides health education and information that is culturally appropriate to the individuals
 12 being served;

13 (f) Assists community residents in receiving the care they need;

14 (g) May give peer counseling and guidance on health behaviors; and

15 (h) May provide direct services, such as tribal-based practices.

16 [(28)(a)] **(29)(a)** “Youth support specialist” means an individual who meets qualification criteria
 17 adopted by the authority under ORS 414.665 and who, based on a similar life experience, provides
 18 supportive services to an individual who:

19 (A) Is not older than 30 years of age; and

20 (B)(i) Is a current or former consumer of mental health or addiction treatment; or

21 (ii) Is facing or has faced difficulties in accessing education, health and wellness services due
 22 to a mental health or behavioral health barrier.

23 (b) A “youth support specialist” may be a peer wellness specialist or a peer support specialist.

24 **SECTION 3.** ORS 414.025, as amended by section 2, chapter 628, Oregon Laws 2021, is amended
 25 to read:

26 414.025. As used in this chapter and ORS chapters 411 and 413, unless the context or a specially
 27 applicable statutory definition requires otherwise:

28 (1)(a) “Alternative payment methodology” means a payment other than a fee-for-services pay-
 29 ment, used by coordinated care organizations as compensation for the provision of integrated and
 30 coordinated health care and services.

31 (b) “Alternative payment methodology” includes, but is not limited to:

32 (A) Shared savings arrangements;

33 (B) Bundled payments; and

34 (C) Payments based on episodes.

35 (2) “Behavioral health assessment” means an evaluation by a behavioral health clinician, in
 36 person or using telemedicine, to determine a patient’s need for immediate crisis stabilization.

37 (3) “Behavioral health clinician” means:

38 (a) A licensed psychiatrist;

39 (b) A licensed psychologist;

40 (c) A licensed nurse practitioner with a specialty in psychiatric mental health;

41 (d) A licensed clinical social worker;

42 (e) A licensed professional counselor or licensed marriage and family therapist;

43 (f) A certified clinical social work associate;

44 (g) An intern or resident who is working under a board-approved supervisory contract in a
 45 clinical mental health field; or

1 (h) Any other clinician whose authorized scope of practice includes mental health diagnosis and
2 treatment.

3 (4) “Behavioral health crisis” means a disruption in an individual’s mental or emotional stability
4 or functioning resulting in an urgent need for immediate outpatient treatment in an emergency de-
5 partment or admission to a hospital to prevent a serious deterioration in the individual’s mental or
6 physical health.

7 (5) “Behavioral health home” means a mental health disorder or substance use disorder treat-
8 ment organization, as defined by the Oregon Health Authority by rule, that provides integrated
9 health care to individuals whose primary diagnoses are mental health disorders or substance use
10 disorders.

11 (6) “Category of aid” means assistance provided by the Oregon Supplemental Income Program,
12 aid granted under ORS 411.877 to 411.896 and 412.001 to 412.069 or federal Supplemental Security
13 Income payments.

14 (7) **“Community education worker” means an individual who meets qualification criteria**
15 **adopted by the authority under ORS 414.665 and who:**

16 (a) **Has completed training in child development;**

17 (b) **Has completed training in culturally responsive pedagogy and practices that support**
18 **parents as partners in a child’s learning and development;**

19 (c) **Has faced difficulties accessing education and health services that are culturally and**
20 **linguistically appropriate;**

21 (d) **Works with family support systems, such as education and health care, to better**
22 **equip those systems to meet the needs of families;**

23 (e) **To the extent practicable, shares ethnicity, language, socioeconomic status and life**
24 **experiences with the residents of the community the worker serves;**

25 (f) **Provides education and information that is culturally appropriate to the individuals**
26 **being served; and**

27 (g) **Provides members of the community with information and education about how to**
28 **access resources for children, including but not limited to early learning education and social**
29 **services.**

30 [(7)] (8) “Community health worker” means an individual who meets qualification criteria
31 adopted by the authority under ORS 414.665 and who:

32 (a) Has expertise or experience in public health;

33 (b) Works in an urban or rural community, either for pay or as a volunteer in association with
34 a local health care system;

35 (c) To the extent practicable, shares ethnicity, language, socioeconomic status and life experi-
36 ences with the residents of the community the worker serves;

37 (d) Assists members of the community to improve their health and increases the capacity of the
38 community to meet the health care needs of its residents and achieve wellness;

39 (e) Provides health education and information that is culturally appropriate to the individuals
40 being served;

41 (f) Assists community residents in receiving the care they need;

42 (g) May give peer counseling and guidance on health behaviors; and

43 (h) May provide direct services such as first aid or blood pressure screening.

44 [(8)] (9) “Coordinated care organization” means an organization meeting criteria adopted by the
45 Oregon Health Authority under ORS 414.572.

1 [(9)] (10) “Dually eligible for Medicare and Medicaid” means, with respect to eligibility for en-
 2 rollment in a coordinated care organization, that an individual is eligible for health services funded
 3 by Title XIX of the Social Security Act and is:

- 4 (a) Eligible for or enrolled in Part A of Title XVIII of the Social Security Act; or
- 5 (b) Enrolled in Part B of Title XVIII of the Social Security Act.

6 [(10)(a)] (11)(a) “Family support specialist” means an individual who meets qualification criteria
 7 adopted by the authority under ORS 414.665 and who provides supportive services to and has expe-
 8 rience parenting a child who:

- 9 (A) Is a current or former consumer of mental health or addiction treatment; or
- 10 (B) Is facing or has faced difficulties in accessing education, health and wellness services due
 11 to a mental health or behavioral health barrier.

12 (b) A “family support specialist” may be a peer wellness specialist or a peer support specialist.

13 [(11)] (12) “Global budget” means a total amount established prospectively by the Oregon Health
 14 Authority to be paid to a coordinated care organization for the delivery of, management of, access
 15 to and quality of the health care delivered to members of the coordinated care organization.

16 [(12)] (13) “Health insurance exchange” or “exchange” means an American Health Benefit Ex-
 17 change described in 42 U.S.C. 18031, 18032, 18033 and 18041.

18 [(13)] (14) “Health services” means at least so much of each of the following as are funded by
 19 the Legislative Assembly based upon the prioritized list of health services compiled by the Health
 20 Evidence Review Commission under ORS 414.690:

21 (a) Services required by federal law to be included in the state’s medical assistance program in
 22 order for the program to qualify for federal funds;

23 (b) Services provided by a physician as defined in ORS 677.010, a nurse practitioner licensed
 24 under ORS 678.375, a behavioral health clinician or other licensed practitioner within the scope of
 25 the practitioner’s practice as defined by state law, and ambulance services;

- 26 (c) Prescription drugs;
- 27 (d) Laboratory and X-ray services;
- 28 (e) Medical equipment and supplies;
- 29 (f) Mental health services;
- 30 (g) Chemical dependency services;
- 31 (h) Emergency dental services;
- 32 (i) Nonemergency dental services;

33 (j) Provider services, other than services described in paragraphs (a) to (i), (k), (L) and (m) of
 34 this subsection, defined by federal law that may be included in the state’s medical assistance pro-
 35 gram;

- 36 (k) Emergency hospital services;
- 37 (L) Outpatient hospital services; and
- 38 (m) Inpatient hospital services.

39 [(14)] (15) “Income” has the meaning given that term in ORS 411.704.

40 [(15)(a)] (16)(a) “Integrated health care” means care provided to individuals and their families
 41 in a patient centered primary care home or behavioral health home by licensed primary care
 42 clinicians, behavioral health clinicians and other care team members, working together to address
 43 one or more of the following:

- 44 (A) Mental illness.
- 45 (B) Substance use disorders.

- 1 (C) Health behaviors that contribute to chronic illness.
- 2 (D) Life stressors and crises.
- 3 (E) Developmental risks and conditions.
- 4 (F) Stress-related physical symptoms.
- 5 (G) Preventive care.
- 6 (H) Ineffective patterns of health care utilization.

7 (b) As used in this subsection, “other care team members” includes but is not limited to:

- 8 (A) Qualified mental health professionals or qualified mental health associates meeting require-
- 9 ments adopted by the Oregon Health Authority by rule;
- 10 (B) Peer wellness specialists;
- 11 (C) Peer support specialists;
- 12 (D) Community health workers who have completed a state-certified training program;
- 13 (E) Personal health navigators; or
- 14 (F) Other qualified individuals approved by the Oregon Health Authority.

15 [(16)] (17) “Investments and savings” means cash, securities as defined in ORS 59.015, negotiable
 16 instruments as defined in ORS 73.0104 and such similar investments or savings as the department
 17 or the authority may establish by rule that are available to the applicant or recipient to contribute
 18 toward meeting the needs of the applicant or recipient.

19 [(17)] (18) “Medical assistance” means so much of the medical, mental health, preventive, sup-
 20 portive, palliative and remedial care and services as may be prescribed by the authority according
 21 to the standards established pursuant to ORS 414.065, including premium assistance under ORS
 22 413.610 to 413.613, 414.115 and 414.117, payments made for services provided under an insurance or
 23 other contractual arrangement and money paid directly to the recipient for the purchase of health
 24 services and for services described in ORS 414.710.

25 [(18)] (19) “Medical assistance” includes any care or services for any individual who is a patient
 26 in a medical institution or any care or services for any individual who has attained 65 years of age
 27 or is under 22 years of age, and who is a patient in a private or public institution for mental dis-
 28 eases. Except as provided in ORS 411.439 and 411.447, “medical assistance” does not include care
 29 or services for a resident of a nonmedical public institution.

30 [(19)] (20) “Mental health drug” means a type of legend drug, as defined in ORS 414.325, speci-
 31 fied by the Oregon Health Authority by rule, including but not limited to:

- 32 (a) Therapeutic class 7 ataractics-tranquilizers; and
- 33 (b) Therapeutic class 11 psychostimulants-antidepressants.

34 [(20)] (21) “Patient centered primary care home” means a health care team or clinic that is or-
 35 ganized in accordance with the standards established by the Oregon Health Authority under ORS
 36 414.655 and that incorporates the following core attributes:

- 37 (a) Access to care;
- 38 (b) Accountability to consumers and to the community;
- 39 (c) Comprehensive whole person care;
- 40 (d) Continuity of care;
- 41 (e) Coordination and integration of care; and
- 42 (f) Person and family centered care.

43 [(21)] (22) “Peer support specialist” means any of the following individuals who meet qualifica-
 44 tion criteria adopted by the authority under ORS 414.665 and who provide supportive services to a
 45 current or former consumer of mental health or addiction treatment:

1 (a) An individual who is a current or former consumer of mental health treatment; or

2 (b) An individual who is in recovery, as defined by the Oregon Health Authority by rule, from
3 an addiction disorder.

4 [(22)] **(23)** “Peer wellness specialist” means an individual who meets qualification criteria
5 adopted by the authority under ORS 414.665 and who is responsible for assessing mental health and
6 substance use disorder service and support needs of a member of a coordinated care organization
7 through community outreach, assisting members with access to available services and resources,
8 addressing barriers to services and providing education and information about available resources
9 for individuals with mental health or substance use disorders in order to reduce stigma and dis-
10 crimination toward consumers of mental health and substance use disorder services and to assist the
11 member in creating and maintaining recovery, health and wellness.

12 [(23)] **(24)** “Person centered care” means care that:

13 (a) Reflects the individual patient’s strengths and preferences;

14 (b) Reflects the clinical needs of the patient as identified through an individualized assessment;
15 and

16 (c) Is based upon the patient’s goals and will assist the patient in achieving the goals.

17 [(24)] **(25)** “Personal health navigator” means an individual who meets qualification criteria
18 adopted by the authority under ORS 414.665 and who provides information, assistance, tools and
19 support to enable a patient to make the best health care decisions in the patient’s particular cir-
20 cumstances and in light of the patient’s needs, lifestyle, combination of conditions and desired out-
21 comes.

22 [(25)] **(26)** “Prepaid managed care health services organization” means a managed dental care,
23 mental health or chemical dependency organization that contracts with the authority under ORS
24 414.654 or with a coordinated care organization on a prepaid capitated basis to provide health ser-
25 vices to medical assistance recipients.

26 [(26)] **(27)** “Quality measure” means the health outcome and quality measures and benchmarks
27 identified by the Health Plan Quality Metrics Committee and the metrics and scoring subcommittee
28 in accordance with ORS 413.017 (4) and 414.638 and the quality metrics developed by the Behavioral
29 Health Committee in accordance with ORS 413.017 (5).

30 [(27)] **(28)** “Resources” has the meaning given that term in ORS 411.704. For eligibility purposes,
31 “resources” does not include charitable contributions raised by a community to assist with medical
32 expenses.

33 [(28)] **(29)** “Tribal traditional health worker” means an individual who meets qualification cri-
34 teria adopted by the authority under ORS 414.665 and who:

35 (a) Has expertise or experience in public health;

36 (b) Works in a tribal community or an urban Indian community, either for pay or as a volunteer
37 in association with a local health care system;

38 (c) To the extent practicable, shares ethnicity, language, socioeconomic status and life experi-
39 ences with the residents of the community the worker serves;

40 (d) Assists members of the community to improve their health, including physical, behavioral and
41 oral health, and increases the capacity of the community to meet the health care needs of its resi-
42 dents and achieve wellness;

43 (e) Provides health education and information that is culturally appropriate to the individuals
44 being served;

45 (f) Assists community residents in receiving the care they need;

1 (g) May give peer counseling and guidance on health behaviors; and

2 (h) May provide direct services, such as tribal-based practices.

3 [(29)(a)] **(30)(a)** “Youth support specialist” means an individual who meets qualification criteria
4 adopted by the authority under ORS 414.665 and who, based on a similar life experience, provides
5 supportive services to an individual who:

6 (A) Is not older than 30 years of age; and

7 (B)(i) Is a current or former consumer of mental health or addiction treatment; or

8 (ii) Is facing or has faced difficulties in accessing education, health and wellness services due
9 to a mental health or behavioral health barrier.

10 (b) A “youth support specialist” may be a peer wellness specialist or a peer support specialist.

11 **SECTION 4.** ORS 413.600 is amended to read:

12 413.600. (1) There is established within the Oregon Health Authority the Traditional Health
13 Workers Commission.

14 (2) The Director of the Oregon Health Authority shall appoint the following [24] **25** members to
15 serve on the commission:

16 (a) [*Fourteen*] **Fifteen** members, of which a majority must be appointed from nominees selected
17 by the Oregon Community Health Workers Association, who represent traditional health workers,
18 including at least one member to represent each of the following:

19 (A) Community health workers, as defined in ORS 414.025;

20 (B) Personal health navigators, as defined in ORS 414.025;

21 (C) Peer wellness specialists, as defined in ORS 414.025;

22 (D) Peer support specialists, as defined in ORS 414.025;

23 (E) Doulas;

24 (F) Family support specialists, as defined in ORS 414.025;

25 (G) Youth support specialists, as defined in ORS 414.025; [*and*]

26 (H) Tribal traditional health workers, as defined in ORS 414.025; **and**

27 **(I) Community education workers, as defined in ORS 414.025;**

28 (b) One member who represents the Office of Community Colleges and Workforce Development;

29 (c) One member who is a nurse who represents the Oregon Nurses Association;

30 (d) One member who is a physician licensed in this state;

31 (e) One member selected from nominees provided by the Home Care Commission;

32 (f) One member who represents coordinated care organizations;

33 (g) One member who represents a labor organization;

34 (h) One member who supervises traditional health workers at a community-based organization,
35 local health department, as defined in ORS 433.235, or agency, as defined in ORS 183.310;

36 (i) One member who represents community-based organizations or agencies, as defined in ORS
37 183.310, that provide for the training of traditional health workers;

38 (j) One member who represents a consumer of services provided by health workers who are not
39 licensed by this state; and

40 (k) One member who represents providers of Indian health services that work with traditional
41 health workers qualified under ORS 414.665, a federally recognized tribe or a tribal organization.

42 (3) In appointing members under subsection (2) of this section, the director shall consider
43 whether the composition of the Traditional Health Workers Commission represents the geographic,
44 ethnic, gender, racial, disability status, gender identity, sexual orientation and economic diversity
45 of traditional health workers.

1 (4) The term of office of each member of the commission is three years, but a member serves
2 at the pleasure of the director. Before the expiration of the term of a member, the director shall
3 appoint a successor whose term begins on January 1 next following. A member is eligible for re-
4 appointment. If there is a vacancy for any cause, the director shall make an appointment to become
5 immediately effective for the unexpired term.

6 (5) A majority of the members of the commission constitutes a quorum for the transaction of
7 business.

8 (6) Official action by the commission requires the approval of a majority of the members of the
9 commission.

10 (7) The commission shall elect one of its members to serve as chairperson.

11 (8) The commission shall meet at times and places specified by the call of the chairperson or
12 of a majority of the members of the commission.

13 (9) The commission may adopt rules necessary for the operation of the commission.

14 (10) A member of the commission is entitled to compensation and expenses as provided in ORS
15 292.495.

16 **SECTION 5. The Oregon Health Authority shall adopt rules to carry out the amendments**
17 **to ORS 413.600, 414.025 and 414.665 by section 1 to 4 of this 2023 Act no later than December**
18 **31, 2024.**

19 **SECTION 6. This 2023 Act takes effect on the 91st day after the date on which the 2023**
20 **regular session of the Eighty-second Legislative Assembly adjourns sine die.**

21