

Enrolled
House Bill 2024

Sponsored by Representatives NOSSE, ISADORE, NELSON; Representatives HARBICK, HUDSON
(Presession filed.)

CHAPTER

AN ACT

Relating to the behavioral health workforce; creating new provisions; amending ORS 654.062 and section 20, chapter 70, Oregon Laws 2024; and declaring an emergency.

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

BEHAVIORAL HEALTH CARE PROVIDER INCENTIVES

SECTION 1. (1) As used in this section, “behavioral health care” means services and supports for individuals who have mental health disorders or substance use disorders.

(2) The Oregon Health Authority shall establish a program to award grants to eligible entities. The grants awarded under this section must be used to foster the recruitment and retention of behavioral health care providers at the eligible entity.

(3) Subject to subsection (5) of this section, the following entities are eligible to receive grants under this section, if the entity meets the requirements described in subsection (4) of this section:

(a) Urban Indian health programs operated by an urban Indian organization pursuant to 25 U.S.C. 1651 et seq.;

(b) Recipients of the authority’s tribal mental health program grants;

(c) Qualified medical providers that offer office-based medication-assisted treatment services; and

(d) Other entities that are not hospitals and that:

(A) Have been certified by the authority to provide behavioral health care;

(B) Provide behavioral health care through a program contracting with or administered by the Oregon Youth Authority;

(C) Are licensed opioid treatment programs; or

(D) Provide withdrawal management services.

(4) Subject to subsection (5) of this section, an entity described in subsection (3) of this section is eligible to receive a grant under this section if the entity:

(a) Provides behavioral health care to adults or youth, of which at least 50 percent are uninsured or enrolled in the state medical assistance program or Medicare;

(b) Operates an outpatient or residential facility;

(c) Provides team-based care; and

(d) Serves individuals with acute behavioral health needs, as defined by the Oregon Health Authority by rule.

(5) The crisis hotline center described in ORS 430.627 is eligible to receive grants under this section.

(6) An entity that receives a grant under subsection (2) of this section may use the funds to provide the following incentives to behavioral health care providers, in an effort to increase the recruitment and retention of behavioral health care providers at the entity:

(a) Scholarships for undergraduate and graduate students going into the behavioral health care field;

(b) Loan forgiveness and repayment incentives;

(c) Tuition assistance; and

(d) Stipends for students enrolled in graduate behavioral health care educational programs.

(7)(a) An entity that receives a grant under subsection (2) of this section shall report to the Oregon Health Authority, in the form and manner prescribed by the authority, on how the entity spent the grant and how the expenditures impacted the recruitment and retention of behavioral health care providers at the entity. The report must include, as applicable to the entity, the following information:

(A) The licensure, certification or position type of each behavioral health care provider who received an incentive listed in subsection (6) of this section;

(B) The amount of grant moneys spent per behavioral health care provider; and

(C) The entity's staffing vacancy rate prior to receiving the grant under subsection (2) of this section and after receiving the grant under subsection (2) of this section.

(b) In prescribing the form and manner of the report described in this subsection, the authority shall seek to minimize the administrative burden imposed on the entities to the extent practicable.

SECTION 2. Section 20, chapter 70, Oregon Laws 2024, is amended to read:

Sec. 20. (1) The United We Heal Medicaid Payment Program is established in the Oregon Health Authority. The goal of the program is to increase the available behavioral health care workforce in this state **through workforce recruitment and retention strategies**. The authority shall provide supplemental medical assistance payments to eligible behavioral health care [providers] entities to enable the [providers] entities to access enhanced apprenticeship and training programs and opportunities, **increased wages, health care benefits and workplace safety standards** by participating in a labor-management training trust.

(2) The authority shall prescribe by rule eligibility criteria for receiving the payments consistent with the goal of the program expressed in subsection (1) of this section.

(3) To participate in the program, a behavioral health [provider must] **care entity shall** enter into a memorandum of understanding with the authority specifying how the [payments will be used] **entity will use the payments received under this section. Allowable uses of payments under this section must include enhanced opportunities for apprenticeships and on-the-job training, wraparound services, increased wages, health care benefits and workplace safety standards through participation in a labor-management training trust.** The authority shall terminate payments if the [provider] entity fails to abide by or violates the terms of the memorandum of understanding. [A provider] **An entity** may request a contested case proceeding to challenge a termination.

BEHAVIORAL HEALTH WORKER SAFETY

SECTION 3. ORS 654.062 is amended to read:

654.062. (1) Every employee should notify the employer of any violation of law, regulation or standard pertaining to safety and health in the place of employment when the violation comes to the knowledge of the employee.

(2) However, any employee or representative of the employee may complain to the Director of the Department of Consumer and Business Services or any authorized representatives of the director

of any violation of law, regulation or standard pertaining to safety and health in the place of employment, whether or not the employee also notifies the employer.

(3) Upon receiving any employee complaint, the director shall make inquiries, inspections and investigations that the director considers reasonable and appropriate. When an employee or representative of the employee has complained in writing of an alleged violation and no resulting citation is issued to the employer, the director shall furnish to the employee or representative of the employee, upon written request, a statement of reasons for the decision.

(4) The director shall establish procedures for keeping confidential the identity of any employee who requests protection in writing. When a request has been made, neither a written complaint from an employee, or representative of the employee, nor a memorandum containing the identity of a complainant may be disclosed under ORS 192.311 to 192.478.

(5) It is an unlawful employment practice for any person to bar or discharge from employment or otherwise discriminate against any employee or prospective employee because the employee or prospective employee has:

(a) Opposed any practice forbidden by ORS 654.001 to 654.295, 654.412 to 654.423 and 654.750 to 654.780;

(b) Made any complaint or instituted or caused to be instituted any proceeding under or related to ORS 654.001 to 654.295, 654.412 to 654.423 and 654.750 to 654.780, or has testified or is about to testify in any such proceeding;

(c) Exercised on behalf of the employee, prospective employee or others any right afforded by ORS 654.001 to 654.295, 654.412 to 654.423 and 654.750 to 654.780;

(d) In good faith reported an assault that occurred on the premises of a health care employer as defined in ORS 654.412 or in the home of a patient receiving home health care services; or

(e) With no reasonable alternative and in good faith, refused to expose the employee or prospective employee to serious injury or death arising from a hazardous condition at a place of employment.

(6)(a) Any employee or prospective employee alleging to have been barred or discharged from employment or otherwise discriminated against in compensation, or in terms, conditions or privileges of employment, in violation of subsection (5) of this section may, within one year after the employee or prospective employee has reasonable cause to believe that the violation has occurred, file a complaint with the Commissioner of the Bureau of Labor and Industries alleging discrimination under the provisions of ORS 659A.820. Upon receipt of the complaint the commissioner shall process the complaint under the procedures, policies and remedies established by ORS chapter 659A and the policies established by ORS 654.001 to 654.295, 654.412 to 654.423 and 654.750 to 654.780 in the same way and to the same extent that the complaint would be processed if the complaint involved allegations of unlawful employment practices under ORS 659A.030 (1)(f).

(b) Within 90 days after receipt of a complaint filed under this subsection, the commissioner shall notify the complainant of the commissioner's determination.

(c) The affected employee or prospective employee may bring a civil action in any circuit court of the State of Oregon against any person alleged to have violated subsection (5) of this section. The civil action must be commenced within one year after the employee or prospective employee has reasonable cause to believe a violation has occurred, unless a complaint has been timely filed under ORS 659A.820.

(d) **Subject to paragraph (e) of this subsection**, the commissioner or the circuit court may order all appropriate relief including rehiring or reinstatement to the employee's former position with back pay.

(e) If the commissioner or the circuit court finds that a behavioral health employer discharged an employee in violation of subsection (5) of this section, the employee shall have the right to be reinstated to the employee's former position with back pay.

(7)(a) In any action brought under subsection (6) of this section, there is a rebuttable presumption that a violation of subsection (5) of this section has occurred if a person bars or discharges an employee or prospective employee from employment or otherwise discriminates against

an employee or prospective employee within 60 days after the employee or prospective employee has engaged in any of the protected activities described in subsection (5)(a) to (e) of this section. The person may rebut the presumption that a violation of subsection (5) of this section has occurred by a demonstration of a preponderance of the evidence.

(b) If a person bars or discharges an employee or prospective employee from employment or otherwise discriminates against the employee or prospective employee more than 60 days after the employee or prospective employee has engaged in any of the protected activities described under subsection (5)(a) to (e) of this section, such action does not create a presumption in favor of or against finding that a violation of subsection (5) of this section has occurred. Where such action has occurred more than 60 days after the protected activity, this subsection does not modify any existing rule of case law relating to the proximity of time between a protected activity and an adverse employment action. The burden of proof shall be on the employee or prospective employee to demonstrate by a preponderance of the evidence that a violation occurred.

(8) The director shall adopt rules necessary for the administration of subsection (5)(e) of this section that are in accordance with the federal Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.).

(9) As used in this section, “behavioral health employer” means:

(a) A residential treatment facility, as defined in ORS 443.400;

(b) A residential treatment home, as defined in ORS 443.400;

(c) A secure residential treatment facility, as described in ORS 443.465, unless the facility is located on an Oregon State Hospital campus or otherwise operated by the state;

(d) A secure residential treatment home, as described in ORS 443.465;

(e) A sobering facility, as defined in ORS 430.306;

(f) A detoxification center, as defined in ORS 430.306;

(g) A halfway house, as defined in ORS 430.306;

(h) A mobile crisis intervention team, as defined in ORS 430.626; or

(i) An emergency shelter.

SECTION 4. (1) As used in this section:

(a) “Residential treatment facility” has the meaning given that term in ORS 443.400.

(b) “Residential treatment home” has the meaning given that term in ORS 443.400.

(c) “Secure residential treatment facility” means a facility described in ORS 443.465.

(d) “Secure residential treatment home” means a home described in ORS 443.465.

(2) A residential treatment facility, residential treatment home, secure residential treatment facility or secure residential treatment home may place reasonable limitations, as defined by the Oregon Health Authority by rule, on a resident’s access to and possession of alcohol, marijuana and weapons, including firearms and knives.

SECTION 5. (1) As used in this section, “behavioral health employer” means:

(a) A residential treatment facility, as defined in ORS 443.400;

(b) A residential treatment home, as defined in ORS 443.400;

(c) A secure residential treatment facility, as described in ORS 443.465, unless the facility is located on an Oregon State Hospital campus or otherwise operated by the state;

(d) A secure residential treatment home, as described in ORS 443.465;

(e) A sobering facility, as defined in ORS 430.306;

(f) A detoxification center, as defined in ORS 430.306;

(g) A halfway house, as defined in ORS 430.306;

(h) A mobile crisis intervention team, as defined in ORS 430.626; or

(i) An emergency shelter.

(2) A behavioral health employer shall provide training to workers that, at a minimum, addresses:

(a) General worker safety that focuses on providing workers with skills and knowledge regarding:

(A) The potential risks that a worker may face in the work environment of a particular behavioral health setting, including but not limited to behavioral health settings involving mobile crisis intervention teams, as defined in ORS 430.626.

(B) Protocols for using safety equipment, emergency communication devices and alert systems in emergency or crisis situations.

(b) De-escalation techniques for managing and mitigating potentially aggressive behavior from clients.

(c) The available options for reporting alleged workplace safety violations and allegations of discrimination, retaliation or harassment to the Occupational Safety and Health Division of the Department of Consumer and Business Services, the Bureau of Labor and Industries and other relevant state agencies, including the rights and protections afforded to workers who engage in such reporting.

(3) Training provided under this section must incorporate simulated scenarios and role-playing to ensure workers have an opportunity to apply the training principles in real-world scenarios.

(4) A behavioral health employer shall provide the training under this section to new workers within 90 days of hiring, and periodically thereafter, but not less than once every three years.

(5) Each behavioral health employer shall retain records documenting the completion of the training required under this section. At a minimum, the records must include the date of training, topics covered and the names of the workers who attended the training. The records shall be made available, upon request, to the division.

SECTION 6. (1) Section 5 of this 2025 Act becomes operative on July 1, 2026.

(2) The Department of Consumer and Business Services may take any action before the operative date specified in subsection (1) of this section that is necessary to enable the department to exercise, on and after the operative date specified in subsection (1) of this section, all of the duties, functions and powers conferred on the department by section 5 of this 2025 Act.

APPROPRIATIONS

SECTION 7. Notwithstanding any other provision of law, the General Fund appropriation made to the Oregon Health Authority by section 1 (1), chapter __, Oregon Laws 2025 (Enrolled House Bill 5025), for the biennium beginning July 1, 2025, for Medicaid, is increased by \$995,154 for the purpose of carrying out section 20, chapter 70, Oregon Laws 2024, as amended by section 2 of this 2025 Act.

SECTION 8. Notwithstanding any other law limiting expenditures, the limitation on expenditures established by section 5 (1), chapter __, Oregon Laws 2025 (Enrolled House Bill 5025), for the biennium beginning July 1, 2025, as the maximum limit for payment of expenses from federal funds, other than those described in section 2, chapter __, Oregon Laws 2025 (Enrolled House Bill 5025), collected or received by the Oregon Health Authority for Medicaid, is increased by \$862,718 for the purpose of carrying out section 20, chapter 70, Oregon Laws 2024, as amended by section 2 of this 2025 Act.

SECTION 9. Notwithstanding any other provision of law, the General Fund appropriation made to the Oregon Health Authority by section 1 (2), chapter __, Oregon Laws 2025 (Enrolled House Bill 5025), for the biennium beginning July 1, 2025, for behavioral health, is increased by \$4,974,618 for the purpose of carrying out the provisions of section 1 of this 2025 Act.

SECTION 10. Notwithstanding any other law limiting expenditures, the limitation on expenditures established by section 5 (2), chapter __, Oregon Laws 2025 (Enrolled House Bill 5025), for the biennium beginning July 1, 2025, as the maximum limit for payment of expenses from federal funds, other than those described in section 2, chapter __, Oregon Laws 2025

(Enrolled House Bill 5025), collected or received by the Oregon Health Authority for behavioral health, is increased by \$274,489 for the purpose of carrying out the provisions of section 1 of this 2025 Act.

CAPTIONS

SECTION 11. The unit captions used in this 2025 Act are provided only for the convenience of the reader and do not become part of the statutory law of this state or express any legislative intent in the enactment of this 2025 Act.

EFFECTIVE DATE

SECTION 12. This 2025 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2025 Act takes effect July 1, 2025.

Passed by House June 23, 2025

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Timothy G. Sekerak, Chief Clerk of House

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Julie Fahey, Speaker of House

Passed by Senate June 24, 2025

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Rob Wagner, President of Senate

Received by Governor:

.....M.,....., 2025

Approved:

.....M.,....., 2025

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Tina Kotek, Governor

Filed in Office of Secretary of State:

.....M.,....., 2025

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Tobias Read, Secretary of State