

A-Engrossed
House Bill 3146

Ordered by the House April 7
Including House Amendments dated April 7

Sponsored by Representative MARSH, Senator REYNOLDS; Representatives NGUYEN H, PHAM H (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. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: The Act creates a pilot program to house people who are on a wait list for residential SUD services. (Flesch Readability Score: 71.7).

Directs the Oregon Health Authority to administer a pilot program to provide low-barrier emergency housing for houseless or unsafely housed individuals on waiting lists for residential substance use disorder treatment or withdrawal management programs. Requires the authority to report the outcomes of the pilot program to the Legislative Assembly beginning September 15, 2026, and every two years thereafter.

Sunsetts the pilot program on January 2, 2033.

Declares an emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to emergency housing for individuals awaiting residential substance use disorder services;
3 and declaring an emergency.

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

5 **SECTION 1. (1) The Oregon Health Authority shall administer a pilot program to provide**
6 **low-barrier emergency housing for houseless or unsafely housed individuals on waiting lists**
7 **for residential substance use disorder treatment or withdrawal management programs. In**
8 **implementing the pilot program, the authority shall award grants to fund no fewer than four**
9 **and no more than eight emergency housing programs statewide.**

10 **(2) The authority may award grants under this section to:**

11 **(a) Behavioral health organizations with substance use disorder experience;**

12 **(b) Residential substance use disorder treatment providers; or**

13 **(c) Organizations that contract with the authority or a coordinated care organization,**
14 **as defined in ORS 414.025, to provide pregnant women who use harmful substances with peer**
15 **recovery support services, prenatal and postpartum care, substance use and mental health**
16 **treatment and service coordination.**

17 **(3) To qualify for a grant under this section, an applicant must:**

18 **(a) Demonstrate that proposed emergency housing units are in an approved zoning dis-**
19 **trict;**

20 **(b) Provide a plan for ensuring that participants have daily case management or peer**
21 **support services;**

22 **(c) Provide an operational plan that addresses security and oversight;**

23 **(d) Demonstrate that services will be provided with a trauma-informed lens; and**

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 (e) Provide relevant financial and organizational information.

2 (4) To participate in the program, an individual must:

3 (a) Want treatment for problematic substance use;

4 (b) Be houseless or unsafely housed;

5 (c) Be assessed as needing residential substance use disorder treatment or withdrawal
6 management;

7 (d) Be entered on a waiting list for a residential substance use disorder treatment or
8 withdrawal management program;

9 (e) Be able to safely reside in a single occupancy unit without 24-hour supervision, sup-
10 port or monitoring;

11 (f) Be determined to not be at high risk of violence to self or others; and

12 (g) Agree to, when a bed becomes available at a residential substance use disorder
13 treatment or withdrawal management program:

14 (A) Attend the program; or

15 (B) Leave emergency housing.

16 (5) The authority shall adopt rules to design and implement the pilot program under this
17 section, including requirements that emergency housing programs funded by grants under
18 this section:

19 (a) Not require participants to remain abstinent from substances; and

20 (b) When possible, give priority for emergency housing to pregnant women.

21 (6) Grant moneys awarded under this section may be used for both capital and operating
22 expenses.

23 (7) No later than September 15, 2026, and every two years thereafter, the authority shall
24 submit a report to the interim committees of the Legislative Assembly related to health, in
25 the manner provided in ORS 192.245, on the outcomes of the pilot program, including:

26 (a) The number of emergency housing beds made available and the percentage of beds
27 filled;

28 (b) The length of participants' stays; and

29 (c) Transition outcomes for participants leaving emergency housing.

30 **SECTION 2.** In addition to and not in lieu of any other appropriation, there is appropri-
31 ated to the Oregon Health Authority, for the biennium beginning July 1, 2025, out of the
32 General Fund, the amount of \$10,000,000, which may be expended to carry out the pilot pro-
33 gram described in section 1 of this 2025 Act.

34 **SECTION 3.** Section 1 of this 2025 Act is repealed on January 2, 2033.

35 **SECTION 4.** This 2025 Act being necessary for the immediate preservation of the public
36 peace, health and safety, an emergency is declared to exist, and this 2025 Act takes effect
37 on its passage.

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