

# HB 2208

## Brief title/catchphrase

Oregon House Behavioral Health and Health Care Committee  
March 2025

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# The WHY

- CCOs and their provider & partner networks are responsible for hundreds of planning documents, reports, and audits each year
- CCOs convene community providers and partners to develop Community Health Improvement Plans (CHPs), Community Health Assessments (CHAs), and Comprehensive Behavioral Health Plans
- For behavioral health, Counties and Community Mental Health Programs (CMHPs) are also required to develop community planning and implementation plans
- These plans are valuable and take significant resources and capacity to conduct for the publicly funded health care delivery system as well as at the OHA

# The WHAT

- HB 2208 will:
  - Streamline existing regional plans
  - Add behavioral health planning as a “chapter” in overall community health planning deliverables
  - Maintain OHA oversight authority
  - Maintain current statutory, regulatory, and contractual requirements for CCOs, counties, CMHPs, and others
  - Allow CCOs and hospitals to attribute regional planning costs as community investments
  - Optimize state agency and health delivery system resources
  - Direct OHA to develop rules that align CCO planning and reports (without community engagement processes) with the CHP and CHA timelines and assess for improved efficacy

# Questions?

Thank you!

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