

Agenda/Notes
Office of Governor Tina Kotek
RJC Health Equity and Human Services Committee
April 16, 2025 – Zoom
3:00 – 4:30 pm
Moderator – Javier Cervantes

MEMBERS

Χ	Annie Valtierra-Sanchez	Е	Elizur Bello	Х	Josie Silverman-Mendez
Ε	Bahaa Wanly	Χ	Jackie Leung	Χ	Marin Arreola
Ε	Coi Vu, CCHC		Jaylyn Suppah	Χ	Tae-Sun Kim
Χ	Dolores Martinez	E	Jeremiah Rigsby		

OTHER ATTENDEES

	Andre Bealer	Χ	Yasmin Solorio		Morgan Gratz-Weiser
Χ	Kristina Narayan	Χ	Amy Baker	Χ	Rachel Currans-Henry
Χ	Javier Cervantes		Jennifer Purcell	Χ	KC Ledell

Topic/Lead	Notes/Main Points	Decisions/Action
		Items
Key Bill Updates	Josie: Each of the monthly meetings we will have 10-15	Kristina to send
a) Behavioral Health-	mins for federal updates and implications in Oregon.	completed health
Amy		report to committee
b) ODHS-Rachel	Rachel : System Advisory Council. With that work, part of	once available –
a. SOCAC bill	what the council does is they have many work groups,	anticipated report
b. SB 296 – hospital	providers, and agency leads. Try to identify where and how	completion is end of
discharge task	things are working. Bill recommendations resulted in	April.
force	HB3135. Promoting access to care. Looking at out of state	
c. Other ODHS bills	treatment access. The rules in our state say if you are in	
c) OHA-Kristina	state care, you go through additional loops for care. Trying	
a. RHEC	to eliminate that confusion on out of state treatment. When	Kristina to share slides
b. PH	a kid needs medical necessary treatment, how do we help	
modernization	ensure that it's quality care and we are allowed to provide	
c. THW bills – get	that child with care that's appropriate out of state. We need	Josie and Marin to
bill numbers for	a simplified decision for child abuse. When is it that you	draft letter
these bills	have a violation of a rule to go through regulatory process	
2216	with licensing teams. Really important to get regulatory	
• SB 529	engravement to get access for care to our kids. Whenever	
In carceral	you talk about abuse and seclusion and restraint, its a hard	
Medicaid	topic. None of us want kids to be harmed. We all have child	
 CPOP GRB 	safety in mind to do what we can to improve our system.	
	Theres a lot of fear moving away from having really defined	
	details in state statute on what is and isn't allowed – we	
	need a balance. We need the priority bills for the Governor	
	and wanted to flag that as one of our priorities. I see very	
	strong connections to RJC charge and this bill for that	
	reason.	

Marin: What is the price tag on the bill?

Rachel: Really trying to keep it to a minimal fiscal impact. Some provisions had higher price tag. Pricing right now is for improved reporting system, additional foster care Ombud's, position for medical director for clinical oversight. Small relatively on the pricing. Our intent is this is primarily a policy bill and not a huge fiscal bill.

Josie: To summarize this is definitely a priority bill of the governor's office with clear access to our priorities as a committee, clear equity impacts as well. Wanted to open it up for conversation to folks if it's something we want to mobilize for RJC letter endorsement. Our team can take lead on drafting a letter. Is this something we want to support?

Marin: Yes

Javier: Rachel, do you believe a letter or advocacy would be helpful?

Rachel: I do. Having voice, especially as we think on this as an equity perspective and access in this framework. Can be well received.

Josie: Do we want to mobilize effort on a letter. Marin and I can work to draft a letter with Rachel. Do we want to support as a committee?

Jackie approves. Annie approves. Dolores approves. Marin approves. Tae-Sun approves.

Rachel: Second bill on my list I wanted to highlight is SB296, the hospital discharge task force bill. Really fell into access as well. There was a taskforce and we are looking at policy change improvements when people are in the hospital and they need locations for long term supports. This bill had serious recommendations. Many hospitals are in support of this bill. Asking to look at changes in long term services and supports and eligibility process. It takes us a long time to determine eligibility for long term supports. Second part is on adult foster home rates and access. 2560 adult foster home equity based model to increase rates for adult foster homes. It's a weird intersection but cross references important item in the GRB. Has moved to Ways and Means.

Josie: Any opposition?

Rachel: Not really. Hearings went really well. A lot of advocacy around these.

Marin: Do we need to do anything more?

Rachel: Not at this time. What we may need more is advocacy around key priority funding investments as opposed for advocacy on this bill that sets some of those studies in motion. That's my take.

Josie: That is the letter that was circulated today correct?

Javier: Yes. What other committees have done is list other bills onto one letter.

Rachel: Thinking back on our discussions when we were identifying what those GRB priorities and we had key GRB areas that you already listed. We could take some of those and list them with those investments to highlight that are apart of those GRB investments.

Josie: I think that makes good sense, especially if the governor prefers that in one way.

Annie: Just from my experience in my work. In thinking of RJC and this group. When we are listing a list of endorsement or another we are tracking. I do see that tying in pieces that tie into priorities we collectively chose to tie them when we have legislators who do like the pieces but cut the funding. If there's an overlap that is bringing the work together, they can see how important those pieces are in typing the work together. Agree on naming it on one letter.

Rachel: My quick framing federal update is there is a lot of uncertainty for policy and funding changes that can occur. At this time we don't have detail on those funding and approaches for Medicaid. There are policy changes as well and financing that would have changes for food policy.

Kristina shares power point "RJC HEC 4.16.25 Health Leg Update"

Kristina: Status update for briefly on SB 528, SB 822 HB 2216 and HB 2205. Regarding SB 528, expands regional Health Equity coalition statewide. Is in the budget committee. Would expand regional HealthEquity coalitions statewide. Senate Bill 822 this relates to the overall access goals that this committee has identified. This is one that we're watching just to make sure there isn't an administrative issue. HB2216 this bill is really an opportunity to take a look at what we've done since seeking Medicaid reimbursement for CHW's and THW's in 2013 and whether or not we have actually built a model that's sustainable for

the level of access and workforce development that we need within the Medicaid program. The big milestone on this is that OHA will be able to work with third parties and others to get this work done but the report being due by the end of next year actually sets us up pretty well for a legislative conversation if funding becomes an issue. I think the challenge here is marrying it with the next governor's budget development process and when preliminary recommendations may be known. The final kind of point in time snapshot I wanted to provide is house bill 2205. What it allows for is it gives the governor via the agency more statutory authority so we don't have to go back to the legislature for any extensions in the future and we can determine the period of the contract so whether it's five years going forward or six years or seven years as part of the contract process and so we won't need a bill in the future to do any of those things and we can be more nimble with this contract.

Procurement is important, a lot of new responsibilities. Health report is being completed by end of this month, we can get that to this committee. June we will adjust the timeline so we are building towards where the procurement will go.

Marin: You talked about SB529, any more information?

Kristina: Is in Ways and Means.

Annie: Wanted to add, we are in April and things are moving faster. We had like 75 people on April 1st for lobby day. Some didn't know that we exist. I think that speaks about the disconnect and why we want to reach out to the state and representatives. Coalition can have a big impact.

Marin: Did the price go up? We had 3.6 for the RHEC.

Kristina: That's for the full biennium cost. Carceral (Re Entry) Benefit. As the Ways and Means looks at broader benefit expansion, this may be an area for advocacy. We just completed a readiness review, had about 90% of local partners participated. We are finding those facilities are in different places, have a policy question on implementation or not. SB 844 is a cleanup bill from OHA and requires legislative appropriations. It's a 51.1 million dollar request, about. Which is mentioned here is legislation that Congress passed that basically says certain populations who are incarcerated have to receive certain mandatory services 30 days prior to release and after release. What the reentry benefit says is hey the backpack for these individuals prior to release and after release actually needs to be a little bit

bigger to set them up for success - whether it's mitigating for recidivism by ensuring people have accurate access to medications post release, setting them up with case management through in reach to these facilities. When you talk about this level of coordination for prerelease medical assistance, some people at the local facilities are only staying for seven days. The work to catch someone and build and braid that kind of in reach whether it's by CCO's or community organizations, is going to be pretty difficult. Trying to be as intentional as possible in doing the readiness review, looking at the outcome, where does it make sense to launch first, is it appropriate to have some sites launched after. Would be a real disruption to not receive the legislative appropriation.

Federal updates -We are communicating what is known and not speculating. Picture likely to be more clear in mid-July or August. We are in strong partnership with Attorney General. Actual interruption in services, on March 28th we received a notice to issue a stop work order because we might not be able to get those services since March 28th covered. Depending on final outcome, we may have to pursue our first layoffs. For sake of not flowing more chaos, we have issued formal communication to stop work.

CMS has started this process on issuing guidance and letters. With the health-related services waiver and the carceral waivers because we have a bunch of federal money through DISHP. Right now we are not seeing any sort of impact to our DISHP dollars. Community capacity grants that were issued last year, are being issued this summer - those are DISHP dollars.

Marin: What's been the discussion on data protection?

Kristina: We are looking at everything that we collect. What I can say is that we did a an enterprise wide data request to see if other sensitive topic information that has been collected, we've been working with the attorney general's office to identify where our risk might be. If there is an opportunity to limit that we are pursuing those options. Can't give guarantee.

Josie: Oregon is looking at if there are other options, they are being pursued?

Kristina: Yes

Josie: \$51+ million dollar price tag, has there been an analysis done what the cost will be if it's not done?

Kristina: Not in that way.

Josie: Give us a summary in June/July for procurement update like CCO snapshot, etc. Then a longer runway to regroup as a committee and what rule we will play on an equity impact.

Amy: Just a few house bills I want to talk about that are part of the Governor's priorities. HB 2059 – that includes 90million-dollar investment in additional adult BH capacity. Oregon is currently in a really rough situation where we have folks cycling in and out of jail and hospital or discharging into inappropriate places. Trying to move the needle this legislative session. Is in Ways and Means. KC and I have had conversations with local communities, CCO's, CMH Programs, to talk about if they had additional capacity what would they note as the highest priority. Want to ensure that there is geographical equity so not all investments are in the same place. We need more residential facilities that have the potential to be secure. if NAMI HB 2467 goes through. It lowers threshold for civil commitment. And that we are creating more flow through BH system so they aren't getting stuck in one space. Given litigation that is ongoing in with Mink Bowman, we are at risk of being held in contempt of court because we are out of compliance relating to aid and assist. Washington was held in contempt of court and they had to pay over 400 million in fines. That only goes back into they system to make improvements but the challenge is the federal court gets to make those decisions. Our fear is we don't want to create more intuitional setting where they get stuck and not have a way to get hem back into their local communities. Would love the advocacy around HB 2059.

Other bill wanted to flag is SB142, which is Governor's BH workforce capacity bill. That entails expanding capacity at the universities to train and grow more BH workforce. It includes grants and stipends to help them get their degree. Its basically an acknowledgment we are not out of the woods in the BH workfroce crisis.

Marin: Is that money going to HECC, for OHA to work with?

Amy: Evenly split between HECC and OHA. Another bill is HB3051. That's another one we are working on to highlight.

Josie: When it comes to advocacy, what bills would you recommend highlighting in our letter to support? HB2059?

Amy: HB 2059 and SB142 I would recommend.

Josie: Votes for support in the letter?

Yes votes – Marin, Annie, Jackie.

Annie: We've been tracking since measure 110, we've been hearing and asking about engagement with facilities that they have to apply to be apart of this program. There is no choice for someone who was maybe treated not the best. Keep advocating, we see disparities in who gets to participate, who makes decisions, and limitation of bed space that does not make it as accessible for those seeking services.

Amy: Are you talking about deflection and how that's rolling out in your community and potential inequities happening?

Annie: Yes

Amy: Your talking about, it feels like their inequities to who access those programs and the limit of facilities for residential placement.

Annie: Yes, not a lot of options.

Amy: Just out of curiosity, are there other entities than the "usuals" that are interested in providing services?

Marin: In Salem and Woodburn we have OYE, led by Latinos providing mental health services that speak Spanish.

Josie: They serve just locally but been Woodburn based primarily. Just locally at this point.

Marin: They are a local private organization that provides services that are culturally specific.

Amy: Thank you. I heard there is only one substance use residential treatment that specifically serves Latinos and for women?

Josie: That I don't know but I don't imagine there are many.

Annie: In southern Oregon there are the usual entities, but we are told its down to funding on who qualified and who applied.

Amy: Appreciate the feedback and your support.

Josie: summarize bills we'd like to move forward: HB3835, SB844, HB 2059, SB 142, noting alignment with committee priorities. We will craft the letter and move it to

	get your review.	
	Meeting adjourned.	
Discuss: Where can	Discussion combined with agenda point above.	
the committee help		
advocate?		

Meeting Materials	Pe
	RJC HEC 4.16.25 Health Leg Update.pj

Zoom Chat

15:05:14 From Javier Cervantes, Gov. Office (El, He, Him, His) to Hosts and panelists:

Agenda

- 1. Key Bill Updates:
- a) ODHS-Rachel
- SOCAC bill
- SB 296 hospital discharge task force
- Other ODHS bills
- b) Behavioral Health-Amy
- c) OHA-Kristina
- RHEC
- PH modernization
- THW bills
- 2216
- SB 529
- In carceral Medicaid
- CPOP GRB
- 2. Other Discussion: Where can the Committee Help Advocate? Any other updates
- 15:05:42 From Tae-Sun Kim to Hosts and panelists:

I also have to leave right before 4PM today.

15:06:39 From Javier Cervantes, Gov. Office (El, He, Him, His) to Hosts and panelists:

Thank you Tae-Sun

15:38:56 From Rachel Currans-Henry (she/her), OR to Hosts and panelists:

Alright, well thank you all! I will follow up with Josie and Marin regarding a letter on the SOCAC bill

15:39:09 From Josie Silverman-Mendez (she/her), Willamette Health Council to Hosts and panelists:

Thank you, Rachel!

16:07:49 From Kristina Narayan (OR) *Gov to Hosts and panelists:

puh-leaase

RJC: Health Equity Subcommittee Legislative Update

April 16, 2025

Office of Governor Kotek Kristina Narayan



Policy Committee

- Public Hearing
- Work session (amendments may be adopted, fiscal impact and revenue impact statements issued)
- FIS/RIS? JWM or Rev
 - No Senate Policy Committee
- No FIS/RIS? to the Floor
 - 2nd Chamber Policy Committee next



Senate Bill 528A

- Expands Regional Health Equity Coalitions statewide
- Vote: 4-1-0-0
- Location: Joint Ways and Means

\$ 9,700,844 Total Fiscal



 Modernizes network adequacy standards for regulated (746) health plans (commercial, non-Medicaid)

• Vote: 3-2-0-0

Location: Joint Ways and Means (by error)

House Bill 2216

- Requires OHA to assess FFS billing practices for CHWs
- OHA to develop recommendations to ID adequate and sustainable funding
- OHA to assess current APMs used for CHWs in non-clinical settings
- Report due 11/1/2026
- Vote: 9-0-0-0
- Location: Joint Ways and Means

\$ 2,238,468 Total Fiscal



House Bill 2205A

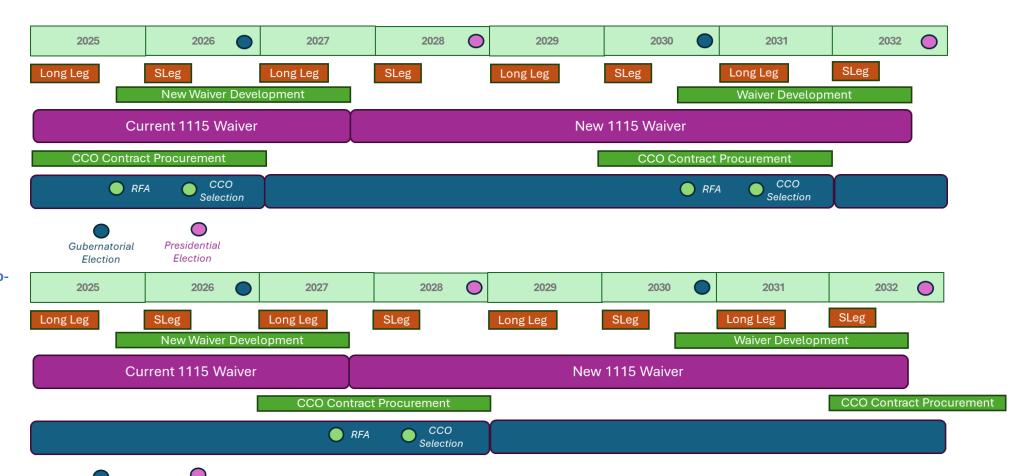
Presidential

Election

Gubernatorial

Election

Timeline for Current CCO Contract



Timeline for Two-Year Contract Extension



Carceral (Re Entry) Benefit

- Carceral facilities are eligible to start going live with reentry health services on Jan. 1, 2026, through July 2027.
- Carceral facilities will go live with FCAA services beginning Jan. 1, 2026.

Eligible Facilities

State prisons

State youth detention facilities

County jails

County juvenile detention facilities

Requires legislative funding; statutory changes (omnibus bill, SB 844)

Federal Update

- Leadership is committed to keeping staff updated on the federal funding cuts announced March 28.
- On April 4, Oregon joined 22 other states and the coalition was successful in obtaining a temporary restraining order. However, there are many legal steps ahead, and the final outcome is uncertain.
- Due to these federal uncertainties, a narrow stop work order has been communicated to several public health subgrantees this week.
- You can continue to follow developments on OHA's <u>internal</u> and <u>external</u> web pages.
- Other topics: DSHP, HRSN, etc.

