

HB 3090 Recommendations / Timeline

Action Step:	Timeline:
OHA will prompt hospitals of this requirement, "Hospital Policies Available on Public Facing Websites or Provided to Patients."	Spring 2022
Hospitals should develop policy summaries that are provided to patients and lay caregivers upon admission or release from the ED and develop protocols to ensure summaries are offered to patients and lay caregivers.	None provided
To address Misinterpretation of Rules by Hospitals, The Authority and partners should review current guidance to hospitals provided by OHA and OAHHS, identify where additional guidance is necessary and develop recommended guidance	None provided
To address Misinterpretation of Rules by Hospitals, The Authority and partners should review current information provided by OHA and OAHHS to patients, families and caregivers, identify where additional guidance is necessary and develop recommended guidance.	None provided
To address the Responsibility of Hospitals When Contracting Out Rule Requirements, Hospitals should ensure that contracts with vendors include clearly defined responsibilities and that the vendor reports on outcomes to the hospital. This will ensure requirements are being met through quality improvement checks	None provided
To address the Lack of Understanding on How Policies are Meeting Intended Goals, Hospitals should put data tracking and quality improvement plans in place to ensure written policies are being implemented. Through regular quality improvement assessment, hospitals can identify gaps in policy requirements and can make plans to improve policy implementation.	None provided

<p>To address the Lack of Understanding on How Policies are Meeting Intended Goals, The legislature should consider convening a mental health workgroup, similar to when the initial legislation was developed, with a broad partner group to review barriers and successes to implementation and identify if additional legislation is needed to clarify requirements. This group should consider:</p> <ul style="list-style-type: none"> o the unique barriers of hospitals in different regions of the state, o the unique barriers for populations including children (age 14 and over per rules) and o the unique barriers for houseless adults. 	None provided
<p>To address the Lack of Understanding on How Companion Bill, HB 3091, Supports Implementation Efforts, The legislature should consider convening partners to address HB 3091 barriers and identify solutions to current reimbursement issues. The Department of Consumer and Business Services, that oversees rules related to HB 3091, should be involved.</p>	None provided
<p>To address the Lack of Understanding on How Companion Bill, HB 3091, Supports Implementation Efforts, Determine how these rules align with more current efforts such as HB 3046 passed in 2021. This new behavioral health parity bill essentially defines what parity is and requires insurers to cover both immediate crisis and underlying conditions and treatments.</p>	None provided
<p>To address the Lack of Referral Options for Hospitals to Support Patients in Care Coordination, Align with current state efforts to address workforce staff shortages and crisis system improvements, including development of the statewide crisis care system and supporting infrastructure</p>	None provided
<p>To address the Lack of Referral Options for Hospitals to Support Patients in Care Coordination, Determine ways that significant behavioral health funding initiatives passed during the 2021 legislative session can support the intent of HB 3090 rules</p>	None provided
<p>To address the Lack of Referral Options for Hospitals to Support Patients in Care Coordination, Develop or enhance community resources in rural communities to support rural hospital execution of care coordination rules</p>	None provided

<p>To address the Lack of Referral Options for Hospitals to Support Patients in Care Coordination, Consider the unique needs of individuals who have a history of trauma and are adverse to engagement with institutions and develop strategies and systems to support these individuals</p>	<p>None provided</p>
<p>To address the Lack of Referral Options for Hospitals to Support Patients in Care Coordination, Engage Coordinated Care Organizations to determine how community-based outpatient programs for Medicaid beneficiaries can be better utilized</p>	<p>None provided</p>
<p>To address the Lack of Referral Options for Hospitals to Support Patients in Care Coordination, Develop creative ways to contact hard to reach individuals, including those experiencing houselessness and who may not have phone or internet access</p>	<p>None provided</p>
<p>To address the Lack of Referral Options for Hospitals to Support Patients in Care Coordination, Encourage use of statewide supports such as warmlines to bridge gaps in available services</p>	<p>None provided</p>
<p>The Authority should convene a group of partners to consider if administrative rules should be expanded to allow nurses/nurse case managers to conduct caring contacts.</p>	<p>None provided</p>
<p>Hospitals should provide training to nurses/nurse case managers on a person's pronoun, use of person-centered language, identifying psychosocial issues in a way that does not pass judgement. There needs to be some mental health training, especially for rural areas. This training needs to be culturally responsive and trauma informed.</p>	<p>None provided</p>

YSIPP '21-'22 Initiative Committee Assignments

Initiative	Monitor / Informed	Consulted	Actively Support	Responsible
YSIPP '21-'22 Initiatives				
Results from the HB 3090 (2017) Resurvey Project of Oregon hospitals regarding Emergency Department policies and behavioral health crises will be published by OHA in Fall 2021. This report will include recommendations to the legislature.			X	
The Alliance will respond to OHA's HB 3090 Resurvey Project report (due Fall 2021) and develop a work plan to monitor next steps.				X
The Crisis and Transition Services (CATS) program provides short-term, intensive support to children and adolescents who have had a mental health crisis and presented to an emergency department or crisis center. The program serves as a bridge from emergency department discharge to connection to long-term outpatient supports. Current programming level: 12 sites in 11 counties.	X	X		
New: Caring Contacts billing code activated in Medicaid.	X	X		
Emergency Department guide for children and families is available and distributed regularly to hospitals in Oregon.		X		
New: Mobile Response and Support Services (MRSS) system is being developed in Oregon, including a children's specific system.	X	X		
New: Identify infrastructure needs for mobile crisis response and stabilization services for statewide access.	X			
New: ODE and OHA will publish a toolkit for universal suicide risk assessment, screenings, and safety planning.		X		
HB 3090 Feedback Letter				
Recommended formation of a workgroup and this committee wants to be included and have input on additional members				
Ongoing monitoring of the following recommendations: Lack of Hospital Policies Available on Public Facing Websites or Provided to Patients; OHA and OAHHS guidance should be reviewed and outreach provided no later than December 2022; Ongoing quality improvement assessments				
AKG Letter				
Develop a convening body to create a community of practice around implementation policies related to ORS 441.015 to 441.063 and ORS 441.196 (HB3090, HB2023)				

Identify a point of contact within each stakeholder group for all work related to ORS 441.015 to 441.063 and ORS 441.196 (HB3090, HB2023)				
Establish a reference document of the interrelationships among the stakeholders, identifying their responsibilities, current and future implementation efforts, and points of interdependence, using the attached draft document as a starting point				
Create a forum for the sharing of completed work, including audit forms, implementation tools, and contact lists				
Develop a plan for dissemination and use of existing tools and documents (such as OAHHS' Interpretative Guidelines for Oregon Hospitals regarding discharge planning from hospitals, OHA HB3090 Reports resulting from hospital surveys, etc.)				
OHA to establish a page on its website, easily accessible to the public, that describes the requirements associated with these laws and a defined procedure for grievance or complaint submissions				
DCBS to report on any efforts and findings in regard to implementation, enforcement and complaint procedures associated with ORS 743A.168 (HB3091)				
The Legislative Assembly to hold hearings on implementation, enforcement, complaints and barriers to implementation and develop any follow up actions based on reports made during the hearings				

Transitions of Care Committee Action Items
21 January 2022

1. HB 3090 Feedback Letter
 - 1.1. Recommended formation of a workgroup and this committee wants to be included and have input on additional members
 - 1.2. Ongoing monitoring of the following recommendations:
 - 1.2.1. Lack of Hospital Policies Available on Public Facing Websites or Provided to Patients
 - 1.2.2. OHA and OAHHS guidance should be reviewed and outreach provided no later than December 2022
 - 1.2.3. Ongoing quality improvement assessments
2. AKG Letter
 - 2.1. Develop a convening body to create a community of practice around implementation policies related to ORS 441.015 to 441.063 and ORS 441.196 (HB3090, HB2023)
 - 2.1.1. Also mentioned in HB 3090 Feedback letter
 - 2.2. Identify a point of contact within each stakeholder group for all work related to ORS 441.015 to 441.063 and ORS 441.196 (HB3090, HB2023)
 - 2.3. Establish a reference document of the interrelationships among the stakeholders, identifying their responsibilities, current and future implementation efforts, and points of interdependence, using the attached draft document as a starting point
 - 2.4. Create a forum for the sharing of completed work, including audit forms, implementation tools, and contact lists
 - 2.5. Develop a plan for dissemination and use of existing tools and documents (such as OAHHS' Interpretative Guidelines for Oregon Hospitals regarding discharge planning from hospitals, OHA HB3090 Reports resulting from hospital surveys, etc.)
 - 2.6. OHA to establish a page on its website, easily accessible to the public, that describes the requirements associated with these laws and a defined procedure for grievance or complaint submissions
 - 2.6.1. In progress
 - 2.7. DCBS to report on any efforts and findings in regard to implementation, enforcement and complaint procedures associated with ORS 743A.168 (HB3091)
 - 2.8. The Legislative Assembly to hold hearings on implementation, enforcement, complaints and barriers to implementation and develop any follow up actions based on reports made during the hearings

3. YSIPP 2021-2022 Initiatives

3.1. Results from the HB 3090 (2017) Resurvey Project of Oregon hospitals regarding Emergency Department policies and behavioral health crises will be published by OHA in Fall 2021. This report will include recommendations to the legislature.

3.1.1. In progress; OHA responsibility

3.2. The Alliance will respond to OHA's HB 3090 Resurvey Project report (due Fall 2021) and develop a work plan to monitor next steps

3.2.1. Feedback submitted; work plan in progress

3.3. The Crisis and Transition Services (CATS) program provides short-term, intensive support to children and adolescents who have had a mental health crisis and presented to an emergency department or crisis center. The program serves as a bridge from emergency department discharge to connection to long-term outpatient supports. Current programming level: 12 sites in 11 counties

3.4. Caring Contacts billing code activated in Medicaid

3.5. Emergency Department guide for children and families is available and distributed regularly to hospitals in Oregon

3.6. Mobile Response and Support Services (MRSS) system is being developed in Oregon, including a children's specific system

3.7. Identify infrastructure needs for mobile crisis response and stabilization services for statewide access

3.8. ODE and OHA will publish a toolkit for universal suicide risk assessment, screenings, and safety planning