

CCO 2.0 — NAMI Brain Trust LC

- End sub-delegation of risk for behavioral health benefit. CCO must hold risk.
- Require CCOs to hold at plan level: care coordination, utilization management, and appeals and grievances.
- Require network adequacy and access measures.
- Require timely denials that include alternate treatment recommendations. Otherwise, default to prescribed care or next higher level of care.
- Standardize treatment and supports subject to prior authorization statewide.

Civil Commitment LC

- NAMI will support legislation adding statutory definition for terms “near future” and “danger to self and others.”
- Aimed at making civil process more reasonable.
- Hope is that patients enter through civil process rather than 370 “aid and assist” process.

Mental Health Clinical Advisory Group (SB 138)

- Jointly support with Oregon Health Authority continuation of workgroup created in 2017 to develop comprehensive treatment algorithms for mental illness.
- Tie continuation to Oregon Psychiatric Access Line hosted at OHSU. (HB 2691)
- Designed to influence the provision of care across Oregon.
- Continues mental health medication access protections.

Treatment Housing Incentive Funding (capital construction)

- Seek additional funding for Mental Health Housing Development Incentive Fund created in 2017 (HB 3063).
- Funds all types of housing: crisis respite, residential treatment homes, adult foster care, independent living with supports, etc.

Other concepts in support:

- Children & Youth with Specialized Needs legislative concept and budget request. (SB 1)
- Social and Emotional Well-Being workgroup concept and budget request. (HB 2224)
- Governor’s recommended budget to maintain Medicaid expansion and fund 500 units of permanent supported housing for individuals living with serious mental illness.