

Enrolled Senate Bill 648

Sponsored by Senator KNOPP, Representative BUEHLER; Senator STEINER HAYWARD, Representatives HOYLE, MCLANE, WHISNANT, WILLIAMSON

CHAPTER

AN ACT

Relating to Central Oregon Health Council; amending sections 13, 14, 15, 16, 18 and 19, chapter 418, Oregon Laws 2011.

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

SECTION 1. Section 13, chapter 418, Oregon Laws 2011, is amended to read:

Sec. 13. (1) Crook, Deschutes and Jefferson Counties may form a Central Oregon Health Council when the governing body of each of the counties adopts a resolution signifying the body’s intention to do so.

(2) *[Subsequent to the formation of the Central Oregon Health Council,]* A county that is adjacent to Crook, Deschutes or Jefferson County may join the council if:

- (a) The governing body of the county seeking to join the council adopts a resolution signifying the body’s intention to include a portion of that county in the region served by the council;
- (b) The portion of the county to be included in the region is part of a natural health care referral pattern with the other counties on the council; and
- (c) The Oregon Health Authority and the council approve.

SECTION 2. Section 14, chapter 418, Oregon Laws 2011, is amended to read:

Sec. 14. (1) The Central Oregon Health Council shall consist of no more than *[11]* **15** members, including:

[(a) A formative council consisting of:]

[(A)] **(a)** One member each from the governing bodies of Crook, Deschutes and Jefferson Counties, appointed by each body;

[(B)] **(b)** The chief executive officer, or a designee of the chief executive officer, of the health care system serving the region; *[and]*

[(C)] **(c)** The chief executive officer, or a designee of the chief executive officer, of *[the Medicaid contractor]* **each coordinated care organization serving any of the counties in the region that join the council;** and

[(b)] **(d)** At least three members appointed by the *[formative]* council *[established under paragraph (a) of this subsection. Members appointed under this paragraph shall be representatives of]* **who represent:**

- (A) Consumers of physical and behavioral health services;
- (B) Health care professionals;
- (C) School districts or educational service districts;
- (D) The business community; or

(E) [A member from] The governing body of [each] **any** county that joins the council under section 13 (2), [of this 2011 Act] **chapter 418, Oregon Laws 2011.**

(2) The term of office of the members of the council is four years. **Members may be reappointed.**

(3) A majority of the members of the council constitutes a quorum for the transaction of business.

(4) The council shall elect a member of the council to serve as the chairperson.

(5) If there is a vacancy for any cause, the appointing authority shall make an appointment to the vacated position to become effective immediately.

(6) The council may **incorporate under ORS chapter 65 as an Oregon nonprofit corporation and may adopt rules necessary for the operation of the council**, enter into necessary contracts, apply for and receive grants, hold and dispose of property and take other actions necessary to carry out the activities, services and responsibilities assumed by the council.

(7) The council may [adopt rules necessary for the operation of the council] **convene a single community advisory council required by ORS 414.627 for all of the coordinated care organizations serving any of the counties that join the council.**

SECTION 3. Section 15, chapter 418, Oregon Laws 2011, is amended to read:

Sec. 15. The Central Oregon Health Council [shall] **may** appoint an advisory committee to advise the council in the performance of the duties of the council. The members of the advisory committee may include representatives of:

(1) Public health agencies serving the region;

(2) Behavioral health agencies for mental health authorities serving the region represented on the council;

(3) Hospital or integrated delivery systems serving the region represented on the council;

(4) Medicaid contractors in each region served by the council;

(5) Safety net clinics;

(6) Health collaboratives;

(7) The dental profession;

(8) School and educational service districts;

(9) The business community;

(10) Primary care clinics; and

(11) Independent physician associations.

SECTION 4. Section 16, chapter 418, Oregon Laws 2011, is amended to read:

Sec. 16. (1) As used in this section, "regional health improvement plan" means a four-year comprehensive, coordinated regional plan incorporating and replacing all health and human service plans prescribed by the Oregon Health Authority, including but not limited to:

(a) Plans required under ORS 430.630, 430.640, 431.385 and 624.510; **and**

(b) **The community health assessment and community health improvement plan described in ORS 414.627.**

(2)(a) The Central Oregon Health Council shall conduct a regional health assessment and adopt a regional health improvement plan to serve as a strategic population health and health care system service plan for the region served by the council. The plan must define the scope of the activities, services and responsibilities that the council proposes to assume upon implementation of the plan.

(b) The activities, services and responsibilities that the council proposes to assume under the plan may include, but are not limited to:

(A) Analysis and development of public and private resources, capacities and metrics based on ongoing regional health assessment activities and population health priorities;

(B) Health policy;

(C) System design;

(D) Outcome and quality improvement;

(E) Integration of service delivery; and

(F) Workforce development.

(3) The council shall submit the plan adopted under subsection (2) of this section to the authority for approval. The authority may approve the plan or return it to the council for modification prior to approval.

(4) The regional health improvement plan adopted under this section shall serve as a guide for entities serving medical assistance recipients, public health authorities, mental health authorities, health care systems, payer groups, provider groups and health coalitions in the counties served by the council.

SECTION 5. Section 18, chapter 418, Oregon Laws 2011, as amended by section 64, chapter 37, Oregon Laws 2012, is amended to read:

Sec. 18. [No later than the dates of the convening of the 2013 and of the 2015 Legislative Assemblies as specified in ORS 171.010,] The Central Oregon Health Council shall report to the [Seventy-seventh and Seventy-eighth] **Seventy-ninth** Legislative [Assemblies] **Assembly** in the manner provided by ORS 192.245 about the results of the implementation of the regional health improvement plan adopted under section 16, [of this 2011 Act] **chapter 418, Oregon Laws 2011**. The report shall include, but is not limited to, performance measures of improvement of health outcomes, improvement in care and reductions in the cost of care.

SECTION 6. Section 19, chapter 418, Oregon Laws 2011, is amended to read:

Sec. 19. Sections 13 to 18, [of this 2011 Act] **chapter 418, Oregon Laws 2011**, are repealed on January 2, [2016] **2022**.

Passed by Senate April 9, 2015

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Lori L. Bocker, Secretary of Senate

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Peter Courtney, President of Senate

Passed by House May 28, 2015

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Tina Kotek, Speaker of House

Received by Governor:

.....M,....., 2015

Approved:

.....M,....., 2015

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Kate Brown, Governor

Filed in Office of Secretary of State:

.....M,....., 2015

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Jeanne P. Atkins, Secretary of State