

**CHAPTER 645**

AN ACT

SB 70

Relating to disparities in health outcomes for communities impacted by discrimination; and declaring an emergency.

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

**SECTION 1. (1) As used in this section:**

(a) “Communities of color” means members of racial or ethnic communities as prescribed by the Oregon Health Authority by rule.

(b) “Community-led” means based on a set of core principles that, at a minimum, engages the people living in a geographic community to establish goals and priorities, using local residents as leaders, building on strengths rather than focusing on problems and involving cross-sector collaboration that is intentional and adaptable and works to achieve systemic change.

(c) “Cross-sector” means involving individuals, public and private institutions and communities working together to address the social determinants of health and equity.

(d) “Culturally specific” means led by individuals from the community served, using language, structures and settings familiar to the members of the community.

(e) “Regional health equity coalition” means an autonomous, community-led, cross-sector group that:

(A) Is focused on addressing, at the policy, system and environmental levels, health inequities experienced by priority populations, with the leading priority being communities of color;

(B) Is completely independent of coordinated care organizations and public bodies as defined in ORS 174.109;

(C) Is supported by a federally recognized Indian tribe in Oregon or one of the following community-based nonprofit entities:

(i) A culturally specific organization;

(ii) A social service provider;

(iii) An organization that provides health care;

(iv) An organization that conducts public health research;

(v) An organization that provides behavioral health treatment;

(vi) A private foundation; or

(vii) A faith-based organization; and

(D) Has a decision-making body that:

(i) Is composed 51 percent or more of individuals who identify as members of communities of color who have experienced health inequities; and

(ii) Prioritizes the recruitment of members who identify as members of communities of color or who work in roles that address health inequities and institutional racism.

(f) “Regional health equity coalition model” means an approach that:

(A) Recognizes the impact of structural, institutional and interpersonal racism on the health and well-being of communities of color and other priority populations;

(B) Meaningfully engages priority populations to lead efforts to address health inequities;

(C) Supports and strengthens leadership development for priority populations; and

(D) Honors the wisdom of members of priority populations by ensuring that policy solutions and system changes build upon the strengths of the priority populations.

(g) “Priority populations” means:

(A) Communities of color;

(B) Oregon’s nine federally recognized Indian tribes, including descendants of the members of Oregon’s nine federally recognized Indian tribes;

(C) Immigrants and refugees;

(D) Migrant and seasonal farmworkers;

(E) Low-income individuals and families;

(F) Persons with disabilities; and

(G) Individuals who identify as lesbian, gay, bisexual, transgender or queer or who question their sexual or gender identity.

(2) The authority shall work with regional health equity coalitions.

(3) The authority shall ensure that it has adequate staffing to support grantees through ongoing technical assistance, contract administration, program planning and daily operational support.

**SECTION 2.** This 2021 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2021 Act takes effect on its passage.

Approved by the Governor July 27, 2021

Filed in the office of Secretary of State August 2, 2021

Effective date July 27, 2021