



from

OREGON STATE REPRESENTATIVE KEVIN MANNIX

For Immediate Release

Date: February 19, 2024

Contact: Hayley Guptill

Email: Hayley.Guptill@oregonlegislature.gov

Mannix Unveils Plan for Special Drug Misdemeanor, Statutory Overhaul of M110

SALEM, Ore. – State Representative Kevin Mannix (R-Salem) has unveiled a statutory overhaul of Measure 110, including the introduction of a special misdemeanor to handle drug offenses. The plan would be offered as an amendment to HB 4002, which in its current form lacks the necessary accountability measures needed to get drug addicts off the street and into treatment.

“Oregon is in crisis because of the failure of Measure 110. We need to put partisanship aside and focus on an Oregon solution – one based in policy, not politics. My plan takes the steps needed to clean up our streets and get addicts help. The session is halfway over; we cannot delay further if we hope to address the crisis,” **said Rep. Mannix**, who serves on the Joint Committee on Addiction and Community Safety Response.

Details on Mannix’s plan are as follows:

1. Makes drug possession a Special Misdemeanor, with Continuous Compassionate Care Supervision. Establishes accountability and treatment for possession of a dangerous drug, combining compassionate care and the potential for custody as needed. This is a new unclassified misdemeanor to be named Possession of a Dangerous Drug. This will be neither a Class A Misdemeanor nor a Class C Misdemeanor. This new unclassified misdemeanor will incorporate a continuum of care from the point of arrest forward and, if the drug possessor is found guilty, will maintain the requirement for a continuum of care for one year from the date of arrest. The potential for jail custody is included but the care program can be a residential treatment program, residence at home with regular community treatment and supervision, or other forms of supervised rehabilitation. This approach provides for incarceration as an ultimate accountability component. This approach avoids the Class C Misdemeanor jail term, which at 30 days is too short for a treatment continuum. The unclassified misdemeanor also avoids the gaps in oversight under a standard Class A Misdemeanor sentencing system.

2. Maintains the following elements of the HB 4002 -1 amendment set; section numbers refer to sections in that -1 amendment set:
 - a) Sections 1-8 cover behavioral health treatment including payment for substance use disorder treatment; “medication-assisted treatment” cleared from prior authorization requirements; pharmacists may dispense refills of medications for the treatment of opioid use disorder; prescription drug lockers authorized.
 - b) Sections 10-19 improve provisions for dealing with tenants who test positive for drugs on a preliminary test and a confirmatory test; coordinated care organizations must include addiction treatment providers; Alcohol and Drug Policy Commission shall conduct a study of barriers to and best practices as to disorder treatments for youth and adults and develop a strategic plan to address these matters; community behavioral health clinic program established in Oregon Health Authority; OHA shall submit a plan to Medicare and Medicaid centers to add new certified community behavioral health clinics; establishes Joint Task Force on Regional Behavioral Accountability;
 - c) Sections 46-59 modified to incorporate revised approach in part 1 of this list.
 - d) Section 67 expands welfare holds to 72 hours.
3. Defendants charged with the unlawful delivery of a controlled substance involving a substantial quantity (drug traffickers), will be detained from arrest until arraignment before a Circuit Court judge. At arraignment, the judge may require incarceration until trial or release on bail.
4. Creates the Office for Drug Prevention and Treatment to coordinate all state funded drug treatment and prevention programs. This Office may also coordinate grants that fund substance use disorder treatment.
5. The Office for Drug Prevention and Treatment will also be empowered to determine and plan for the best use of the Dome Building, located adjacent to the Oregon State Hospital in Salem, as a residential treatment facility. The Dome Building residential treatment facility is intended to serve the entire state by providing substance abuse and mental health treatment.
6. Includes Boyd/Hubbell Fix as proposed by District Attorneys.
7. Local governments are given the power to criminally prohibit or restrict: public intoxication as to alcohol or drugs; public drinking of alcohol; public use of any drug which is illegal under federal law; disorderly conduct; and trespassing on public property.

8. Creates the Oregon Jail-Based Medications for Opioid Use Disorder Fund which is a grant program that provides opioid use disorder treatment and transition planning services to persons in custody in local correctional facilities and tribal correctional facilities.
9. A substance use disorder is considered a mental illness if the person has lost the ability to control their use of the controlled substance and the health of the person is substantially impaired, or the person's ability to function socially or economically is substantially disrupted. This allows a person with a significant substance use disorder to be admitted and receive treatment under the civil commitment statutes.
10. The Oregon State University Extension Service will oversee a program to accelerate the promotion of behavioral health in rural areas of Oregon. This program involves convening community conversations and coordinating follow-up actions to be taken by counties or regions.
11. The Department of State Police will study ways to expedite drug testing of controlled substances, especially in cases of determining the cause of death.
12. In the case of children under the age of 18 facing substance use disorders, parents have the ability to apply for admission for inpatient treatment on behalf of their child. In these cases, the director of the treatment facility will only admit the minor if the director determines the minor has an uncontrolled substance use disorder and admitting the minor for inpatient treatment is in the minor's best interest.
13. Juvenile residential services plan: Establishes a juvenile residential services plan, in coordination with the Oregon Juvenile Department Directors' Association, to establish Formal Accountability Agreements in regard to minors who would otherwise be subject to Special Misdemeanor charges, as adults, in regard to drug possession.
14. Provide that grant programs in regard to drug prevention, treatment, and rehabilitation include consideration of dedicated funding for juvenile services.
15. Cancel the costly Oregon Health Authority contract for the toll-free number currently in existence for drug users to call in order to waive the \$100 penalty for drug use. Develop a new cost-effective toll-free number for anyone to call for assistance in finding drug treatment and rehabilitation resources, similar to the suicide hotline system.

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