



Trillium
FAMILY SERVICESSM

Building Brighter Futures with Children and Families

April 3, 2015

Dear Senate Health Services & Early Childhood Committee Members,

I am the VP of Business Development & Provider Relations for Trillium Family Services. We have mental and behavioral healthcare service hubs in Portland, Salem, and Corvallis and we treat thousands of kids each year from all over the State of Oregon. Although I understand and support the good intent of SB 831 and SB 832 especially in the arena of healthcare integration, I have some serious concerns about some of the specifics of the language contained within the bills and what the impact of that language will have on many mental health organizations' (including Trillium Family Services) ability to continue to deliver excellent care in an affordable and efficacious manner thereby frustrating the attainment of the "Triple Aim." The bills could also have the effect of creating shortages of clinicians for the demands of the Oregon Health Plan population since it would greatly reduce the number of eligible clinicians that could treat OHP members per the licensing language.

My primary concerns are with the requirement that CCOs need to contract with "licensed" or "licensed eligible" individuals. This requirement will have several effects:

- Will fairly immediately reduce current clinician levels for most organizations by up to 80% because unlicensed clinicians or clinicians who are not yet eligible for licensure would not be able to continue working with clients
- Will make it more difficult for newly graduated clinicians to find jobs with sufficient client contact hours for them to attain licensure...you must have roughly 2-3 years of contact hours with clients under the supervision of a licensed clinician in order to become licensed
- Will, because of this workforce reduction, create a large backlog of OHP members who will find that there will not be sufficient capacity available to be seen in a timely manner...not good for folks with current mental health or behavioral health challenges
- Will increase the cost of care considering that licensed clinicians typically earn more than unlicensed clinicians
- And will put additional barriers in place that would significantly impede the development of an adequate workforce to treat the burgeoning demand for Applied Behavioral Analysis services for children who are diagnosed with autism

As written, SB 831 and SB 832 would reduce the quality of care, would increase the time between referral and service commencement, and would drive up the cost of care. In short it would serve as the antithesis of all three elements of the "Triple Aim."

Please don't move these bills forward as written. I am happy to answer any questions that you may have.

Sincerely and Respectfully,

Rich Blum

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