



2685 4th Street NE • Salem, Oregon 97301 • LibertyHouseCenter.org • P: 503-540-0288 • F: 503-540-0293

March 7, 2017

Representative Alissa Keny-Guyer, Chair
House Committee on Human Services and Housing
Oregon Legislative Assembly
900 Court Street NE
Salem, OR 97301

RE: HB 2221-1

Dear Representative Keny-Guyer and Members of the Committee:

On behalf of the children of Oregon I respectfully request your favorable consideration of HB 2221-1. The purpose of the bill and its -1 Amendment is to increase access to child abuse assessment and intervention services and consistency of availability of those services to children throughout the entire State of Oregon. These services literally save lives.

Child abuse and neglect are killing Oregon's children. This bill will make critical resources available for more children in Oregon and ultimately should help to reduce the number of children who die from abuse each year.

Child abuse assessment and intervention centers, defined in ORS 418.782(3), play a critical role in the multidisciplinary team response (ORS 418.747) by providing medical assessments, Karly's law assessments (ORS 419B.022-024), forensic interviews, and trauma-informed mental health services. The problem is that traditional medical billing formulas don't begin to cover the costs of providing these life-saving services. HB 2234 (2015) opened the door to increased reimbursement, and we are grateful for the CCOs and insurers who have responded by increasing reimbursement. The intent behind HB 2221 -1 is to achieve consistency across the state and to move closer to covering the costs so that we don't have to resort to unsustainable – and inconsistent – fundraising mechanisms that are better suited to community projects that don't have such life or death implications.

The -1 Amendment is intended to provide that both private carriers and the CCO's who enroll those children and families eligible for Medicaid reimburse the costs of child abuse assessments, which include the medical checkup, forensic interview, and the initial crisis intervention or family support services.

In determining those actual costs, centers rely on an evidence based model that include only the actual costs of employing the medical providers, forensic interviewers, family support or mental health staff, clinic staff members responsible for providing direct services to the child, and a proportional share of the overhead directly related to the facility, utilities, taxes and insurance directly involved in patient care. Centers have been working to formalize the billing process, and are working under a grant from the Ford Family Foundation on improving the process. Compliance with Medicaid provisions are a key element of these efforts.

Child abuse medical assessment is a highly specialized skill. As one example, complying with Karly's Law is one of our statutory responsibilities as a designated medical provider, or DMP. Included with this letter is a schematic analysis – for training purposes - of the components of Karly's Law. This chart is designed to illustrate the points during an investigation in which DHS or law enforcement typically reach out to local CAC's to seek medical information to determine whether there is an injury and whether there is reasonable suspicion that the injury was the result of abuse or neglect. I can tell you that lack of access to child abuse medical specialists is one factor directly related to the number of deaths from child abuse each year. Passage of this bill would provide the necessary funding to ensure that we can employ highly trained medical providers in order to see the number of children who need to be seen each year under Karly's Law. Stated differently, without adequate funding we can't hire enough medical providers to see all the children who need to be seen, and that is why so many children are a higher risk of severe injury or death.

March 6, 2017
Kelley
Page Two

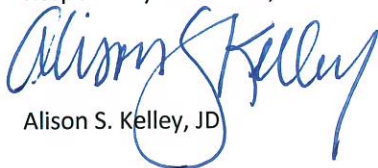
Most of the 21 assessment centers in Oregon are non-profit organizations. All nonprofits struggle to raise funds, but for centers like ours it is exceptionally difficult. Many of my CEO colleagues and I struggle to communicate the critical nature of our services because discussing rape, beatings, child pornography, commercial sexual exploitation and torture is terribly difficult and some cases are so extreme they border on the unbelievable.

I am asking you to believe it. All of those things are happening to children in our state every day of every year. Having a robust, fully funded system of medical and forensic assessment in conjunction with our other DHS and law enforcement partners is crucial to putting a stop to this terrible societal reality.

If you are wondering how much abuse is really out there, I can tell you that **at Liberty House we are currently receiving between 5 and 10 calls for Karly's Law consultations and exams every day.** That is in addition to the full assessments – nearly 600 last year – for chronic physical and sex abuse. We can't keep up due to lack of funding.

As the CEO of Liberty House and the Board Chair of the Oregon Network of Child Abuse Intervention Centers (ONCAIC), I can attest to the destructive, indeed, catastrophic effects of child neglect, physical abuse, and sexual abuse on children in Oregon. Thank you for your thoughtful consideration of this bill and its -1 Amendment.

Respectfully submitted,

A handwritten signature in blue ink that reads "Alison S. Kelley". The signature is written in a cursive style with a large, looped "K" and "S".

Alison S. Kelley, JD

B. Suspicious Physical Injury

Includes but not limited to: ORS 419B.023(b)(A)-(K)

- (A) Burns or scalds;
- (B) Extensive bruising or abrasions on any part of the body;
- (C) Bruising, swelling or abrasions on the head, neck or face;
- (D) Fractures of any bone in a child under the age of three;
- (E) Multiple fractures in a child of any age;
- (F) Dislocations, soft tissue swelling or moderate to severe cuts;
- (G) Loss of the ability to walk or move normally according to the child's developmental ability;
- (H) Unconsciousness or difficulty maintaining consciousness;
- (I) Multiple injuries of different types;
- (J) Injuries causing serious or protracted disfigurement or loss or impairment of the function of any bodily organ; or
- (K) Any other injury that threatens the physical well-being of the child.

AND

C. Certain or Reasonable Suspicion

Injury Result of Abuse.

Look at the totality of the circumstances, i.e.:

- People/Parents/Caregivers
 - Related to child
 - In the household/with the child/access to the child
 - History of DHS/LEA involvement
 - Capacity to provide care/safety
- Injury
 - Nature and severity
 - Isolated incident or part of a series of occurrences
 - Whether related to unmanaged chronic disease
 - Recent visits to ER or other provider for similar concerns
- Explanation of how injury occurred
 - Lines up/is consistent with injury
 - Conduct, attitude, statements of parents/caregivers (cooperation)
 - Consistency of statements each witness and among witnesses
- Conditions of environment
- Other risk factors/your protocols for investigation

Possible outcomes at this stage:

- Absolutely no concerns: No Reas Sus
- Clear risks
- Some risks but unclear

IF A, B, and C, THEN:

1. Immediately Photograph

ORS 419B.028(1): Photos of anal or genital only taken by medical personnel.

AND

2. Medical Assessment

with either

(a) DMP within 48 hours

(Reasonable efforts must be made to have child seen by DMP ORS 419B.023(4)(a))

OR

(b)(i) If DMP is not available within 48 hours:

Child shall be evaluated by another physician and physician's evaluation & diagnostic records should be sent to the DMP for review within 72 hours of the child's evaluation. (ORS 419B.023(4)(b))

(b)(ii) Wait for DMP opinion before closing case.

Possible outcomes at this stage:

- DMP concurs with other provider
- DMP disagrees with other prov.
- Recommendations/further assessment/forensic interview

Outcomes:
-DMP diagnosis & Recommendations

A. DHS/LEA Investigation

ORS 419B.023(2)

If a person conducting an investigation under ORS 419B.020 observes a child who has suffered suspicious physical injury . . .

Investigation is either:

- Already under way; or
- Initiated as a result of a concern about a possible physical injury