

April 3, 2017

Oregon State Legislature
House Committee on Health Care
900 Court St. NE
Salem Oregon 97301

Re: *House Bill 3090 – ED Discharge Guidelines*

Chair Greenlick and House Health Care Committee Members:

The Oregon Association of Hospitals and Health Systems (Association) wants to thank Chair Greenlick and the committee members for bringing this important conversation up for discussion. We support the direction of the amendment from Representative Keny Guyer and want to thank her for her leadership and collaboration on this work.

Oregon hospital emergency departments provide frontline care to approximately a quarter of a million people in mental health crisis every year. Hospitals and their emergency departments are often the primary source of acute care services for people with mental illness and substance abuse issues. Hospitals are legally obligated to provide stabilizing treatment for all people who enter their emergency departments, including those in mental health crisis. But the goal of the emergency department is stabilization, not long-term treatment, and people with acute mental health conditions need a more appropriate, effective setting for treatment recovery.

The Association in collaboration with its members and NAMI created and implemented the Inpatient Psychiatric Discharge Guidelines for patients hospitalized for mental health treatment. These guidelines incorporate related requirements applicable to all lay caregivers as well as clarifications regarding the disclosure of protected health information.

As a follow-up to the development and implementation of the Inpatient Psychiatric Discharge Guidelines, the Association and its hospital members look forward to developing and implementing mental health release guidelines for Oregon hospital emergency departments in collaboration with NAMI, as envisioned by the amendments proposed by Representative Keny-Guyer.

The Association would like to clarify that hospital emergency departments release patients, while patients who have been admitted to a hospital are discharged. While the term discharge may be used synonymously for both settings – official rules, policies and procedures delineate the two terms. With that said, the Association and its hospital members are ready and willing to develop and implement mental health release guidelines for Oregon hospital emergency departments. We believe these guidelines will be able to be developed and implemented without the need for further legislation, but we will forward recommendations for legislation should the process indicate legislation is needed. We have already shared our thoughts on this legislation with Representative Keny-Guyer and our membership is fully engaged in taking on expanding the inpatient psychiatric discharge guidelines to the release process for hospital emergency departments.

Again, the Association thanks the committee for their time and consideration of this important issue and we look forward to working on this as we move forward. .

Thank you,
Craig Campbell
Oregon Association of Hospital and Health Systems