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HB 5026 Testimony; February 20, 2017

I am a retired Licensed Psychologist and program administrator now providing consultation and training services for both traditional and Peer mental health organizations. I worked for a recent 19 years as a Clinical Psychologist, and from 1990-1994, served as the Mental Health Services Program Manager for the Linn County Mental Health Services program. I have also been the Director of mental health organizations and alcoholism and drug abuse treatment programs in Colorado, New Mexico, and Michigan over a 40+ year career.

I am testifying in support of maintaining current funding levels for mental health services, and for examining a more cost effective manner of spending Oregon taxpayers' dollars for mental health services.

I believe that the current Coordinated Care Organization structure in the Oregon public health system allows for wasteful spending of tax dollars. I have not before seen a public system incorporate organizational entities which could transfer public dollars into private profits. I do appreciate the ingenuity which stimulated a CCO design, yet as a taxpayer, I expect the savings and profits to be recycled into expanded public services or lowered costs.

As just one example, when recently working on HB 2304 and an amendment by which CCO's would be expected to make all members seeking behavioral health services aware of the availability of Peer Services via Traditional Health Workers (an evidence-based and less expensive service producing good outcomes), some CCO's which are accruing sizeable profits were reticent to endorse the amendment because they were finding no way to help providers offset an unpaid balance left by Medicaid reimbursing only 60%. As a taxpayer, I find it unacceptable to have my money diverted to private profits while citizens in need are denied access to Peer services which are evidence based and produce cost-effective positive outcomes. I want my tax money directed to cost-effective services which meet targeted outcome goals. Not to a private CCO's profit growth.

I recommend restructuring the CCO model so that private profits are curtailed, and a portion of the savings is used to maintain current mental health service levels.

Thank you.