



Testimony in support of SB 1549

Medicaid retention for people at OSH

February 7, 2018

Dear Chair Monnes Anderson and Members of Senate Health Care Committee,

I am Cary Moller, Marion County Health Department Administrator, testifying in support of SB 1549 on behalf of the Association of Oregon Community Mental Health Programs (AOCMHP). We wholeheartedly agree with not terminating or suspending Medicaid benefits, thereby not disenrolling individuals from their CCOs when they are admitted to the Oregon State Hospital for up to 12 months before recertification.

Community Mental Health Programs have long played a critical role in providing treatment and support to individuals with significant mental health challenges. As the entities that help people transition from OSH to the community, we know that continuation of medical benefits is critical to recovery and stability for people with serious mental illness. For many, the return to the community can be very stressful. Being disconnected from your community for months often means starting over. In Marion County, 93 individuals were admitted to OSH last year. More than 80 individuals in 2017 were discharged from OSH without access to a continuous array of treatment and supportive services in their home community.

I share a typical experience for an individual discharging from OSH without Medicaid:

Debra is a 36 year old woman discharging from OSH. She was in treatment (state hospital) for longer than typical due to the difficulty she has building trusting therapeutic relationships. She is insulin dependent and doctors have prescribed Clozaril to treat her schizophrenia symptoms.

Debra discharged with only 10 days of insulin and no appointment for either a Primary Care to manage her diabetes or a Psychiatrist or Nurse Practitioner to oversee her required weekly blood draws for Clozaril. Debra has no support systems and without Medicaid she is unable to take medical transport to required

appointments. Though she discharged with an Open Card, no local doctors would schedule appointments to see her without confirmation of Medicaid coverage. Because this is her first time applying for benefits it takes nearly 3 months for approval.

Her Community Mental Health Program case manager found her Supportive Housing but she wasn't able to access much needed habilitative (1915i) support for activities of daily living without Medicaid.

If Debra had been able to maintain her Medicaid while at OSH this would have been her experience: Debra was admitted to OSH for symptoms related to Schizophrenia. Prior to admit Debra was receiving support from her Community Mental Health Program Assertive Community Treatment (ACT) team. She has a very positive relationship with the Peer on the team, Aaron. Aaron was able to continue to meet weekly with Debra and to help the team at OSH learn the most effective ways to communicate with her. Debra quickly stabilized and Aaron and the rest of the ACT team worked with the OSH social worker to find the most supportive housing option for her. On the day of her discharge she had follow-up appointments scheduled within 7 days with her Primary Care and a Nurse Practitioner to support both her diabetes and the additional needs she has due to being on Clozaril. Prior to discharge Debra met the Community Mental Health Program staff that will support her in her apartment with 1915i services and she is excited to use Medical Transportation to go to her appointments and to attend therapeutic events at local Peer Run Organizations like ROCC.

Thank you for the opportunity to provide testimony in support of SB 1549.

Sincerely,

A handwritten signature in black ink, appearing to read 'Cary Moller', written in a cursive style.

Cary Moller
Administrator, Marion County Health Department