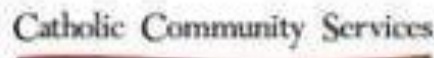
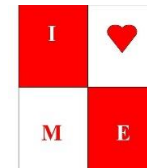


A man with dark hair, wearing large black headphones and a dark t-shirt, is sitting at a desk. He is looking intently at a laptop screen, with his hands clasped together in front of his chin in a thoughtful or focused pose. The background is blurred, showing what appears to be a modern office or workspace with some furniture and lights.

INVESTING TO SAVE

Responding to COVID-19 Based on Oregon's Past Experience





Think Counter- intuitively

Don't Repeat
the Mistakes
of '02 and
'08

Take
Advantage
of Your
Fiscal
Prudence

Prioritize
Areas that
Avoid Higher
Costs
Elsewhere

Do It
Differently
This Time

Oregon and At-Risk Populations

Lesson 1.

Budget Crisis “Muscle Memory”
Typically Causes Budget “Cuts”
By the Legislature

Lesson 2.

Budget “Cuts” Typically Impact
Vulnerable Populations and
Communities of Color
Disproportionately

Lesson 3.

“Cuts” Make Policy Makers Feel
Fiscally Responsible

Lesson 4.

But ... Past “Cuts” Actually
Increased “Costs” (\$ and
Human)

Lesson 5.

In this crisis, we should learn
from our past mistakes and
instead invest reserves early to
prevent additional/higher costs.

INTERVENTION	2018 COST	DURATION
In-patient stay in Oregon State Hospital	\$888	Per night
Emergency Room Visit	\$500-\$3000	Per visit
Multnomah Co Jail	\$210	Per night
Supportive Housing	\$59 - \$64	Per night
Child Welfare HOTEL Stay	\$2,000	Per night with DHS staff
Child Welfare Residential Slot	\$184 - \$314	Per night with staff costs included

#1 Lesson: **Cuts = Higher Costs:**

OHP 2008: 85,000 Reduction = \$436 million Increase in costs for uncompensated visits to ERs.

CW Cuts from 2009-2014 = 30% of provider beds closed, hundreds of children shipped out of state, lawsuits, \$2,000 per night spent on Hotels versus \$194/night in BRS.

Supportive Housing: For every dollar invested in supportive housing, hundreds of dollars each night are saved that would otherwise be spent on jail, state hospital and emergency room stays.

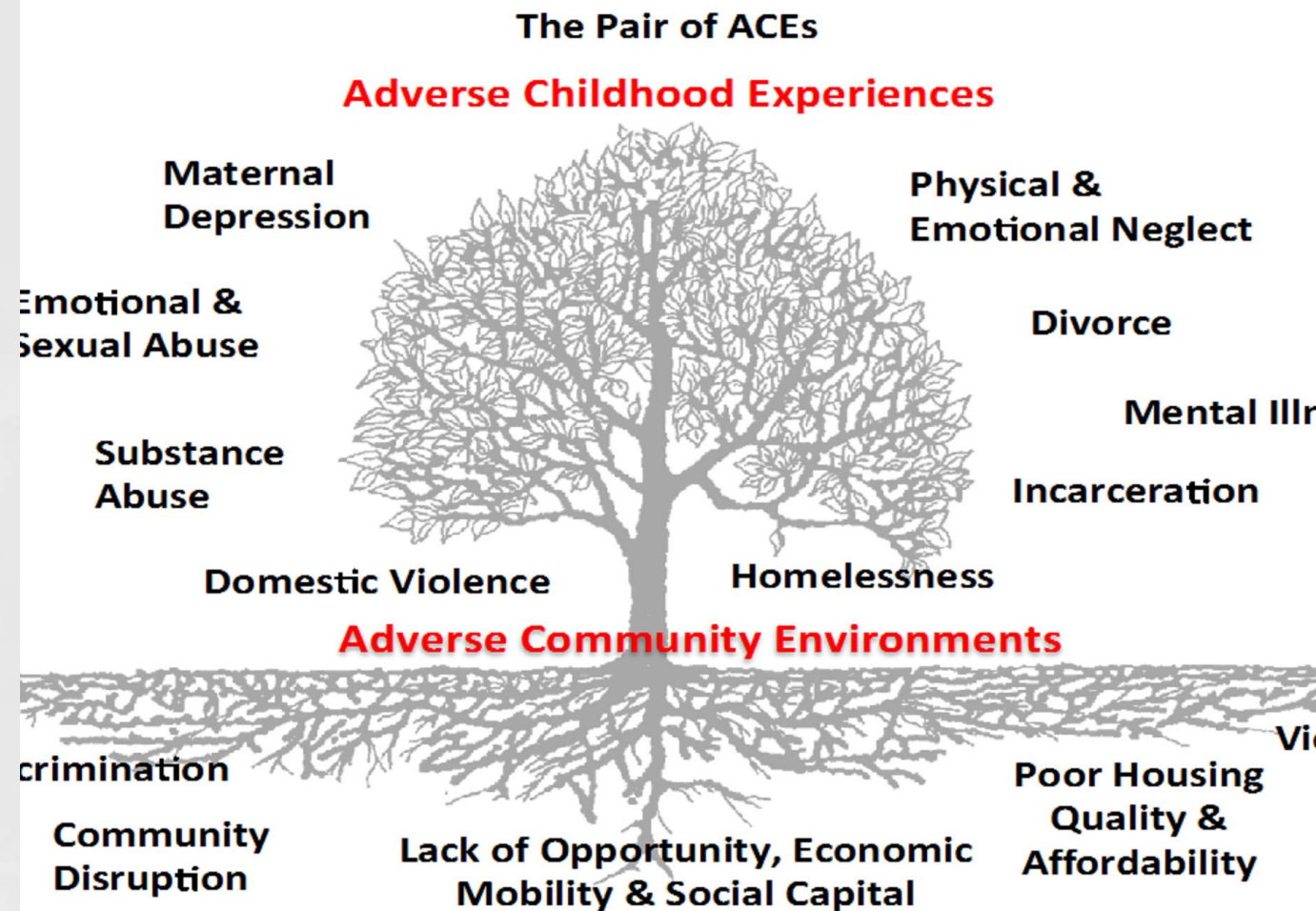


2002 & 2008 Were Different:

- Few reserve or rainy day \$
- No large-scale federal investment
- “End” was not near

Trillium Family Services





U.S. Department of Health & Human Services. (2017) A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Blocks for Resilience (BCR) Model. Academic Pediatrics. 17 (2017) pp. S86-S93. DOI information: 10.1016/j.acap.2016.

What We
Know Now
That We
Didn't Fully
Understand in
'02 and '08

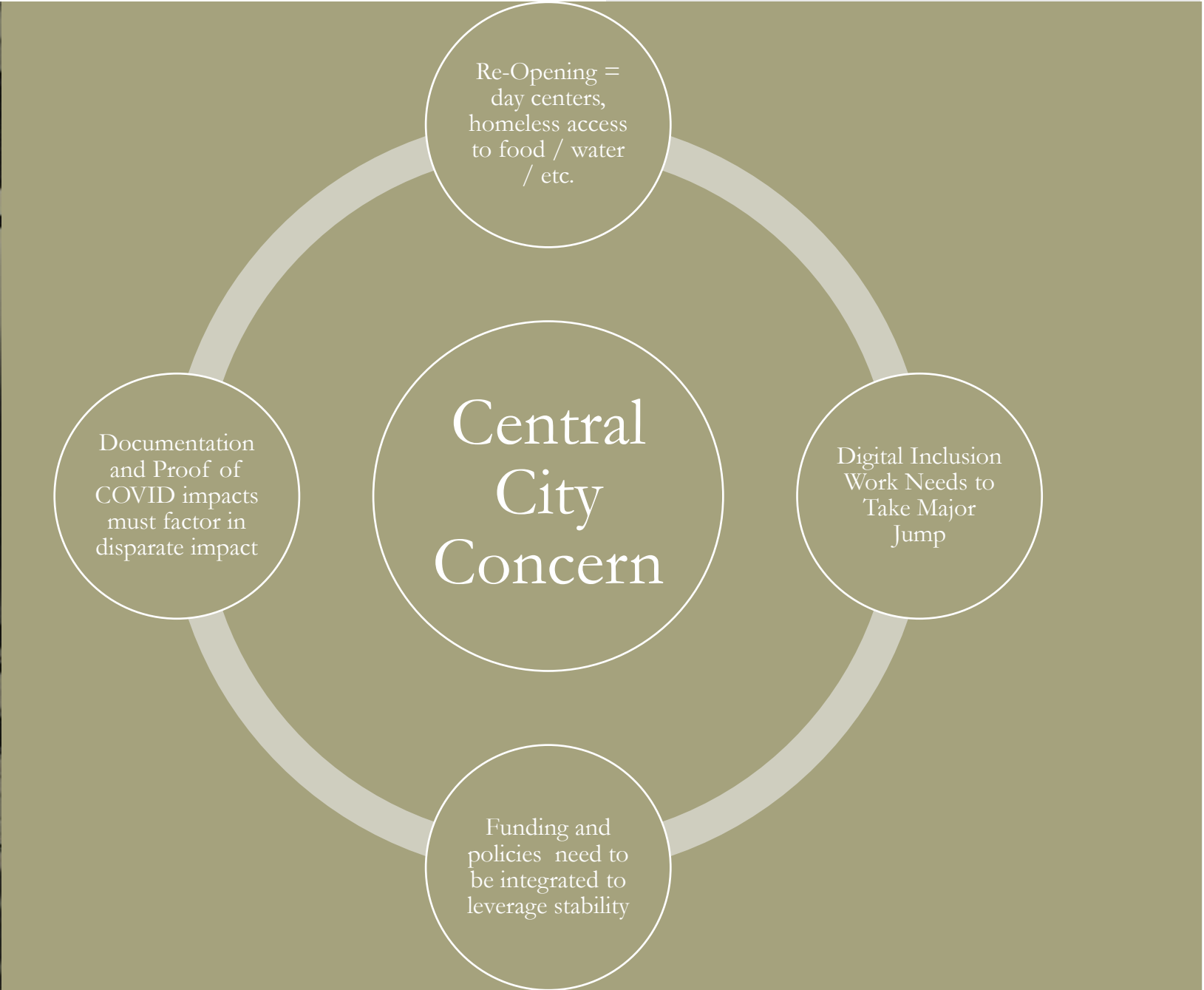
Financial system that preserves and increases current program capacity

Rules, structures and systems that support a robust platform of telehealth services

Access to testing kits that allow inpatient providers to routinely test staff and clients

Financial support for PPE and additional staffing costs

What the Youth
and Family Sector
Needs to Preserve
the System of
Care and Avoid
Higher Costs





ROI

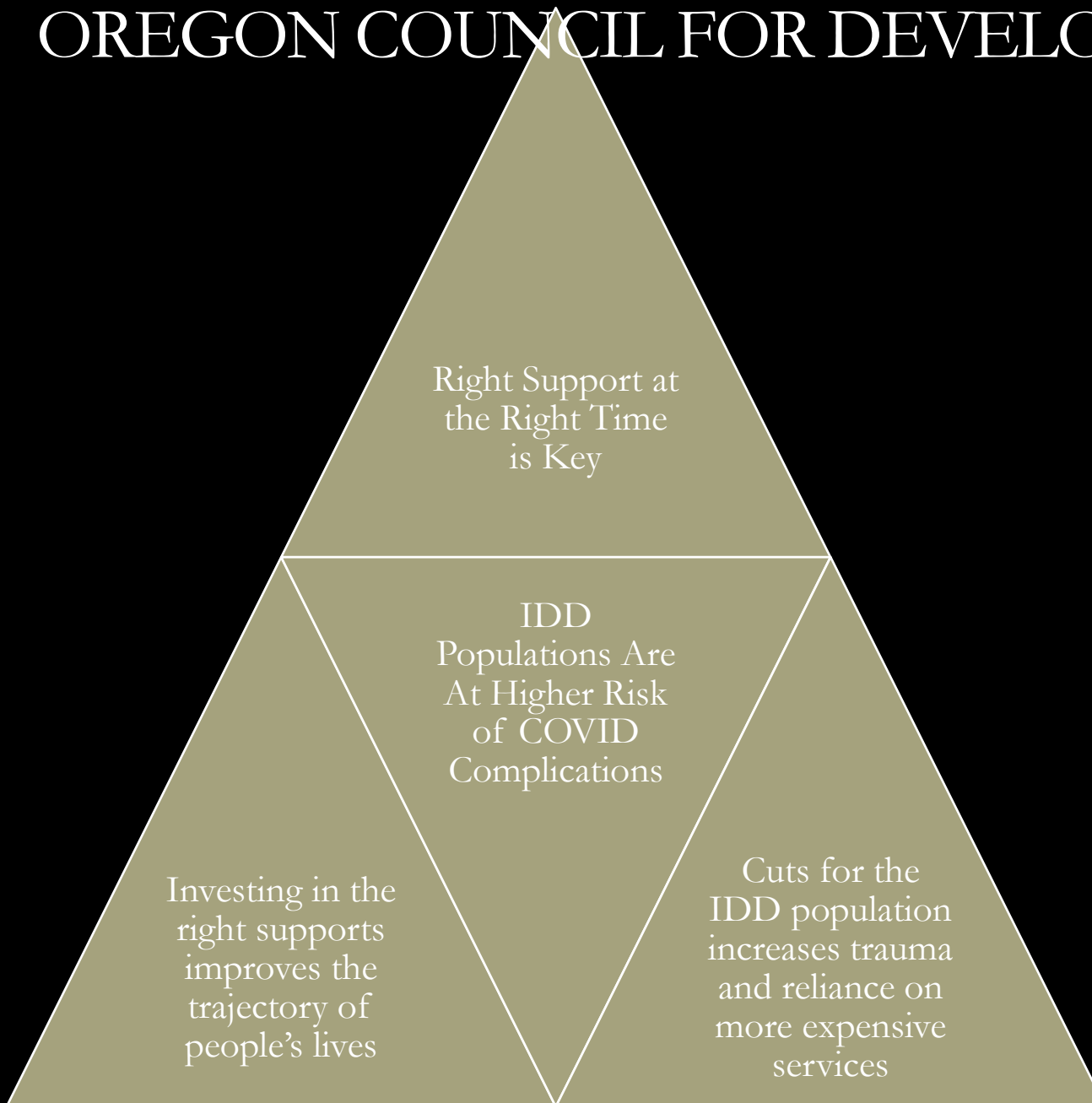
Every dollar invested into employment social enterprise brings a 174% return in earned taxable income and lowering utilization to other social services per household, especially beneficial for programs like OHP, when people are able to move onto employer sponsored health insurance

(<https://redf.org/wp-content/uploads/REDF-MJS-Final-Report.pdf>)

Every dollar invested in benefits attainment support (direct assistance for processing SSI/SSDI applications) generates hundreds of thousands of dollars in direct cash assistance is awarded to households most at risk of homelessness. Within the same fiscal year, 70% of the cost of this intervention is paid back in direct cash payments to households. Over the 12 year life of CCC's BEST (Benefits and Entitlements Specialist Team) program it has obtained SSI/SSDI payments in the amount of \$76,102,584, that is federal funding directly into the local economies of Oregon.

(<https://www.centralcityconcern.org/blog/recent-news/post/best-program-10-years/>)

OREGON COUNCIL FOR DEVELOPMENTAL DISABILITIES



Non-Profit organizations/health care providers are an integral part of the social safety net, providing care to diverse communities.

Our members have stepped up to meet the needs of our communities despite a challenging and ever evolving landscape.

The Non-Profit
Coalition Represents
the System of Care

Reflecting on lessons learned, we know that cuts to essential programs often results in cost-shifting and negative outcomes.

With this pandemic, wraparound services are more crucial than ever to protect Oregonians and contribute to a faster and more equitable economic recovery.

What's The Bottom Line?

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graph LR; A((Don't repeat the mistakes of '08, because, this time, we don't have to repeat those mistakes)) --> B((Oregon should strategically manage its budget to avoid "cuts" which will actually lead to higher short and long-term costs)); B --> C((This means investing existing reserves NEAR TERM to prevent a collapse of the system of care));
```

Don't repeat the mistakes of '08, because, this time, we don't have to repeat those mistakes

Oregon should strategically manage its budget to avoid “cuts” which will actually lead to higher short and long-term costs

This means investing existing reserves **NEAR TERM** to prevent a collapse of the system of care

Recommendations for *June* Legislative Action

Recommendation 1

Prevent System Collapse:

Invest 30% of State Rainy-Day Funds **Now** in human services programs

Invest 30% of Federal Stimulus Funds **Now** in human services programs

Recommendation 2

Ensure That Staff and Clients Feel Safe:

Prioritize PPE/supplies for all non-profits and safety net providers serving vulnerable populations

Invest in the workforce.

Recommendation 3

Jump start the recovery:

Take action to empower local workforce boards and communities to use federal funds for employment training focused on at-risk, communities of color and youth populations.



Act
Counterintuitively

Be *Innovative*

INVEST
to *Save* Future Costs
AND Lives

Doug Riggs/ *Alliance4Kids*, Kim Scott/ *Trillium Youth and Family Services*,
An Do/ *Planned Parenthood Associates*, Mercedes Elizalde/ *Central City
Concern*, Leslie Sutton/ *Oregon Council for Developmental Disabilities*

