



# Mid-Columbia Medical Center

— a place of healing —

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January 28, 2019

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

**Re: Senate Bill 141 – Caring Contacts and Access Assessment**

Chair Senator Laurie Monnes Anderson and Members of the Senate Committee on Health Care:

My name is Patrick Grimsley and I am the Emergency Department Medical Director at Mid-Columbia Medical Center in The Dalles. Mid-Columbia Medical Center is a not-for-profit independent hospital that provides comprehensive medical care to all individuals in the Columbia River Gorge. Mid-Columbia Medical Center supports SB 141 which would provide transitional funding to assist hospitals with the costs associated with the development or contracting of a caring contacts program to support patients during this time after release from hospitals.

As background, HB 3090 from 2017 rulemaking requires all hospital emergency departments to provide or contract to provide caring contacts to all patients with behavioral health crises and those who are suicidal or have suicidal ideations within 48 hours.

HB 3019 from 2017 rulemaking requires insurance coverage for case management and care coordination. Hospitals will work to establish contracts with payers that adequately reimburse for this added follow-up but this will not happen overnight. OAHHS on behalf of its hospitals are requesting transitional funding for hospitals.

We would expect approximately 150 patients per year to require a caring contract within 48 hours.

A second requirement within HB 3090 and the rulemaking is a requirement that hospitals attempt to schedule a follow-up appointment within seven days to all patients with behavioral health crises. The issue that hospitals encounter is that there is not enough available appointments at a timely manner that can provide the level of care needed and accept the patients' reimbursement.

There are not sufficient psychiatric providers or psychiatric resource centers in the Columbia River Gorge to support this service and this is the direct result of inadequate funding to support this vulnerable patient population.

We support OHA to study the existing barriers to follow-up appointments and provide recommendations to the legislature to ensure we continue to understand the needs in our community.

Respectfully,

Patrick Grimsley, D.O.  
Emergency Department Medical Director, Mid-Columbia Medical Center