



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 Monnes Anderson and members of the Senate Committee on Health Care:

My name is George Aikin, RN, and I am the nurse manager of the psychiatric medicine center at Salem Health. Salem Health is a community health system, with a 454 bed acute care hospital and level II Trauma Center located in Salem and a small rural hospital located in Dallas, Oregon, and primary care and specialty clinics. Salem Health primarily serves Marion and Polk counties.

Salem Health supports SB 141 because it assists hospitals through transitional funding with the costs of developing or contracting a caring contacts program. It also asks OHA to study the barriers to connecting patients with follow-up appointments.

Salem Health has an average of 82 patients per week visiting our emergency department for behavioral health issues. HB 3090 from 2017 required hospitals to connect these patients with a caring contact within 48-hours after discharge. Hospitals are also responsible for scheduling a follow-up appointment within seven days of the encounter with the patient. This results in increased costs and staff time. While HB 3091 required insurance coverage to help cover costs for some of this work, contracts with payers for this care takes time to develop.

When trying to schedule follow-up appointments in our community, we have found there are often not enough appointments available in a timely manner that provide the level of care needed and also accept the patients' reimbursement. The hard reality is that wait lists for outpatient mental health care far outpaces what providers are able to treat. One local provider has approximately 300 referrals per month but less than 100 of those patients get an appointment within one month. Typical wait times are between two and three months. Patients often return to the emergency department for care because they have nowhere else to go.

We support transitional funding to help hospitals provide appropriate follow-up care while insurance coverage is established. We also believe the barriers to follow-up mental health care should be studied by OHA to better understand and address the need.

Respectfully,

George J. Aikin, BSN, RN
Nurse manager
Psychiatric medicine center
Salem Health