



**NAMI Oregon Supports HB 2691 if Amended**

From Chris Bouneff, Executive Director, NAMI Oregon

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House Committee on Health Care

NAMI Oregon wishes to express its qualified support for House Bill 2691, which would permanently establish the Oregon Psychiatric Access Line (OPAL) operated by Oregon Health and Science University.

As we understand it, OPAL is recommending that language in Section 1, Paragraph 3 be changed from “shall abide” to “shall be informed.” This change would preserve OPAL’s ability to recommend medications and psychotherapies that would be most effective given an individual’s specific circumstances. With such an amendment, NAMI would give its unqualified support for HB 2691.

NAMI believes a permanent and fully funded access line such as OPAL is vital if Oregon is to improve the delivery of mental health care and successfully confront the shortage of psychiatrists, psychiatric nurse practitioners, and others with specific expertise in prescribing medications and psychotherapies.

In many communities, the wait to see a qualified clinician stretches for months. And in other communities, access to a clinician is nonexistent. In either circumstance, individuals and families affected by mental illness are left to languish without help, increasing the odds that their illness worsens and becomes more complex and expensive to treat.

Because of this shortage, the burden for timely responses to mental healthcare needs falls increasingly on primary care physicians. Some are willing to carry this burden, albeit uneasily. Others decline to address our needs, citing their inexperience. A permanent and fully funded OPAL gives front-line physicians the access to the expertise they need to best serve their patients with confidence.

NAMI points out that HB 2691 is excellent companion legislation to HB 2035 and SB 138, which make permanent the Mental Health Clinical Advisory Group (MHCAG). This advisory group was created via legislation in 2017 (HB 2300) to devise treatment algorithms for mental health conditions in an effort to systematically improve the delivery of mental healthcare across Oregon.

In 2018, MHCAG informally partnered with OPAL in the creation of a treatment guide for schizophrenia that provides treatment pathways that combine therapies, medications, and support to optimize the treatment response for an individual living with schizophrenia. Under legislation making the MHCAG a permanent body, the MHCAG and OPAL will have formal ties, allowing the two entities to partner on additional treatment guides for bipolar disorder, depression, and other common mental health disorders.

For more information on MHCAG and to view its work, please see:

<https://www.oregon.gov/oha/HSD/OHP/Pages/PT-MHCAG.aspx>.

Thank you for this opportunity to provide testimony.