

February 3, 2020

Dear Chair Roblan, Vice-Chair Boles and Members of the Senate Committee on Mental Health,

OPCA is a non-profit organization, with a mission to support Oregon's 32 community health centers, also known as federally qualified health centers, in leading the transformation of primary care to achieve health equity for all. Community health centers deliver integrated primary, dental and behavioral health care services, to over 433,000 Oregonians annually. Community health centers are providers within the CCO networks, providing care to Oregon's underserved populations, including one in four Oregon Health Plan members.

We are writing to urge your support of SB 1553 which seeks to remove barriers that currently limit the behavioral health workforce and hinder access to treatment.

Many of Oregon's community health centers serve patients who have been dually-diagnosed with both addiction and mental illness or "co-occurring disorders". Overlap frequently exists between an individual's addiction and mental health challenges and thus, treatment can and should be provided concurrently. Unfortunately, in Oregon's fractured behavioral health care system, providers and care teams see firsthand how barriers to care can lead to poor health outcomes and increased cost to the health care system. Individuals suffering from co-occurring disorders who don't receive holistic behavioral health care are less likely to keep medical appointments, take medication as prescribed, and maintain jobs and/or stable housing – all leading to downstream health and social complications.

SB 1553 takes a critical first step in tackling the behavioral health crisis we see in our communities, in our justice system, in our education system, and in our efforts to address the housing crisis. It does this by asking OHA to assess the barriers that exist to treatment for people with co-occurring disorders.

The bill is simple. It directs OHA to identify and detail barriers to co-occurring treatment, make recommendations for reducing them, and report those recommendations to the legislature in the fall of 2020. OHA is directed to return with a list of rulemaking or legislative solutions that would remove these barriers as well as a cost estimate for a reimbursement rate that would reflect the increased complexity of patients with co-occurring disorders.

While we recognize choices about strategic investment in behavioral health will be made in the 2021 session, we need to do the work today to prepare our decision makers for that discussion.

SB 1553 is a critical first step in improving access to behavioral health care for all Oregonians. We urge your support of this bill as an opportunity to be part of an upstream solution that both improves health outcomes and our communities.

Thank you,

Danielle Sobel, MPH, Policy Director Marty Carty, Policy Senior Manager