



ASSOCIATION OF OREGON COMMUNITY MENTAL HEALTH PROGRAMS

Testimony on Ways & Means Tri-Chairs' Budget Reduction Plan

August 10, 2020

Dear Co-Chairs Courtney and Kotek and Members of the Joint Committee on the Second Special Session of 2020:

On behalf of the Association or Oregon Counties Health and Human Services Steering Committee, representing Local Mental Health Authorities, and the Association of Community Mental Health Programs (AOCMHP), representing the 32 Community Mental Health Programs (CMHPs) across the state designated to operate and manage the behavioral health system in their communities, I would like to express our concern with the disproportionate divestment in behavioral health as listed in the Tri-Chairs' Budget Reduction Plan. We realize you have difficult decisions to make, and the reduction recommendations by the state agencies were meant to cause the least harm, however, the sweeping of funding intended for community behavioral health comes at a time when the demand for behavioral health services and supports has never been greater.

CMHPs have responsibility for a wide array of services and supports, from population-based prevention initiatives and mental health promotion to acute and crisis care. CMHPs assure a safety net for their communities, regardless of an individual's insurance status. Safety net functions include: 24/7 crisis response; cross-system coordination with Public Safety, Criminal Justice, Education, Child Welfare, and other systems; intensive services for people with complex and chronic mental health and substance use disorders; discharge planning and transitioning people from institutional care and incarceration to community-based care; pre-commitment and abuse investigations; and supported housing, employment and education.

State investment is critical to sustain these essential services and to prevent gaps in levels of care in the community mental health system. As you well know, the budget asks to fund more Aid & Assist community restoration, provide more safety net services and to continue our certified community behavioral health clinics (CCBHCs) were not passed when the short session came to an abrupt end. Immediately afterwards, we entered the new reality of COVID and the provision of nimble, low barrier services for our communities is our highest priority. I have observed dedicated, compassionate people, who are first responders and essential health care workers, buying or making their own PPE, and showing up in person to care for community members who are in crisis or will decompensate if they don't have human connection.

In order to stem the tide of this unprecedented pandemic, we must take seriously the emerging behavioral health tsunami by valuing our behavioral health workforce and investing in the community behavioral health system, not by reducing the budgets of an already underfunded system. Investments in the behavioral health system yield significant savings and improved outcomes in Education, Public Safety and Medical systems.

Please support your community behavioral health system.

Sincerely,

Cherryl L. Ramirez
Executive Director, AOCMHP

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