My name is Christopher P Tower and I am a Psychiatric Nurse Practitioner licensed in the State of Oregon and practicing out of a private clinic in Eugene Oregon, the Benson Health Clinic. I am currently living in Florida where I've lived for the past 8 months. I do telehealth with my clients in Oregon via telephone and zoom. Previously I lived in Eugene Oregon for 7 years and prior to the covid pandemic I practiced exclusively seeing my patients at the Benson Health Clinic office in Eugene Oregon.

I wanted to wholeheartedly endorse the Universal Health Plan Proposal at this time. Currently, I have many patients from those on various forms of the Oregon Health Plan from the PacificSource Community Health Plan in Lane County to patients who have several different forms of OHP both in Lane County and in other counties in Oregon, as well as those who are privately insured. Relevant to the issues of this proposal are the needs of my clients which I hear on a daily basis and often many times a day, for an integrated mental and physical health care plan that allows them to receive the comprehensive care that they need from an affordable, integrated, comprehensive healthcare system. Too often patients are struggling to find a therapist or provider in both mental and physical health who can help them with the additional therapy or medical services that they need on a regular basis. They and their family members are often struggling to find providers who accept their various plans. This is true of those currently with OHP as well as those with private health insurance. For those with private plans provided by their employers, some of the plans reimburse so poorly for mental health visits that the reimbursements barely cover the clinic's expenses. At our clinic, we no longer accept some of these plans because of this and patients are left with the choice of paying out of pocket or attempting to find someone who accepts their plan. Usually, in these cases there are no providers who can afford to accept their private insurance plan.

I wholeheartedly and enthusiastically back the proposal's goal of increasing mental health services and programs. At this time, in much of Oregon, there is no significant mental health support system apart from the thin network of providers in various clinics that are scattered throughout Oregon. I believe that in much of Oregon, there is little or no 24 hour psychiatric emergency care available. Clinics are not capable of providing emergency or 24 hour care leaving an enormous gap in the continuity of care in mental health. Even in larger cities outside the Portland area, the few facilities that can provide 24 hour psychiatric care, limit their care only to individuals who actively and throughout the whole admission process continue to threaten self harm. Those who are suffering any other form of mental health crisis have nowhere to go. In most of Oregon, there is little or no emergency mental health care available at all apart from what the local police or county sheriffs might be able to provide. Jails and prisons too often become the repository for the mentally ill in crisis and this of course tends to make the situation worse. Part of our current homeless crisis is related to the trauma experienced by the mentally ill while incarcerated. They leave prisons and jails broken and with no support at all. Only the most wealthy can afford the small network of private treatment that is available for private inpatient care.

I think the most important aspect of the plan is that it is a Universal Health Plan Proposal. The irony of health care in Oregon is that OHP provides a pretty good plan for those who qualify for it for certain levels of care available. However for those who do not qualify for it and have to rely on some form of private plan whether paid for by their employer or paid for out of pocket by the individual, more and more of those plans reimburse poorly, have limited coverage, and leave people struggling with debt or having to do without medications and or services that are not covered adequately to be affordable. In many cases when these people go for treatment, they find that their plans do not cover major portions of the cost or they do not cover their needs at all. Better forms of treatment, newer types of medications or procedures that might be more effective or cause fewer side effects are inadequately covered or not covered at all. This causes a significant increase in anxiety and stress for many people

and their family's. fThis can be true for both the working poor and the seemingly comparatively well off.

I wholeheartedly urge The Task Force on Universal Health Care to adopt this Universal Health Plan Proposal as a guideline for moving forward on this critical issue. I believe it will be a significant step forward in helping every citizen in Oregon from the homeless to the most wealthy Oregonians.

Christopher P Tower

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