

March 23, 2021

Oregon State Legislature  
Senate Committee on Human Services, Mental Health and Recovery  
900 Court Street NE  
Salem, OR 97301

**Re: Senate Bill 686 – Tele Psychiatric Care**

Chair Gelser, Vice Chair Anderson, and members of the Senate Committee on Human Services, Mental Health and Recovery:

On behalf of Oregon's community hospitals and the patients they serve, the Oregon Association of Hospitals and Health Systems (OAHS) appreciates this chance to provide comments on Senate Bill 686 which would prohibit hospital's from providing psychiatric services via telehealth. OAHS is opposed to this legislation because it further creates limitations in regulations for care delivery that would ultimately hamper a provider's ability to problem solve and provide the best care solution to our patients in care.

To be clear bill as written would apply to all services under a hospital license including the emergency department, inpatient and outpatient services. Those departments would need the allowance for telepsychiatry in their normal operations of care. Currently hospitals have utilized telepsychiatry to patient interactions as a result of COVID to limit patient interaction. SB 686 would prohibit hospitals (emergency department, inpatient) timely care of a patient that may be boarding in the hospital awaiting placement at a more appropriate facility. SB 686 may hamper the use of Oregon's Psychiatric Access Line, which is a state funded psychiatric phone consultation for primary care providers in Oregon.

While the majority of our hospital inpatient psychiatric units do not use telepsychiatry for regular patient care and interactions there is the need for that flexibility in a number of situations. Telepsychiatry may be helpful and preferred to access a culturally specific provider or a provider with language capacity who could only be accessed via telehealth. Some hospital emergency departments, hospital inpatient units may need to access telepsychiatry in times of crisis support or consultation in evenings when providers are not on site at the facility. Also, many of our smaller or rural hospitals utilize telepsychiatry in times of shortages or staff turnover.

OAHS does not support limiting tele health options in legislation.

Sincerely,



Andi Easton