

February 25, 2021

Testimony in support of HB 3123

Madame Chair Sanchez, Vice Chairs Moore-Green and Nosse, members of the committee:

My name is Mary Monnat, CEO of LifeWorks NW; a non-profit mental health, addiction and prevention services organization in the metro area serving over 30,000 consumers annually. My testimony is in support of House Bill 3123 that seeks to continue Oregon's participation in the innovative Certified Community Behavioral Health Center's (CCBHC) federal pilot, initiated in 2017, that established 12 such clinics across the state.

The CCBHC model is by far the most comprehensive and promising approach to providing more accessible, effective, coordinated behavioral health and primary care services I have seen since my 40 years in the field. Oregon was one of only 8 states chosen for the initial pilot that has now expanded to several more states. It is essential that we continue this ground breaking, lifesaving model in Oregon. Behavioral health services, already in high demand, are projected to be needed even more as we continue to battle with Covid 19 and its projected aftermath. CCBHC offers us all real hope.

The promise of the CCBHC model is the care delivered targets the most vulnerable and hard to reach with the most complex needs, including many Black, indigenous and people of color across the state. The model requires a comprehensive range of both mental health and substance use disorder services for all ages with essential health screening and monitoring for each individual. For LifeWorks NW, an early adopter of integrated care addressing both a person's behavioral and physical health, the CCBHC model, and the enhanced federal match it brings, has allowed us to build out the services needed to more effectively care for our most vulnerable consumers. We are seeing real results.

LifeWorks NW operates four CCBHC clinics in Washington and Multnomah counties. With the pilot we have strengthened our workforce by increasing wages and adding key staff including peer wellness specialists, health care coordinators, nurses, primary care providers and additional clinicians to better address the full range of holistic health needs. We also moved to a team based model of care allowing us to better engage and treat consumers across the wide array of services offered. We quickly retooled our intake process to allow for open access to care with same day appointments. No more waiting and no wrong door. This shift alone improved access by 19%. While initially hampered by the pandemic, when most of our services moved to telehealth, rapid access to care is more essential now than ever.

With CCBHC, we also formed a rapid response team to partner with our local emergency rooms and hospitals to help prevent unnecessary hospitalizations. During the pilot, we saw steady improvement in reducing more costly care and exceeded our targeted benchmark for reducing emergency room use by our seriously mentally ill consumers. Similarly, we partnered with our local Medicaid health plan to address those with both serious mental illness and other chronic health conditions such as diabetes. Our behavioral health providers have become whole health promotors and understand that without robust care coordination and support our consumers will continue to die on average 25 years early due to untreated health conditions. This is unacceptable and the CCBHC model is helping change this dire trajectory. Another promising result is during the initial two year pilot, we were able to demonstrate a 29% reduction in completed suicides.



# LIFEWORKSNW

In closing, I strongly urge you to support HB 3123 and continue this life saving investment in the health of our most vulnerable community members. This bill helps boost the health and well-being of our entire community at a time it is most direly needed.

Thank you.



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