

February 24, 2021

To: The Senate Committee on Healthcare From: Oregon Health Equity Alliance

Re: Support of SB 584

Chair Patterson, Vice Chair Knopp and Members of the Senate Committee on Healthcare,

My name is Esther Kim and I am the Public Health and Coalitions Strategist at the Oregon Health Equity Alliance (OHEA). OHEA is a people of color-led collaborative, organized to center and uplift the wisdom of our communities of color through racial justice informed health equity policies and practices as part of the movement to dismantle white supremacy and shift the imbalance of power. OHEA is one of four regional health equity coalitions and two capacity building sites; we cover the tri county region, including Washington, Multnomah and Clackamas Counties.

Health equity is rooted in dismantling and shifting oppressive structural and systemic practices that affect individuals and communities' ability to thrive. Health equity is achieved when every person has the opportunity, resources, power and autonomy to attain their full health potential. In order to achieve health equity, systems that sustain beliefs and behaviors rooted in the oppression of our communities based on race, class, gender, sexual orientation, age, ability, religion, immigration status, and other characteristics, must be dismantled.

To this end, we are strong supporters of SB 584, which advocates for medical assistance to be provided to employed individuals with disabilities without regard to individuals' income or resources. Accessibility resources are already inadequate and difficult to obtain for people without a physician's disability diagnosis. To then designate state mandated poverty and scarcity as an eligibility requirement - an income to less than 250% of the Federal Poverty Level - for basic disability benefits punishes disabled people for being disabled, erases the extraordinary medical expenses of being disabled, cuts off opportunities for economic security, and calls into question the intention and impact of offering benefits when quality life is clearly not prioritized or centered. This in turn strips people of their humanity and limits their agency in leading lives of autonomy.

Disability and poverty sustain not only material hardships but also emotional and physical as the stress of instability cycles endlessly. Rather than gatekeeping resources for those in our communities most impacted by ableism and poverty as a means of measuring "worthiness" in having basic needs met, we urge the committee to sow seeds of security and care for disabled communities by removing such punitive restrictions.

At OHEA we look to the wisdom and expertise of our communities of color and those who live at the intersections of multiple identities often disregarded by current policies and practices. Communities are

coming together across Oregon in support of this bill, and we are in support of more infrastructure for disability communitie. Access to necessary state support helps alleviate the pervasive ableism of our societies until they are undone.

In Health,

Esther Kim Public Health and Coalitions Strategist Oregon Health Equity Alliance (OHEA)