

# HB 4045A: HOSPITAL-BASED VIOLENCE INTERVENTION PROGRAMS

## A PROVEN STRATEGY FOR COMMUNITY VIOLENCE PREVENTION

House Bill 4045A invests in evidence-based practices to interrupt the cycle of violent injury and prevent violent retaliation. HB 4045A will provide consistent funding to programs that work, bring interventions into the system of care, and professionalize community-based specialists.

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### THE CYCLE

- Like much of the country, Oregon has seen a rise in community violence since the start of the pandemic.
- 40% of victims of community violence will experience reinjury, for 20%, a second injury will prove fatal.
- Survivors of assault, stabbings, and community gun violence are more likely to carry a weapon to establish safety and, without a plan, will return to an environment where there is pressure to retaliate.
- Youth exposed to gun violence are twice as likely to perpetrate violence against others.

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### THE INTERVENTION

Hospital-based violence prevention (HVIP) programs are successful in reducing community violence because they treat the problems that create the instability that normalizes community violence. These programs rely on a referral and screening process at the point of admission for injury.

HVIPs leverage community members with lived experience who are on-call 24/7. Community members intervene during the “golden moment” immediately after a stabbing or gunshot wound. Evidence shows individuals are most likely to be receptive to behavior change during the few hours immediately after injury.

Community specialists (violence prevention providers) will spend six to eighteen months with an individual, providing referrals, resources, and concrete solutions to escape the chronic cycle of community violence.

HB 4045A asks OHA to develop a certification process for violence prevention providers and seek Medicaid reimbursement for this critical work. HB 4045A creates a path to expand the model statewide to ensure this important resource is available to all communities in need.

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### THE DATA

- 2 of 3 injured by committee violence are uninsured or Medicaid eligible.
- Of violent assaults in Oregon, more than half were billed to Medicaid at \$150k-\$250k for hospital care only.
- Estimates show the use of violence prevention providers can reduce violent reinjury by 50%.
- An analysis found the HVIP model of care yields health care delivery savings of \$3.42 for every \$1.00 invested in intervention and cost avoidance of \$5 for every \$1.00 invested by reducing interactions with the criminal justice system.

