

Alcohol and Drug Policy Commission

201 High St SE c/o OTIS Suite 500 Salem, OR 97301 503-757-0989

To: House Revenue Committee From: Jill Gray, Acting Director, Alcohol and Drug Policy Commission Date: February 9, 2023 RE: **Testimony on HB 2089**

Chair Nathanson and members of the committee:

Thank you for this opportunity to offer comments about HB 2089. The Alcohol and Drug Policy Commission (ADPC) is not taking a position on HB 2089, but instead offering these comments for Legislators' information.

In early 2020, ADPC submitted a statewide strategic plan for improving substance use services to the Governor and the Legislature. The plan was approved by both, and it is now Oregon's Strategic Plan for Substance Use Services. One of the ultimate goals of this plan is to reduce substance use disorders.

Oregon has some of the highest substance use rates in the country; we are:

- First in the nation for methamphetamine use,
- First in the nation for prescription pain reliever misuse, and
- Second in the nation for illicit drug use.

These are distressing statistics, but the good news is there are actions we can take to help Oregonians. Many of these actions are outlined in the Strategic Plan and include investing in prevention programs and treatment, recovery, and harm reduction services.

Committee members have heard from other people and organizations about how HB 2089 will reduce the amount of funds going to M110 grantees—all of whom provide treatment, recovery, or harm reduction services—which is accurate. There will be fewer funds available to grantees for this important work if HB 2089 were to pass. But an additional point that has not been raised so far is, if HB 2089 were to pass, it will eliminate an allocation of funds that goes to the Oregon Health Authority to do primary prevention work. Primary prevention focuses on reducing the likelihood of a substance use condition developing. M110 does not allow funds to be distributed for primary prevention work, so if HB 2089 passes, it means Oregon is choosing to completely eliminate an investment it currently makes in primary prevention.

Recently, ADPC worked with Oregon Health and Sciences University on a substance use services gap analysis. The gap analysis found that Oregon needs to prioritize prevention services and dramatically increase the prevention specialist workforce. In other words, the gap analysis tells us that Oregon needs to invest <u>more</u> resources into primary prevention. HB 2089 does not support these actions and is in direct conflict with Oregon's Strategic Plan and the findings of the gap analysis.

Again, thank you for the opportunity to offer these comments, and I am happy to answer any questions Committee members may have.