



March 8, 2023

To: House Committee on Behavioral Health and Health Care

From: Janice Garceau, Director, Deschutes County Health Services

Chair Nosse, Co-Chairs and Members of the Committee,

I am testifying today on behalf of Deschutes County Health Services, the community mental health provider to over 5,000 rural Oregonians, and the Association of Oregon Community Mental Health Programs, to ask for your support for HB 2463.

To anchor my testimony today, I want to share an example. Imagine you're a talented clinician new to community mental health. You're meeting Eric in the field. He's a young man experiencing a first episode of psychosis. He's staying with a friend in an illegally parked RV with no heat. He needs food, reliable shelter, medical care for an infection and psychiatric services. He's deeply suspicious of strangers and it's taken you weeks to build trust. You're finally sitting down with Eric and in order to make him eligible for services you must somehow navigate a complex, multipage intake packet that requires multiple signatures from Eric, all without using your laptop because Eric is acutely triggered by technology. When you go back to the office you're not done. You now have to enter your notes in an electronic medical record designed to record clinical information within an intricate set of parameters that ensure compliance and payment. You must also complete data for state tracking, enter a separate database to make basic needs referrals, and complete entries in a third database that tracks program fidelity requirements.

This is a real scenario. We ask our staff to do this day after day and then wonder why even the most committed flee to the private system where they can earn more, complete a fraction of the documentation and serve people with lower acuity. And we ask the people we serve to put their needs on hold as we complete multiple administrative steps to enroll them in care.

We have unintentionally allowed the creation of a system that is dehumanizing to the people we serve and to those who serve them. In a time of growing behavioral health need, we ask providers, whose most critical talent is to build connection with someone who's suffering, to do this work creatively and effectively against a backdrop of exponentially growing micro-regulation and scrutiny, all in the name of accountability.

The result is that the most tedious and onerous aspects of accountability land on the backs of the people we most need to lift up this work. Or as one of my clinicians said better than I can, "...for the clinicians being graded more heavily on massive paperwork, production being measured by paperwork does not represent the quality of care...and is a morale leak and recipe for burnout."

Historic investments in behavioral health are in jeopardy because of this phenomenon.

HB 2463 is a way to right the ship. It demands accountability at the top. The bill ensures OHA has the direction and resources needed to staff and take action on the recommendations of the workgroups. The statutory workgroup will update language, and clarify roles and responsibilities of BH system partners. The regulatory workgroup will identify duplication and inconsistencies between Medicaid and non-Medicaid requirements, and recommend changes to maximize access to BH services and to increase BH and physical health integration. Additional work will include exploring OAR changes to reduce administrative burden and evaluating licensing, certification and audit procedures to eliminate unnecessary duplication and interpret OARs consistently across OHA divisions. Finally, this work will be tracked and recommended legislative changes shared with the interim committee by September 15 of even-numbered years.

In summary, HB 2463 provides a framework and resources to ensure that the entity with the power to design and drive much of this work commits to a set of principles and steps to ensure that when programs roll out, the impact of processes on our workforce is taken into account and that micro-regulation and duplication are proactively mitigated and managed.

Thank you,



Janice Garceau, LCSW, Director
Deschutes County Health Services