



# Oregon Pediatric Society

A Chapter of the American Academy of Pediatrics. Incorporated in Oregon

DATE: March 13, 2023

TO: Committee Co-Chairs Senator Campos and Representative Valderrama, and Members of the Joint Committee on Ways and Means, Subcommittee on Human Services

FROM: Julie Scholz, Executive Director of the Oregon Pediatric Society  
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SUBJECT: SB 5525 – Supporting the Needs of Children with Health Complexities

The Oregon Pediatric Society (OPS) is the state chapter of the American Academy of Pediatrics. Our membership of pediatricians, pediatric nurse practitioners, medical students, and other health practitioners is committed to improving and protecting the health and well-being of **all** children in Oregon, as well as those who care for them. To further that goal, OPS strongly endorses investing in the continuing collection of child health complexity data by including POP 442, not currently in the Oregon Health Authority budget. We also support the proposed funding (POP 414) related to the historic launch of Early Periodic Screening Detection & Treatment in Oregon.

When we talk about health complexity, who does that include? It might surprise you that approximately one in four publicly insured children and youth in Oregon have special medical needs and have experienced social challenges such as disability, abuse or violence, foster care, the death or incarceration of a parent, and poverty. When we layer factors such as race and ethnicity, language barriers, gender identity, sexual orientation, class and education with medical complexity, the disadvantages these children experience will continue to grow and persist without interventions and support, negatively impacting them and their families throughout adulthood, and possibly resulting in early death.

Since 2018, Oregon has been an innovative U.S. leader with its first-in-the-nation program on collecting, maintaining, and disseminating data on the needs of medically complex children. This annual reporting is a crucial foundation in building the systems of care for infants, children, and adolescents with health complexities, and improving the lives of these children now. The model supports more in-depth research, and creates an intentional focus on identifying the disparities in quality and services available. This aligns with OHA's health equity goals.



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OHA cannot commit to continuing this systems and public health work at the state, county, and Coordinated Care Organizations levels past 2023 unless the agency's Child Health Policy team is funded. Unfortunately, POP 442 is not currently in the proposed agency budget. To serve these children requires specialized knowledge, skills, collaboration and multi-organization collaborations, analysis, and actions to implement what is learned. As part of SB 5525, we need the legislature to designate \$1.5 million in the Oregon Health Authority budget for the agency's child health team. What is measured, and how it is measured, reflects our health and equity priorities and drives systems and population health improvements.

OPS is thrilled that with the 2023 Medicaid Waiver changes, Oregon will offer continuous eligibility for children through age five, and two years of continuous Oregon Health Plan coverage for anyone age six or older. This should increase the number of children receiving timely health care.

Beginning in 2023, Oregon is joining every other U.S. state to offer full Early and Periodic Screening, Diagnostic, and Treatment coverage. Under EPSDT, OHA and the CCOs must cover services below the funding line on the Prioritized List of Health Services for OHP members under age 21 when medically necessary and appropriate. Funding a one million-dollar Medicaid investment (POP 414) to improve the implementation of the EPSDT program will make it easier for all children on the Oregon Health Plan—about 40% of the kids in our state now—to receive benefits. We will save longer-term problems if we get the program off to a stronger start, streamline the program's clinical operations, and ensure that Oregon's most vulnerable children actually receive the physical, behavioral, and oral health care services they need.

The POP 414 and 442 investments are relatively small in the scope of the OHA budget, but large in the impact they will have for ensuring brighter futures for Oregon children, families and communities. The Oregon Pediatric Society strongly urges you to fund these budget items. Thank you for your consideration.