

UNIVERSITY OF MINNESOTA

Twin Cities Campus

*Division of General Internal Medicine
Department of Medicine*

*Mayo Memorial Building
MMC 741
420 Delaware Street SE
Minneapolis, MN 55455*

February 6, 2024
In opposition to HB 4002

Dear Chairs Lieber and Kropf,

My name is Ryan Kelly, and I am an Addiction Medicine physician. Many of my patients are housing insecure, have faced many types of trauma, face barriers due to prior experience with the justice system, and do not have the luxury to focus on their health. Many of these patients struggle with medical conditions like substance use disorders. Every day, I see the harms that criminalizing medical conditions like substance use disorders have on these individuals, their families, and their communities. In 2020, Oregon transitioned from a punishment based system to a public health approach, via Measure 110. As an Addiction Medicine physician in Minnesota, I have looked to Oregon as a model that could be used to make change in Minnesota. Measure 110 is a good start, and has led to a nearly 300% increase in new services funded by Measure 110. However, more support is needed, to expand capacity to meet addiction treatment services.

Unfortunately, the Oregon legislature is threatening to turn back the clock, with HB 4002. Addiction is not a crime, it is a healthcare issue. HB4002 is an inadequate and harmful approach that will not solve the addiction crisis, and will instead waste tax payer dollars. It will result in more people going to jail, more people being displaced, more barriers to resources, more families being disrupted, and more people dying from overdoses.

The legislature should focus on real solutions that will help our communities instead of returning to the failed policies of the past that have already been shown to not work, and to lead to more harms. For example, I support the behavioral health provisions of HB 4002, **but not the turn to a class C misdemeanor for possession**. If local access to treatment services was expanded as outlined in the bill, public use, addiction, and overdose deaths would be reduced in our community. To be truly successful, the legislature should also increase withdrawal management, detox, recovery and sober housing, and other services that are causing waitlists across the state for care and causing our addiction and overdose crisis.

In conclusion, HB 4002 is an inadequate and harmful approach that will not solve our addiction crisis, and I urge you to not support this bill.

Ryan Kelly, MD



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