

## OREGON HOUSE OF REPRESENTATIVES

## Representative Lucetta Elmer House District 24

February 13, 2024

House Committee on Behavioral Health and Health Care

Chair Nosse, Vice Chairs Goodwin and Nelson and Members of the Committee:

I am writing you to offer support as co-chief sponsor of House Bill 4139, which is a certificate of need exemption bill. This legislation was created through much deliberation following conversation with stakeholders, insight from health care providers, and shared stories from families and individuals directly impacted by Oregon's current health care policy.

By definition, a certificate of need—or CON—is a government-mandated permission slip required to build or expand a healthcare facility or to add a new service. In Oregon, CONs are required to add beds to hospitals, build a nursing home, acquire radiation therapy equipment, or offer inpatient psychiatric services, among other things. To further explain, the following is context for the certificate of need conversation with facts that I found particularly compelling:

- The current certificate of need process **biases existing facilities**. The application states: "Expansion of existing rehabilitation units shall be given priority over the creation of new rehabilitation units for comparable services, unless it can be demonstrated that the applicant is offering the least costly services."
- The original intent of CON laws was to prevent duplicative services, which would ensure efficiency and cost-savings. These laws do not control the quality of care provided to patients. Instead, it results in decreased access to care. Research shows that:
  - O Patients in states with CON laws have access to fewer hospitals, psychiatric care facilities, and rehab facilities.
  - These same **patients must travel longer distances for care** and are more likely to leave their state for care.
- Hospitals are best equipped to care for patients for 7-10 days. However, hospital systems across Oregon have been burdened with caring for 58% of the state's civilly committed patients for longer than that window. Due to the gross lack of inpatient psychiatric beds, civilly committed patients are being housed too long in inappropriate settings and jeopardizing access to care for other acutely ill individuals.

I acknowledge the complexity of the issue at hand. I have been told countless times that a "bed here is not equal to a bed there." While this is true, the research is clear that Oregon lacks beds everywhere, in both the inpatient and outpatient settings. Workforce is an ongoing issue that Oregon needs to address, but that is no excuse to give the other factors contributing to the current

bed shortage a hall pass. **This an emergency**. Beds cannot be built overnight. We must work together to incentivize facilities to invest in Oregon, rather than creating more obstacles.

Please seriously consider supporting this legislation and help remove barriers to care for Oregonians.

Sincerely,

Lucetta Elmer

State Representative

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District 24