

Dear Chair Lieber, Chair Sanchez and Members of the Committee,

I'm a bit of a fact collector and this one of my favorite trivia questions: do you know who the most trusted profession is in the United States? I'd let you guess, but for the sake of time I'll tell you the answer. There are actually two: Nurses and Firemen. As a nurse, that makes me really proud. It's also a responsibility I've never taken lightly. As nurses we have the incredible privilege of people allowing us into some of the most vulnerable times in their lives, often within seconds of meeting one another.

I'm the clinical supervisor for our Babies First and Cacoon home visiting team here in Union County, that privilege goes one step further because families (including pregnant women, postpartum women with babies 0-5 years old and kids with special health care needs ages 0-21), allow us into their homes. Our team of 5 provides just shy of 2000 visits a year- we literally clock hundreds of miles driving from North Powder to Elgin and even, Sammyville. We help with everything from newborn evaluations, weight checks, breastfeeding support, attending evaluations for Early Intervention, Headstart and even Well Child exams. Besides accessing services, we also complete developmental screenings and analyze the need for referrals as well as provide case management for clients who need to see specialists. We help clients navigate an often-complicated medical system, made even more so by the unique challenges of rural living. Unlike office visits, we are welcomed into homes, meeting families right where they are.

The purpose of my testimony today is to direct attention to a fiscal ask coming to the legislature from the Oregon Coalition of Local Health Officials (CLHO) asking for funding for four priorities. My focus is on one of those priorities- increased funding for Nurse home visiting and WIC. For the Nurse Home Visiting portion, this funding would be allocated to our Babies First and Cacoon programs to eliminate (or reduce) the federal match we currently pay. To put it in the simplest terms, Babies First visits cost \$460/visit, with a 41% Medicaid match requirement, making the actual income \$270/visit. For rural counties like Union County, the actual income per visit isn't enough to sustain our program. This past year, we have had to seek outside grant funding to keep our programs running because of a \$144,000 deficit going into the 2024-2025 fiscal year. The local public health authority sees the value in our program and the difference it makes in our community, and while they've been committed to keeping it afloat the last couple of years, running in a deficit obviously isn't sustainable.

Babies First and Cacoon are what I like to call "the smallest, biggest work". Our little team of 5 is out there working, making a difference in the smallest, most vulnerable members of our community. Research overwhelmingly supports nurse home visiting, showing decreased child abuse rates, decreased ER visits and it also shows how positive childhood events make a difference in the physical, mental and social health of adults. We work really hard to help families create those positive experiences. But without a change in the way Babies First and Cacoon home visiting programs are funded, it isn't sustainable to continue to run in a deficit. The fiscal ask from CLHO would keep rural counties from losing this valuable resource and we're humbly asking for your support.

Sincerely,

Chelsea Matthews, BSN, RN, CLC

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