

Good afternoon Chair Pham, Vice Chairs Edwards and Javadi, and members of the Committee:

For the record, my name is Ana Day, and I'm the Board Chair of the Oregon Alliance of Children's Programs as well as the Executive Director of Oregon Community Programs, located in Lane County. My organization provides outpatient and intensive outpatient behavioral health services to children and families, including services for foster youth from across the state through our behavioral health treatment foster care program. Over 95% of our clients are children with the Oregon Health Plan.

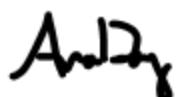
I'm here today in support of HB 4083 to implement smart changes that reduce administrative burden for behavioral health providers and the system overall. With all the investments that this Legislature has made to stabilize our behavioral health system and workforce, it just makes sense for OHA to bring efficiency and streamlining to leverage our dollars to maximum benefit for clients.

We are particularly supportive of the efforts to centralize credentialing rather than needing multiple different processes for multiple different CCOs and insurers. We do want to highlight that in order for a centralized credentialing system to truly reduce administrative burden for providers serving OHP that it would need to accommodate the needs of both licensed clinicians and those who serve as Qualified Mental Health Professionals and Associates, as well as Peer Support and other provider types that are unique to Oregon. We are confident that these concerns are being thoughtfully addressed by the bill's sponsors.

Regarding cross-discipline flexibility for licensed clinical supervisors—I imagine many social workers will continue to prefer and choose a LCSW supervisor for all the reasons outlined by others who've spoken at today's hearing. However, HB 4083 creates the option for social workers to be supervised by other disciplines if that best suits their professional situation, geography, context, or body of clinical work. That flexibility will make a meaningful difference for those who need it, especially those in rural areas.

We support the passage of this bill to realize the goals of recent behavioral health workforce investment—to actually get therapists and other behavioral health staff meeting with clients rather than being mired in paperwork or waiting in multiple different lines for duplicative approvals. It feels like a win-win when we can provide better care, for more people, without spending a whole lot more money. Thank you so much for this chance to share our support.

Respectfully,



Ana Day, LMFT

Chair, Oregon Alliance of Children's Program
Executive Director, Oregon Community Programs