

Chair Prozanski, Vice Chair Thatcher, and Members of the Committee,
On behalf of Bridges to Change, we submit this letter in strong opposition
to Senate Bill 1583.

Bridges to Change works directly with people navigating substance use disorder, housing instability, trauma, and system involvement. From that vantage point, we know that stability, in services, funding, and administration, is essential to saving lives and supporting recovery. SB 1583 undermines that stability by moving Behavioral Health Resource Network (BHRN) funding out of the Oregon Health Authority (OHA) and into the Criminal Justice Commission (CJC), reframing a public health program within a criminal justice structure.

The legislature has already made significant, substantive changes to the oversight and implementation of the BHRN program in recent years. In 2023, HB 2513 made major adjustments to Measure 110 oversight, clarifying roles, strengthening accountability, and stabilizing grant administration within OHA. That bill was the product of extensive stakeholder work and was explicitly designed to reduce confusion, delays, and disruption for providers and communities relying on these services. Legislators emphasized at the time that providers needed certainty and continuity in order to build infrastructure, expand services, and meet growing community need.

Despite those efforts, the program has continued to experience substantial change. In 2025, the legislature considered SB 881, which proposed moving BHRN funding from OHA to the CJC. That proposal was ultimately rejected after strong opposition from providers, advocates, and people with lived experience, who warned that such a move would destabilize the program and undermine Oregon's commitment to treating addiction as a health issue, not a criminal one.

SB 1583 revisits that same proposal, and goes further. It repeals the Oversight and Accountability Council, restructures the BHRN program, narrows the definition of treatment, and allows behavioral health dollars to

be redirected toward administrative and law enforcement costs. After years of ongoing legislative changes, this bill represents yet another major disruption to a system that providers and communities are still working to stabilize.

The need for stability has never been greater. A December 2025 Secretary of State audit warned that frequent legislative changes make it harder for providers, counties, and the state to build the infrastructure necessary to improve outcomes and reduce substance use disorder. At the same time, BHRN providers are facing declining cannabis revenue and broader funding uncertainty. Moving the program yet again, particularly into an agency that does not administer behavioral health programs, risks service delays, provider attrition, and loss of community trust.

SB 1583 also opens the door to diverting scarce treatment and recovery dollars into the criminal justice system. Allowing up to 15 percent of grant funds to be spent on administrative and law enforcement costs, and prioritizing strategies such as community courts and focused deterrence, shifts resources away from behavioral health care at a time when those resources are already shrinking. Oregon has separate funding streams for public safety and deflection; BHRN funds should remain dedicated to treatment, harm reduction, housing support, and peer-delivered care within the public health system.

Finally, eliminating the Oversight and Accountability Council removes a critical community-focused voice from the program. While the OAC has navigated significant change and uncertainty, the council continues to provide an important voice within the BHRN and OHA system. Dismantling systems of feedback and lived experience runs counter to the goals of the program and to Oregon's stated commitment. Keeping BHRN structures intact ensures Oregon's recovery and behavioral health providers have stability, and can operate the services implemented despite the constant change we've experienced.

Bridges to Change urges the legislature to reject SB 1583. The BHRN program does not need another structural overhaul. It needs stability,

continuity, and the time to deliver on the promise of a public health response to substance use disorder. Keeping the program within the Oregon Health Authority is essential to that goal.

Thank you for your time and consideration.

Sincerely,

Dr. Hannah Studer, DSW, LCSW, CADC-II
Chief Executive Officer
Bridges to Change