



February 23, 2026

Chair and Members of the Committee,

As a large, Oregon not-for-profit behavioral health provider, ColumbiaCare supports **House Bill 4070** and the **-A10 amendment**, which serve to modernize and clarify Oregon's behavioral health statutes.

Updating language and reducing unnecessary administrative burden is overdue and essential to supporting the behavioral health workforce, reducing system inefficiencies, and improving timely, equitable access to care. The bill reflects the comprehensive review and consensus recommendations from the legislatively directed HB 4092 Workgroup, a multi-year collaboration among providers, counties, tribes, hospitals, CCOs, OHA staff, and consumer advocates.

We believe HB 4070 brings statute into alignment with how care is delivered, creates clarity that will reduce confusion around billing, documentation, and compliance expectations, while reducing what is already a heavy administrative burden on our service and administrative teams—all without expanding programs or increasing costs.

We also believe the amendment reinforces quality, safety, and workforce stability by supporting OHA in clarifying meaningful standards for mental health and substance use disorder services. The amendment does **not** restrict telehealth services. Oregon-based providers such as ColumbiaCare already use a combination of telehealth, outreach, and in-person care to respond to the varied needs and strengths of the people we serve. It clarifies supervision expectations for our workforce and affirms that Medicaid reimbursement be targeted to services delivered by Oregon-regulated entities who are part of our state, regional, and local continuums of care.

In summary, HB 4070 and the -A10 amendment brings statute in line with current practice, reduces waste, supports an Oregon-based workforce, while preserving flexible delivery of care.

We respectfully request your support. Thank you for your consideration.