



# HB 2231 - A Engrossed – SUPPORT

Senate Health Care Committee Hearing – May 11, 2015

Dear Chair Monnes-Anderson and Committee Members,

I am Janet Arenz, Executive Director of the Oregon Alliance of Children's Programs. We are a statewide non-profit, supporting good budgets and good policies for children and families, so that we can make children Oregon's greatest asset.

We do this by representing \$223 million in small businesses, through 45 organizations who deliver services and programs for over 100,000 children. We have a payroll of \$152 million for 5,500 employees and raise \$35 million in philanthropic resources each year.

Over half of our members provide one or more behavioral health programs.

## WHAT HB 2231 DOES

- Requires the Oregon Health Authority to complete a data bank of behavioral health provider information needed for Coordinated Care Organizations to make credentialing decisions without redundant requests for information to providers and without conducting costly site reviews.
- Requires the OHA to have processes to address redundancies and duplication concerns raised by providers.
- Requires OHA and CCO's to report back to the legislature with updates and impacts of this streamlining process and its implementation.

### WHO SUPPORTS THE BILL

• All of our members, who are behavioral health providers subject to the CCO credentialing process; and all of the other affected stakeholders have agreed to the A-Engrossed version.

#### HISTORY

- Providers have suffered for nearly 3 years under a redundant, expensive and onerous credentialing system, where a provider for child, youth and adult behavioral health services may have to credential every program with every CCO.
- For larger organizations with 10 or more programs, they would have to go through nearly 200 credentialling processes.

707 13<sup>th</sup> Street SE Suite 290 Salem, Oregon 97301 Phone: (503) 399-9076 Fax: (503) 362-0149 www.oregonalliance.org Providers documented their average experience for a credentialing process to include:

- 500 pieces of paper
- 2-3 staff for 2-3 days of site reviews
- As long as 6 months for a credentialing determination to be made.

#### THE SOLUTION IS HERE!

HB 2020 (2013) was approved by the legislature to provide credentialing redundancy relief. It amended the Oregon Health Authority, Addiction and Mental Health division certification process to double as the process needed for credentialing and eliminate document requests and site visits.

HB 2231-A Eng creates a data bank to effectively execute the intent of HB 2020.

## Please support HB 2231-A Engrossed!