Testimony of Elizabeth Hutter on 4/13/2017 at 3P.M. Senate Committee on Veterans and Emergency Preparedness

- Good afternoon. My name is Elizabeth Hutter and I am here to support Senate Bill 1054.
- I am the Chief Executive Officer at Cedar Hills Hospital and Outpatient Services, which is a freestanding psychiatric hospital and outpatient services located in Portland, Oregon.
- Cedar Hills Hospital and Outpatient Services is uniquely positioned to comment on this bill because we specifically treat veterans, family members, and active duty service members in our Military Program. Additionally, we treat members of the general public for mental health and substance use disorders in our other hospital units and in our outpatient programs. We have 89 inpatient beds for adults and a large outpatient program that offers day treatment and intensive outpatient treatment. Cedar Hills opened in 2009 under the ownership of a different company and was acquired by Universal Health Services (UHS) in 2012.
- Our hospital does not believe that the need for inpatient services is interchangeable or can be • replaced by an expansion of community-based services. I would like to state that my testimony in no way detracts from our support of more community-based services and the expansion of outpatient programs, behavioral health integration, and housing options for those we serve. However, I asked our Medical Director today about this very topic and he also thinks there is an ongoing need and necessary place for inpatient psychiatric care in our state. Many of our clients are too ill to be treated on an outpatient basis. Mental health and substance use treatment should be viewed as a spectrum and not all clients will need inpatient treatment, but there are many who do and when they need help they should not be made to sit in an emergency department for days on end. Additionally, when there are not adequate inpatient services in our community our clients get caught in the legal system. The correctional system is not intended to be an environment focused on providing treatment and recovery for community members suffering from mental illness and/or a substance use disorder. It has been widely discussed that many of our clients are inappropriately placed in the legal system and receive inadequate treatment, while also costing the state.
- I also think it is important to discuss Cedar Hills' first-hand experience with the continuing need for inpatient mental health and substance use treatment services in the State of Oregon.
- Cedar Hills' experience with high occupancy is a good "barometer" of the inpatient psychiatric bed shortages in our region and we see the trend growing. Cedar Hills opened with just 36 inpatient beds and has grown to 89 beds over the last seven years. During this period the hospital has consistently run at 90% to 95% capacity. We had a 10-bed expansion on our most acute unit and it was at capacity within 24 hours of opening.
- We are continuously overwhelmed by the number of veterans and community members seeking treatment on a daily basis. In the past 12 months the hospital has seen a dramatic increase in the number of veterans seeking care through the Choice program. We've established an extremely collaborative relationship with the VA and we are treating an average of 9 veterans per day in the hospital. Over the holiday months the average number of veterans being treated in the hospital jumped to 15. There needs to be a mechanism for quality treatment programs to open at all times for veterans who are seeking emergency inpatient mental health and substance use treatment.
- I would briefly like to address the community need we are seeing for all individuals, including veterans. Due to Cedar Hills being at capacity most of the year, we are unable to treat an average of 128 Oregonians per month who are sitting in emergency departments across the State of Oregon. In total, we receive about 222 requests to accept clients from emergency

departments per month and we are only able to accept about 104 of those clients. I request the members of the committee to consider how important it is for our state to allow more inpatient psychiatric programs to open without the barrier of the certificate of need process.