

Memorandum

- To: Rep. Mitch Greenlick, Chair, House Committee on Health Care Rep. Cedric Hayden, Vice-Chair, House Committee on Health Care Rep. Rob Nosse, Vice-Chair, House Committee on Health Care Members of the House Committee on Health Care
- From: Danielle Sobel, MPH, OPCA State and Federal Policy Director Marty Carty, OPCA Policy Senior Manager
- Date: February 5, 2019
- Re: Support for HB 2257, -1 amendments

On behalf of the Oregon Primary Care Association (OPCA), we respectfully request your support for HB 2257 with the -1 amendment. OPCA is a non-profit organization, with a mission to support Oregon's 32 community health centers, also known as federally qualified health centers, in leading the transformation of primary care to achieve health equity for all. Community health centers deliver integrated primary care, including dental and behavioral health services, to over **430,000 Oregonians annually**. Community health centers are providers within the CCO networks, providing care to some of Oregon's most vulnerable populations, including **one in four Oregon Health Plan members**.

As integrated primary care centers, many community health centers have created or built-in models of care that address their patient population's need for substance use disorder and opioid use disorder (SUD/OUD) treatment, including incorporation of medication-assisted therapies (MAT) into primary care. Providers and care teams see firsthand the impact of Oregon's opioid epidemic and are supportive of the additional solutions offered in HB 2257 -1. We are especially pleased to see language that frames the conversation about substance use disorder as a chronic illness with commensurate treatment options available and provided. Treating SUD/OUD as a chronic illness will reduce the stigma often associated with this epidemic and helps patients and the public understand that treatment is an ongoing process, just like diabetes requires ongoing management. Our health centers have already begun to view SUD/OUD in this way, with many considering expanding their services to include addiction services, in addition to behavioral health.

We support the -1 amendment that addresses several statutory changes to the PDMP that both continues to protect patient confidentiality while simultaneously expanding the functionality of the PDMP as a tool to better manage their patient's prescriptions. Many of our health centers have integrated PreManage (outpatient counterpart to the Emergency Department Information Exchange (EDIE)) into their electronic medical records and regularly use the PDMP in patient care.

We know that this work is foundational and not the end-point in this epidemic- community health centers play an integral role in delivering substance use disorder and MAT services to patients around the state and appreciate the work the state continues to do to address this head on.

We urge your support of HB 2257 -1 as the continuation of collaborative work to address Oregon's opioid epidemic.

Oregon Primary Care Association Leading the transformation of care to achieve health equity for all.