Legacy Health

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March 27, 2019

House Committee on Health Care Oregon State Legislature 900 Court Street NE Salem, Oregon 97301

Re: House Bill 3076 – Community Benefit

Chair Andrea Salinas and Members of the House Committee on Health Care:

Legacy Health is Oregon's only locally owned nonprofit health care provider in the Portland-Vancouver area and mid-Willamette Valley. We are an integrated network of care providers with over 100 primary care, urgent care and specialty care clinics, and seven community-based and nationally recognized hospitals.

Our approach to the health of the community is holistic, which affords us the opportunity to collaborate with community partners, local government and health systems. Our community benefit investments and programs are driven by community health needs assessments (CHNAs) and community health improvement plans. The improvement plans guide our community-focused work, including investments and health efforts based on prioritized needs identified in the CHNAs.

As experts in community benefit and working with community partners, we understand the challenges in these programs and the extensive work it takes to not only understand the value of these programs but evaluate the success of these programs. We need to ensure these programs can keep moving the needle for health outcomes. With limited resources within our communities, it is imperative that we are strategic with our solutions and community benefit resources.

In 2018, Legacy Health's total community benefit was \$443,185,000. Our community benefit total reflects two large partnerships within the Portland Metro area in response to access to care and affordable housing. One partnership is with Central City Concern (Housing is Health), a partnership formed with six health organizations to respond to the urgent need for housing for homeless community members. The other partnership is with Project Access Now. Through this partnership, health system partners came together to fund initiatives to assist

families needing financial assistance associated with medical premiums, deductibles, co-pays and prescriptions. Our current community benefit structure allows us the flexibility to think outside the box, respond to the individual needs of our communities and collaborate with other systems to combine our resources for a greater impact.

We have concerns that increased regulation and any reduction in flexibility could have consequences in our ability to continue our work as health systems and with community partners. The needs across our geographical footprints are very different. Our systems need the flexibility to invest resources based upon need as a system, rather than an individual medical center or clinic.

For that reason, we oppose the changes to community benefit as envisioned in HB 3076 and urge you to not advance it. Our community benefit is a transparent program that is working well in our community. We urge you to oppose HB 3076 and instead allow hospitals to engage in a collaborative policy process which centers on driving health outcomes.

Sincerely,

Spathyn Correia

Kathryn Correia President and Chief Executive Officer