



February 3, 2020

Senate Committee on Mental Health
Oregon State Legislature
900 Court Street NE
Salem, OR 97301

RE: Testimony in support of Senate Bill 1552

Chair Roblan and Committee Members,

I am submitting this written testimony in support of SB 1552. As the Chief Executive Officer at Klamath Basin Behavioral Health (KBBH), Klamath County's Community Mental Health Program and one of 12 Oregon agencies participating as a Certified Community Behavioral Health Clinic (CCBHCs), I am uniquely qualified to share the significant financial and behavioral health care outcomes the CCBHC program has demonstrated in Klamath County. My intention is to present an impassioned plea for the timely continuation of services to Oregon's most vulnerable citizens.

My career as a Licensed Mental Health Professional has spanned over 40 years. Each decade has brought progress, however, no initiative at a local, state, or national level has brought anywhere near the demonstrated potential to drive positive change in both rural and urban communities than the CCBHC program. Historically, our approach to delivery of care has focused on isolated conditions and siloed services without the benefit of flexible care integration, community-based services, or a focus on the social determinants of mental illness. The traditional funding model based on fee-for-service billing codes does not meet the needs of either providers or populations. We know the needs of community member we serve are so often not limited to just mental health, substance use, or primary care, but often sit at the intersections of multiple areas including housing, employment, poverty, trauma, etc.

As a result of CCBHC funding, organizations throughout Oregon have been able to build innovative and comprehensive behavioral healthcare systems that have dramatically increased the number of individuals served, the number of services delivered, have expanded qualified work forces, increased coordination amongst providers and community stakeholders, and increased timely access to needed services.

Those of us doing this work have personally witnessed the progress and meaningful change allowed by the CCBHC project. In Klamath County alone, the CCBHC model has delivered a significant positive impact both clinically and financially.



Our four-year data report demonstrates high value outcomes in multiple areas, some of which include:

- Increased access to services and consumer utilization
- Increased workforce
- Increased diversion from incarceration
- Decreased hospital Emergency Department utilization
- Decreased use of State Hospital beds
- Launched on-site primary medical care
- Launched and expanded Mobile Crisis Services
- Co-located behavioral health staff at all schools in Klamath County
- Co-located behavioral health staff at hospital Emergency Department
- Co-located staff at Klamath County Community Corrections and in the County jail

In addition to the highly measurable outcomes submitted in KBBH's CCBHC Expansion Narrative (see attachment), we have successfully partnered with a broad array of community stakeholders including law enforcement, hospital, District Attorney, district schools, and corrections system. We have developed a model of care that drives community collaboration in a way that best serves the most vulnerable citizens in Klamath County while providing substantial cost savings. All of this was done in tandem with development of systems and analytics that enable us to continue measuring success and making data-driven decisions for the greater good.

If the Oregon Legislative Assembly does not approve SB 1552 in this session in order to leverage a matching federal investment of \$62 million, a model that has to date demonstrated significant improvement in our local system of behavioral health care will be systematically deconstructed, and providers will have no choice but to regress to a substandard model that simply does not deliver the outcomes that CCCBHCs can. Lives and communities depend on this work and I implore you to act in support of the continuation.

An appropriate analogy is that the genie has been let out of the bottle and we can't put it back without dismantling what is now our functioning business model and organizational infrastructure, while at the same time undoing the successful working collaborations that have been created through the CCBHC demonstration. Thank you for your thoughtful consideration.

Respectfully,

Stan Gilbert
Chief Executive Officer