

Sen. Arnie Roblan  
Chair, Senate Committee on Mental Health  
900 Court St. NE, S-417  
Salem, OR 97301

RE: Support of SB 1552 – Funding CCBHC

Chair Roblan and Members of the Senate Committee on Mental Health,

PeaceHealth Sacred Heart Medical Centers at RiverBend and University District are critical points of access for health care services in Lane County. We provide comprehensive and compassionate medical services to patients from a broad geographical area, including those who need advanced care, like trauma, neonatal intensive care, neurosurgery, comprehensive cardiovascular and more. When the opportunity to be a CCBHC presented itself, we felt it was important to be true to our mission to improve the overall health of our communities and pursue the program for residents in our community who have unique behavioral health needs.

Through the CCBHC funding model, PeaceHealth has increased the number of people who are offered mental health services with more than 500 additional patients receiving care under this model. Additionally, under the CCBHC program, the use of emergency department, inpatient psychiatry, and psychiatric readmission rates have decreased significantly. CCBHC patient readmission rates have been consistently under 3 percent whereas non-CCBHC patients averaged 8.7 percent over the same period.

The funding has allowed rapid access to services, so patients get the help they need, in large part, before they are in crisis. The payment model has supported comprehensive team-based care offered in the location that best works for the patient, including in their home, places of work and school. The community partners we have developed with the CCBHC program have allowed us to provide as close to immediate access to treatment for those in mental health crises so that people can be served outside of the emergency department or hospital setting and have ongoing follow-up in the community.

Through the CCBHC funding model, PeaceHealth has increased the number of people served from 5,694 patients in the 12-months prior to CCBHC to 6,276 patients in demonstration year 2. Under the CCBHC program, the use of emergency department services decreased from 23% in demonstration year 1 to 20% in demonstration year 2. Had CCBHC continued in Lane County, it is likely that ED utilization would have continued to decrease. The services provided by the CCBHC also aided in reducing psychiatric inpatient admissions from 13.7% in 2018 to 11.4% in 2019, as well as maintaining psychiatric inpatient readmission rates below 3%. We were able to provide urgent access for mental health services to 286 patients through our rapid access clinic so patients could be helped outside of the emergency department or hospital setting, while having follow-up care in the community.

Without the CCBHC payment model, PeaceHealth will serve fewer patients overall and our ability to provide comprehensive team-based care across age ranges or to every person who needs them will be impacted. We will no longer have urgent access to mental health services outside of the emergency department. We anticipate use of the emergency services, inpatient psychiatric services and hospital readmission to rise and return to pre-CCBHC levels. The cost to the State of Oregon and Lane County will be shifted from preventive care to acute care including EMS, public safety, inpatient psychiatric services, and the criminal justice system. The overall health of our community will suffer because many people will not receive the care they need in the right place or time. Mental health, like other health conditions is known to be more treatable with better outcomes when services are provided early rather than after becoming acute.

Sincerely,

*Alicia Beymer,*

Alicia Beymer, MBA, CPHRM, CPHQ  
PeaceHealth Sacred Heart University District, Vice President of Operations