

Testimony in support of HB 2508

February 3, 2021

Dear Chair Prusak and Members of the House Health Care Committee,

On behalf of the Association of Oregon Community Mental Health Programs (AOCMHP), I would like to enthusiastically support HB 2508 to extend telehealth care options at parity with in-person services. As we continue to grapple with COVID-19, telehealth is a safe and viable option for a majority of the people served by our community mental health programs across the state.

Telehealth has allowed families who previously had to drive a long distance or who had challenges with childcare to attend weekly appointments remotely. The no show rate has decreased significantly and consistent attendance is on the upswing. One group that seems particularly in tune with telehealth is the young adult population. Clinicians have noted more engagement and real progress in treatment, with clients showing improved mood and coping strategies.

Although many people like the audio/video combination, some prefer telephone only because the video may create privacy challenges for them with limited space and access to internet. For this reason, the telephone only option is a critical component of this legislation. Telehealth is essential during a pandemic for a lot of people and it will be the preference for some post-pandemic. Telehealth will never replace in-person services for others, but we certainly would like to continue having the option to use telehealth when preferred and effective.

We urge your support for HB 2508. Thank you for the opportunity to express ours.

Sincerely,

Cherry L. Raminez

Cherryl Ramirez Executive Director Association of Oregon Community Mental Health Programs (503) 399-7201

Examples of Our Telehealth Experiences

"Another benefit has been more consistent attendance as families do not have to travel; transportation is a common barrier to treatment for our families. Child care is another common barrier; since families are in their home, we can problemsolve and manage to do a session even when siblings are present, which could not happen in the office as someone would need to be watching the siblings."

"I'm currently working with a client who experiences panic attacks and goes into seizure activity when she is stressed. She had not left her house in many months when we started because she would panic and have a seizure when she tried. She can barely make it to her mailbox using calming techniques, but would definitely not be able to make it into the office. Without the option of telehealth to continue the work, she would be at risk of needing a higher level of care after COVID."

"One client admitted in our first session that she has been closed for non-engagement in the past and no shows a lot and it's not intentional, she struggles with balance between being a business owner, parent and her mental health. Since using telehealth she has attended all of her appointments..."

"I personally have referred up to 10 community members and friends to providers who use telehealth who live outside of their catchment area. Additionally, we were able to hire a bilingual/ bicultural clinician who does not live in Clatsop but provides services to our Latinx population. It's really been a win win."

"I can tell you that one of the most notable benefits we have enjoyed from using telehealth is a high show rate by clients. I just took a random sampling over the past 4 months and see very consistent patterns ranging between 78-94% show rates. This is across the board of all clinicians on my 2 treatment teams."

"I began meeting with C. during the pandemic (we've never even met face to face!) and having virtual appointments with a new client, has been so helpful in building rapport and developing trust..."