



**Date: 5/13/2021**

**RE: Letter of Support for HB 3229**

Central City Concern (CCC) is a non-profit direct service organization that provides integrated primary and behavioral health care, supportive and affordable housing, and employment services to people impacted by homelessness in the Tri-County area. Central City Concern operates about 2,100 units of affordable housing, serves 9,000 patients annually through our 12 Federally Qualified Health Centers, makes 1,200 job placements annually and operates social services for the community justice programs in Multnomah and Clackamas counties. **Our programs and properties span Senate Districts 17, 18, 21, 22, 23, 24 and 25; and House Districts 33, 36, 42, 43, 44, 45, 46, 47, 48 and 50**

Continuity of care is incredibly important, and is one of the key issues that has been identified by our [Flip the Script](#) reentry program. CCC provides transitional housing programs for both reentry and diversion from the criminal legal system. These programs continually work to bridge gaps between housing, health care, economic opportunity and other social services to improve individual outcomes and reduce re-incarceration.

We have heard from our clients that disruption in their continuity of care, changes in their treatment plan and/or a lack of warm hand-offs exacerbates their illness and perpetuates instability. HB 3229 calls the table for the conversation we need to improve the care and support of people as they transition between incarceration and community. If we want to stop the revolving door of jail-homelessness-emergency room-homelessness-jail etc. we need to have high expectations for warm hands off between systems. The [Behavioral Health Justice Reinvestment](#) project in 2019 evaluated the health needs in our system of incarceration, what we all learned through that project was just how much we are incarcerating people who are sick. You can see in these presentations and data that up to 50% of incarcerated individuals are OHP members, and they are 300%-650% more likely to have a mental illness, substance use disorder or both. This is not a unique Oregon issue unfortunately, and I encourage the work group that would be formed by HB 3229 to look at information like the [State Medicaid Eligibility Policies for Individuals Moving Into and Out of Incarceration](#) written by the Kaiser Family Foundation.

When we fail to make health connections between systems, it is our own systems that then perpetuate homelessness, illness and over-incarceration.

Thank you,  
Mercedes Elizalde  
Public Policy Director  
Central City Concern