



Chair Prusak, Vice Chairs Hayden and Salinas and Members of the House Committee on Health Care,

Gaby is a 56 year old Spanish speaking female with breast cancer. Her oncologist referred her to our home-based palliative care program for pain management. Gaby has been in so much pain that she is not able to walk, ride in a car or even lay flat so that she can undergo a biopsy to determine the best plan of attack for dealing with her cancer.

We scheduled the services of a Spanish interpreter for the first visit. When our Registered Nurse Case Manager arrived, Gaby was in so much pain that the visit was cut very short. Working with Gaby's primary care physician and oncologist, our team was able to make medication adjustments and Gaby's pain improved markedly in two days.

Our Medical Social Worker and the interpreter made a visit three days later and Gaby was able to engage and reported continued improvement. Gaby's husband had taken a half day off work and was also present. He was very engaged and was able to ask lots of questions about Gaby's care and the disease progression. The two of them expressed some anticipatory grief and our MSW was able to give them additional information in Spanish regarding advanced care planning and making end of life decisions. Our MSW was also able to review their paperwork for social security and help Gaby receive the benefits that she's earned.

By working with Gaby's primary care physician and oncologist, our palliative care team was able to help Gaby improve her quality of life and her access to medical care. They are continuing to support her as she enters her rounds of cancer treatment.

It is vital that all of the Gabys in Oregon have the opportunity to receive the help they need as they face critical decisions and navigate complex medical systems. HB 2981 will require that CCOs throughout Oregon reimburse for home palliative care services.

In the 2019 session, Sen Gelser introduced this concept as SB 179. After meetings with the Oregon Health Authority, representatives from most of the CCOs and state associations representing senior populations and agencies, SB 179 received no negative pushback as it moved through the hearings process. It was ready to move out of Ways and Means to the House side when the legislature stalled and the bill died. The health care crisis of the past year highlights how vital it is that Oregonians have access to the care they need on their own terms in their homes.

We have a few amendments that we have proposed to HB 2981. Palliative care is for anyone with a serious illness – not just for people at the end of life so we would like to replace "end of life" with "serious illness". We were told by OHA that one of the biggest challenges with this bill would be the necessity of applying for a Federal waiver. We are proposing we remove any reference to Fee for Service Medicare/Medicaid from the bill and only have it apply to CCOs. Our experience has been that the process for someone to move from Fee for Service and become a CCO member is relatively simple. We are also suggesting clarifying the wording in a couple of other places.

Please support HB 2981 and help us help our community.

Thank you,

A handwritten signature in black ink, appearing to read 'Ker J. Johnson', is written over a light blue horizontal line.

Business Development Manager  
Willamette Valley Hospice & Palliative Care