## HB2506 testimony

Honora Englander, MD\*

Director/ PI Improving Addiction Care Team (IMPACT)

Professor of Medicine

March 19, 2025

englandh@ohsu.edu

\*While I work at OHSU, I am not here on behalf of OHSU

#### 2012

- I was a hospitalist
- Caring for rising numbers of young people admitted for medical and surgical complications of opioid use disorder.
- My patient's story pushed me to lead change.



"Hooked: A Love Story From Vermont's Opioid Crisis," Kate O'Neill 2019

 We were not equipped to treat the primary disease, the opioid use disorder

• Tremendous cost

Patient died

#### Conducted a needs assessment

People wanted addiction care, should start in the hospital

Gap time to community treatment

Stigma, mistrust, choice

# Improving addiction care team (IMPACT)

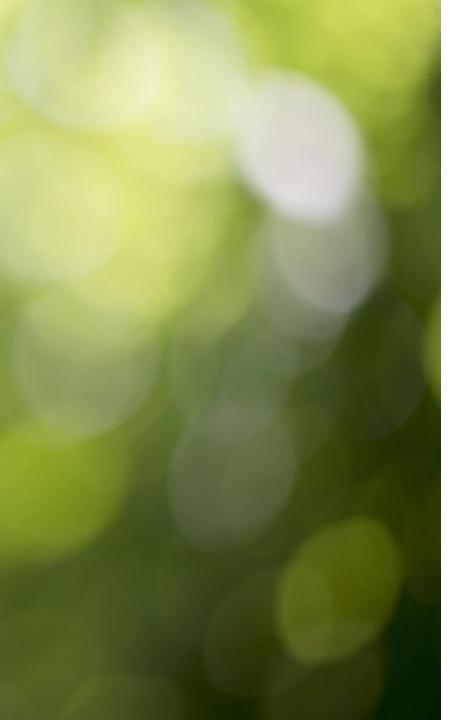
#### • 2014

- Physician
- Social worker
- Peer

#### • Grown to include:

- NPs, PA
- Medical fellows and other trainees
- Nurse
- Pharmacist
- Research and educational team





### IMPACT: a platform for change



Clinical care

~30 staff across 3 hospitals



**Developing the evidence** 

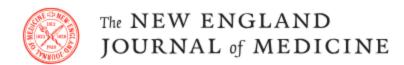
The most rigorously studied addiction consult service in the US



**Platform for change:** 

Telementoring ECHO (>1000 participants across Oregon's urban, rural, frontier hospitals)

### Changing hospital standards of care



# Hospital Standards of Care for People with Substance Use Disorder

Honora Englander, M.D., and Corey S. Davis, J.D., M.S.P.H.

ore than 100,000 Americans died from drug overdoses in 2021 — a staggering death toll that would have been un-

charge SUD treatment, and reductions in SUD severity, stigma, and mortality. Furthermore, hospitalbased addiction care increases the SUD is a moral failing rather than a treatable health condition with biologic, social, emotional, and cultural underpinnings.

#### HB2506

- HB 2506 would drive state standards and infrastructure needed to accomplish this
  - Has potential to transform care, improve outcomes, and save lives
- Oregon has necessary expertise, can draw on existing expertise, infrastructure and networks

- Requires building up linkages to community care
  - Expanded methadone and low-barrier buprenorphine

## Questions

englandh@ohsu.edu

