## Health Department



February 5, 2025

To: House Committee on Education

From: Jenna Green, Interim Executive Director of Multnomah County Community Health Center Alexandra Lowell, Manager of Multnomah County Student Health Centers

Re: Support for House Bill 2729-1

Dear Chair Neron, Vice-Chairs Dobson and McIntire, and Members of the Committee.

Thank you for the opportunity to share our comments in support of House Bill 2729-1, which would authorize much needed funding for the school-based health centers (SBHCs) that serve as a critical resource to children and adolescents across the state.

Multnomah County's Community Health Center is the largest public federally qualified health center in Oregon and provides integrated health care services to over 56,000 patients a year though our seven primary care clinics; seven pharmacies; seven dental clinics; a Health Services Center that provides tailored care for individuals living with HIV; a mobile health clinic supporting individuals in low income and transitional housing, and our nine Student Health Centers. Our Student Health Centers provide convenient access to comprehensive primary and behavioral health care services to any Multnomah County youth between the ages of 5-18 and are a vital resource for maintaining health and wellness within our community – similar to other school-based health centers that operate across the state.

Through a unique model of care, school-based health centers situate comprehensive services within, or adjacent to, the community settings where children and adolescents spend the majority of their time - and the places where they often present with health needs. We pride ourselves on the ability to provide care for a wide-range of health needs in a convenient and comfortable setting while being responsive to the distinct needs of youth. We promote youth engagement through "Student Health Action Councils", which provide a space for youth to address the health issues of greatest importance in their school communities.

Because there are no out-of-pocket costs to families for the services that we provide, we rely upon a variety of funding sources to ensure we can deliver equitable care to any student that presents in one of our clinics. School-based health center staff devote significant effort in securing diverse funding from a mix of payers and other sources to ensure we can continue to operate within our communities and meet our students' needs. The services that school-based health centers provide are not only critical for improving individual health outcomes, but ensure that students are healthy and better

equipped to learn and develop – resulting in long-term benefits not only for individuals, but also to families and the community as a whole.

Increasing the minimum grant funding allocated to school-based health centers, as well as creating a mechanism to adjust grants annually for inflation, will help clinics similar to ours across the state continue to provide services that the community depends upon. Similar to cost of living increases, automatically taking inflation into account and adjusting funding accordingly will help reduce the risk of reductions in care levels. This is a much-appreciated step in helping to ensure continuity for the important services that school-based health centers provide.

Additionally, the grant funding proposed in HB 2729-1 will help expand the presence of school-based health centers in communities across Oregon and make necessary resources available to address the growing mental health needs we are seeing amongst our students. Despite slight improvements in certain mental health metrics after a spike during the height of the pandemic, we are still experiencing a mental health crisis among youth in the United States. Nationally in 2023, 40% of high school students experienced persistent feelings of sadness or hopelessness, 20% seriously considered suicide, and 9% attempted suicide. Trends in declining mental wellness are even more significant among American Indian or Alaskan Native, Asian American, Black, and Hispanic adolescents, and disproportionate disparities and barriers to appropriate care persist for LGBTQ youth. Upward trends in unmet mental health needs are concerning for our younger demographic of adolescents as well, as the rate of preteen suicide (ages 8-12) has been increasing by approximately 8% annually since 2008. Oregon consistently ranks among the worst in the nation in youth mental health indicators, underscoring the urgency in equipping our health care delivery system with the resources necessary to identify and support the needs of our youth.

Prevention and early intervention are critical to improving a variety of outcomes, from health indicators to educational attainment, and are pivotal, as well as cost effective, in achieving better health across the lifespan. School-based health centers are uniquely positioned to provide this care, and establishing grant programs to support mental health needs and enhance the trauma-informed approach across services is necessary to ensure our communities are equipped with the resources needed to meet growing demands in the population that we serve.

The benefits of school-based health centers on health outcomes and educational engagement for children and adolescents are well documented, but there is also evidence on the cost efficacy to the health care system of delivering services in this manner. Evidence suggests that the benefits of school-based health centers exceed associated costs. In addition, SBHCs have been shown to result in a net savings to Medicaid.<sup>5</sup> We know that annual well child visits decline significantly in

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<sup>&</sup>lt;sup>1</sup> https://www.cdc.gov/yrbs/dstr/pdf/YRBS-2023-Data-Summary-Trend-Report.pdf

<sup>&</sup>lt;sup>2</sup> https://www.thetrevorproject.org/survey-2022/assets/static/trevor01 2022survey final.pdf

<sup>&</sup>lt;sup>3</sup> https://www.nimh.nih.gov/news/science-news/2024/increases-found-in-preteen-suicide-rate

<sup>4</sup> https://mhanational.org/issues/2024/mental-health-america-youth-data#y-suicide

<sup>&</sup>lt;sup>5</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6173311/

adolescence, and timely and convenient access to preventive and primary care services in school-based health centers effectively averts healthcare costs associated with services delivered in more expensive settings, such as emergency departments and hospitals. School-based health centers provide preventive and early intervention services crucial for improving both short and long-term outcomes, which ultimately lead to savings in health care spending over the life course. Additionally, the conveniently located services help reduce barriers associated with transportation and mitigate economic losses related to productivity for both students and parents/guardians.

In addition to providing a flexible model of care that is responsive to community needs, we feel that supporting school-based health centers is one of the most cost-effective investments with potential for improving health outcomes that we can make to support our children and youth. Many of the state dollars invested in student health centers can draw down federal matching funds from Medicaid — thus we are able to leverage our state investment to bring additional money into the state for services that children and adolescents desperately need.

HB 2729-1 is a strategic investment in the health and well-being of our future generations. In addition to supporting the sustainability of school-based health centers, it will help provide a path forward to meaningfully addressing the health and educational needs of so many of our young people at this crucial moment. The Multnomah County Community Health Center appreciates your consideration of this important legislation, and we strongly urge you to support HB 2729 as amended with the -1s. Please do not hesitate to contact <a href="mailto:Alexandra.Lowell@multco.us">Alexandra.Lowell@multco.us</a> or 503.988.9751 if you have questions or require additional information.

Thank you,

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