

February 11, 2025

Senate Committee on Health Care  
900 Court St. NE  
Salem, Oregon 97301

**Subject: SB 140 - Oppose**

Dear Chair Patterson, Vice–Chair Hayden, and Members of the Senate Committee On Health Care:

Thank you for the opportunity to share our concerns for SB 140, a bill which attempts to address the burden placed on local Acute Care settings to care for patients who are civilly committed in the absence of Oregon State Hospital capacity. Multnomah County understands the concern of hospitals working to navigate a system without sufficient capacity to meet the statewide need for individuals who are a danger to themselves or others, or who cannot meet their basic needs due to mental illness. A key component of Multnomah County's 2025 legislative agenda is to increase state investment in the Behavioral Health System's services and workforce to ensure all residents can access critical, culturally responsive, and evidence-based services, including increasing targeted capacity across our region.

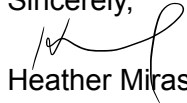
Unfortunately, SB 140 will do little to address capacity, while exacerbating the burden on community partners and system wide challenges that already exist in caring for the civil commitment population. Among other changes to the current civil commitment system, SB 140 would most greatly impact Multnomah County's trial visits processes.

Currently, ORS 426.273 states the Community Mental Health Program 'may' place an individual under trial visit. Under SB 140, if OHA intends to direct CMHPs to place all individuals discharged from a hospital from commitment under trial visit, this would exponentially increase the number of individuals from throughout the state who would be placed in Multnomah County. Additionally, all CMHP's would be required to monitor individuals for the duration of the civil commitment time period, even if released early from a hospital setting, regardless of whether these individuals consented or cooperated to services. This change would be at odds with the requirements of the Multnomah County Circuit Court that individuals consent to being placed under trial visit status.

Additionally, while the bill increases funding to hospitals through a rate adjustment, there is no funding contemplated for the additional responsibilities assigned to community mental health programs in SB 140. OHA recently provided a cost analysis of services CMHPs provide to individuals who have been found unable to aid and assist in their own defense or who are in the civil commitment process, and people who are experiencing a behavioral health crisis. The study found that there is currently a \$65M biennial gap in funding for these services alone, which are but a few of those services required of CMHPs by statute. Without adequate resources, the services required by the bill will not be able to be implemented.

Thank you for the opportunity to weigh in regarding SB 140. In addition to the above outlined concerns, our team has identified other components of the bill that may need to be addressed to reflect current system realities. We would appreciate the opportunity to share more insight into improving civil commitment system capacity, and look forward to working with the Committee and other stakeholders to find a solution that ensures all residents can access critical, culturally responsive, and evidence-based services to support their needs.

Sincerely,



Heather Mirasol, LPC

Director of Behavioral Health

Multnomah County Health Department

Submitted by: Lizzy Atwood Wills| Email: [lizzy.atwoodwills@multco.us](mailto:lizzy.atwoodwills@multco.us)