



Farrah Chaichi, State Representative, House District 35
Testimony: House Committee on Behavioral Health & Health Care | HB 2943

Date: February 11, 2025

To: Rep. Rob Nosse, Chair
Rep. Travis Nelson, Vice Chair
Rep. Cyrus Javadi, Vice Chair
Members of the House Behavioral Health and Health Care Committee

From: Anne Marie Bäckström (she/her)
The Office of State Representative Farrah Chaichi, HD 35

Subject: HB 2943 | HIV & Syphilis Testing in Acute Care

Good afternoon, Chair Nosse, Vice-Chairs Javadi & Nelson, & Members of the Committee,

For the record, my name is Anne Marie Bäckström. I am the Chief of Staff to State Representative Farrah Chaichi in House District 35 representing Beaverton, Aloha, and parts of Unincorporated Washington County. I'm testifying today on behalf of our office in support of House Bill 2943 which would require HIV and Syphilis screening for all emergency department patients already receiving blood work unless they choose to decline.

As a member of the LGBTQ Caucus, Representative Chaichi and our office believe that this bill is an important step forward in achieving health equity for some of Oregon's most vulnerable communities. Especially those living in the intersection of multiple health inequities and social determinants of health.

LGBTQ+ individuals, young people, people of color, rural Oregonians, and those experiencing houselessness are disproportionately impacted by both HIV and Syphilis, often due to a lack of access to comprehensive healthcare, education, or prevention services. Often emergency departments serve as the primary, or only, point of access to healthcare for these communities and play a vital role in promoting public health.



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There is a public health crisis in Oregon relating to the HIV/Syphilis syndemic. Our state has seen a stark 418%¹ increase in the incident rate of Syphilis since 2012 and STI diagnoses from Emergency Department visits have increased nearly 40%² nationally. Additionally, In Oregon, we have seen an increase in HIV cases over the last 4 years.

Of note, there has been a 1,750%³ increase in the rate of Congenital Syphilis, these are cases where an infant contracts syphilis from a parent who has syphilis and is not receiving treatment. These cases are inextricably linked to the increased rates of Syphilis throughout the state. Congenital Syphilis can lead to premature birth, neonatal anomalies, and death. Mothers and newborns are often left behind due to an overall lack of access to adequate primary and prenatal care. Oregon families and babies deserve better.

While we acknowledge that interventions at the primary care level would be the most ideal option, this is not a reality for many communities. Both the CDC and OHA have recommended opt-out testing in acute care settings and the statistics speak for themselves. Offering opt-out screening is a far more effective approach to prevent the spread of HIV/Syphilis, as it ensures that everyone is given the opportunity to be tested, regardless of their self-perception of risk or reliable access to routine preventative care.

The passage of HB 2943 would be a crucial step towards creating a more equitable future for healthcare for all Oregonians. Our office stands behind policies that protect Oregon's most vulnerable members and urges your support of this bill.

¹ [STI | Tableau Public](#)

² [An increase in sexually transmitted infections seen in US emergency departments](#)

³ [Emerging Practices for Responding to the Congenital Syphilis Emergency in Oregon: Recommendations for Health Care Providers](#)