

February 12, 2025

To: Senate Committee on Health Care

RE: Support for <u>SB 296</u>: Relating to Hospital Discharge Challenges; Declaring an Emergency

We fully support SB 296, which directs the Department of Human Services and the Oregon Health Authority to study options to expand medical respite programs, as well as explore the coordination of medical respite services through an 1115 Medicaid demonstration waiver, among other directives.

Medical respite care is a critical intervention for people without homes who need recuperative care from an illness, injury, or medical procedure. <u>Research</u> has shown that medical respite care reduces hospital lengths of stay and re-admission rates, as well as improves health outcomes and reduces overall costs. Medical respite care also reduces the burden placed on homeless service providers (often shelters) who are not equipped to deliver health care services or support people needing recuperation. Currently 17 states – excluding Oregon -- are in some phase of adopting Medicaid reimbursement for medical respite care.

The National Institute for Medical Respite Care (NIMRC) is a special program of the National Health Care for the Homeless Council (NHCHC) whose primary focus is on expanding medical respite care programs in the U.S. Launched on July 15, 2020, NIMRC is a national institute that advances best practices, delivers expert training and technical assistance services, and disseminates state-of-field knowledge in medical respite care. NHCHC has worked alongside Central City Concern (CCC) for more than a decade, as they are one of the oldest medical respite programs in the country. CCC has served as a model of the <u>quality standards</u> expected of programs in the field of medical respite care, and serves as a model for the importance of quality data and recording keeping, as highlighted by their recent Kaiser Permanente data project. CCC has demonstrated an estimated health system cost savings of around \$7,000 per participant on average, with a post-stay long-term housing rate of around 60%, results that speak to the programs importance in the greater Portland community.

If you would like to discuss the issue of health care for people experiencing homelessness, medical respite care, or our support for SB296, please contact: Anne Williamson, MSW, Medical Respite Policy Manager, at <u>awilliamson@nhchc.org</u>.

Sincerely,

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Bobby Watts, CEO