

February 19, 2025

Oregon State Legislature
Senate Committee on Early Childhood and Behavioral Health
900 Court Street NE
Salem, OR 97301
Submitted electronically via OLIS

RE: SB 691, SB 692, SB 693, relating to maternal and perinatal care in Oregon

Chair Reynolds and Members of the Committee:

The Hospital Association of Oregon is a mission-driven nonprofit association representing Oregon's 61 community hospitals.

The hospital association supports SB 691, SB 692, and SB 693, a package of bills that will increase funding and support for maternal and perinatal care in Oregon. Each of these bills is important to improving health outcomes for Oregonians.

Oregon stands at a pivotal moment where investment in perinatal and maternity services is needed to safeguard and advance maternal and newborn health. According to the Oregon Perinatal Collaborative's 2024 Report on Oregon's Birthing Hospitals (OPC's Report), OPC was "astounded to find that the key areas of concern and core needs were essentially universal across the state from critical access hospitals in rural and frontier counties to Level IV regional centers in urban areas."¹ The OPC Report explains:

Everyone [OPC] met was struggling with:

- Staffing challenges
- Sicker patients
- More patients with unmet basic needs

¹ 2024 Report on Oregon's Birthing Hospitals, Oregon Perinatal Collaborative, pg. 1, [2024 Report on Oregon's Birthing Hospitals](#)

All hospitals had a need for:

- Protected time for quality improvement work
- Funding and mechanisms to increase the perinatal and behavioral health workforce
- Payment reform to provide adequate reimbursement for increasingly complex perinatal care²

SB 693 would establish the Task Force on the Perinatal Workforce, which would develop recommendations for the legislature and state agencies for strengthening the perinatal workforce in the state. This is important work, as the OPC Report explains that “[a]cross the state, hospitals are faced with a range of staffing challenges, inadequate reimbursement for complex care, and increasing patient needs both clinically and socially.”³ According to OPC’s Report, “Hospitals, health systems, and clinics across the state are struggling to fully staff birthing units, prenatal clinics, and other positions that impact perinatal care.”⁴ The report concluded that staffing issues were the most common concern for birthing hospitals, and the three most prominent issues within staffing concerns included: workforce shortages, nurse staffing requirements, and establishing and maintaining nurse and provider knowledge and skills.⁵

SB 691 also promotes perinatal care by providing additional resources to support substance use disorder treatment for patients who are pregnant or parents of infants. The bill requires the Oregon Health Authority (“OHA”) to provide funding to Oregon Health and Science University for the purpose of supporting an entity within OHSU that advocates for improved maternal and neonatal outcomes through collaboration, implementation of evidence-based practices, and policy change in this state. The entity must: (1) coordinate and provide support to existing and new sites that provide integrated perinatal care and substance use disorder treatment for individuals who have substance use disorders and are pregnant or parents of infants and (2) provide support for expansion of the existing projects, including necessary staffing and site-specific resources. SB 691 also requires OHA and CCOs to reimburse hospitals for the costs for

² 2024 Report on Oregon’s Birthing Hospitals, Oregon Perinatal Collaborative, pg. 1, [2024 Report on Oregon’s Birthing Hospitals](#)

³ 2024 Report on Oregon’s Birthing Hospitals, Oregon Perinatal Collaborative, pg. 6, [2024 Report on Oregon’s Birthing Hospitals](#)

⁴ 2024 Report on Oregon’s Birthing Hospitals, Oregon Perinatal Collaborative, pg. 7, [2024 Report on Oregon’s Birthing Hospitals](#)

⁵ 2024 Report on Oregon’s Birthing Hospitals, Oregon Perinatal Collaborative, pg. 7, [2024 Report on Oregon’s Birthing Hospitals](#)



specified inpatient hospital services related to substance use disorder provided during pregnancy and after delivery of an infant.

SB 692 contains several components, including the establishment of the Perinatal Services Provider Incentive Fund and a requirement that OHA and CCOs ensure Medicaid recipients have access to doula services and lactation consultants and a minimum number of related services.

Collectively, these bills work in tandem to promote maternal and infant health across Oregon by expanding access to perinatal services through increased staffing, mandated coverage, and community programs. The hospital association urges you to support SB 691, SB 692, and SB 693 to improve maternal and perinatal care in the state.

Sincerely,



Travis Meuwissen
Director of Government Affairs
Hospital Association of Oregon

About the Hospital Association of Oregon

Founded in 1934, the Hospital Association of Oregon (HAO) is a mission-driven, nonprofit trade association representing Oregon's 61 hospitals. Together, hospitals are the sixth largest private employer statewide, employing more than 70,000 employees. Committed to fostering a stronger, safer, more equitable Oregon where all people have access to the high-quality care they need, the hospital association supports Oregon's hospitals so they can support their communities; educates government officials and the public on the state's health landscape, and works collaboratively with policymakers, community based organizations and the health care community to build consensus on and advance health care policy benefiting the state's four million residents.



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