

February 27, 2025

Joint Committee on Addiction and Community Safety Response
900 Court Street, NE
Salem, OR 97301

Dear Co-Chair Kropf, Prozanski, and Members of the Committee:

RE: SB 610-1 – Ballot Measure 110 Funding and Administrative Processes

My name is Anthony Jordan, and I am the Senior Manager for Addiction and Prevention Services for Multnomah County. The Multnomah County Behavioral Health Division carries out the functions of the Local Mental Health Authority and the Community Mental Health Programs.

Ballot Measure 110, the Drug Addiction Treatment and Recovery Act, created a funding program to establish Behavioral Health Resource Networks (BHRNs) often referred to as BHRNs. The Oversight and Accountability Council (OAC), overseen by the OHA, determines how funds are distributed statewide. BHRNs provides screening, health assessment, treatment, and recovery services for drug addiction to those who need and want access to those services.

BHRNs are funded through cannabis revenues, of which \$195 million were contributed by sales in Multnomah County in 2024 alone, the largest sum contributed by any single county. Although Multnomah County did not directly receive funds for behavioral health services through the BHRN funding process, Community Based Organizations who operate BHRNs in our community are an important component of our care continuum, and received \$91 million for the 2022-25 grant cycle.

SB 610-1 directs the OHA to make changes to the M110 funding formula, along with other changes to processes and rulemaking guidelines of the OAC in an effort to increase transparency and accountability. OAC determined a new funding formula for the 2025-29 grant cycle in the summer of 2024. SB 610-1 proposes using the Public Health Modernization formula to distribute funds, which would result in a decrease of \$19.8 million to Multnomah County from the previous funding cycle.

The impact of the change will provide additional funding to Washington, Clackamas, and Marion counties (among others) and decrease funds in Multnomah, Lane, Jackson, Josephine, and Lincoln Counties. We appreciate and acknowledge the need for increased behavioral health funds across the state. Unfortunately, due to limited state resources and inconsistent cannabis revenue from one year to the next, counties are in a difficult position working to serve our respective communities, without sufficient resources to do so.

As it relates to the proposed funding formula, Multnomah County cannot support a proposal that removes any funding from our county in this budget climate, especially with the removal of one-time federal funds, an

uncertain federal political climate, limited state funds, and a year in which Multnomah County is also facing local budget cuts.

Due to the greater prevalence of substance use and mental health disorders in Multnomah County compared to other areas, we believe that our funding share should reflect that demand. Multnomah County has the highest rate of substance use in the state, as well as the highest overdose death rate. We believe that any new formula should distribute available funding equitably across all counties, and so that as many individuals as possible benefit from the funding that is available. We need a proportionate and equitable distribution for Multnomah County that meets the growing behavioral health needs we are facing.

Additionally, we believe the changes proposed in the SB610-1 amendment around the Oversight and Accountability Council's administrative processes should be addressed. Unfortunately, without public comment or community engagement from stakeholders, the funding process is not functioning as effectively as it could. It appears that the OAC has made decisions based on information that was incorrect, and has not provided transparent information to grantees applying for funds. We support a more transparent process – one that is based in good governance, and aligned with other public rulemaking boards, which would allow the OAC to distribute more effective critical resources, and contribute to the continuum of care in a thoughtful and intentional manner.

We would appreciate the opportunity to weigh in through a process that engages all impacted stakeholders, as it relates to both the OAC administrative processes and funding formula changes. We strongly encourage a formula that is based on prevalence of substance users and improving health outcomes.

Thank you for the opportunity to share our concerns around SB 610-1.

Sincerely,

Anthony Jordan
Addiction and Prevention Services
Multnomah County Behavioral Health Department

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