

OREGON COALITION OF LOCAL HEALTH OFFICIALS

Representing the collective interests of Oregon's 33 local public health authorities to improve the health of all Oregonians.

oregonclho.org

March 4, 2025 HB 2317 - Support

Chair Nosse and members of the committee, my name is Sarah Lochner, here with the Coalition of Local Health Officials (commonly known as CLHO) representing Oregon's 33 local public health departments.

I am here in support of HB 2317 which, if passed, would add a representative of a Federally Qualified Health Center and a Senior Public Health Official to the governing body of each Coordinated Care Organization (CCO). For the Senior Public Health Official, this is defined as a local public health administrator, a health officer, or a communicable disease nurse supervisor.

Why is it important to have a senior public health person at the table? Here is a real-life illustration, as relayed to me by one of my members.

Trillium CCO went live on Aug 1, 2012. It then created service line work groups: pediatrics, surgery, back surgery, OBGYN, joint replacements, etc. Groups would meet to discuss issues and make recommendations.

One discussion point was that hysterectomies in Oregon were 40% higher than the national average. Why was that?

Another point of discussion was the large and growing number of joint replacement surgeries as a major cost driver.

Anyone who has watched Grey's Anatomy knows that surgeons want to do more surgeries, so you can't just have surgeons at the table if you're trying to figure out how to reduce the number of expensive, elective surgeries.

As folks sat around the table stumped, it was the senior public health official who illuminated the issue by flagging a key study for the years 2000-2009 that found 90% of the increase in joint replacements was due to the obesity epidemic.

On the hysterectomy surgery issue, they flagged that the human fat cell makes estrogen. As the amount of fat tissue increases, the amount of estrogen produced increases proportionally. While this does result in obese folks having youthful skin, it also causes excessive uterine bleeding – which becomes the reason for the hysterectomy.





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If we focused on both treating existing obesity cases and preventing additional cases, we would reduce the need for surgeries and thereby reduce health care costs.

That is why it is so important to have a public health expert at the table. They have a much wider lens and can offer a root cause analysis that others can't.

Many CCOs do have a public health person on their governing boards now, so for most, this would not change anything. However, for those that do not, we believe they should for the simple fact that they don't know what they don't know, and public health is here to help.

Also, I want to mention that one of my members told me today that her CCO asked her to resign from their board because of fears her county government status would open them up to public records requests. As stewards of public dollars, CCOs should be transparent, accountable, and inclusive, so this "concern" is concerning.

Please support HB 2317 and/or HB 2224 (for the same reasons). Thank you.

