



March 4, 2025  
HB 2224 - 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 2224 which, if passed, would specify:

1. that among individuals already on the Health Plan Quality Metrics Committee, that one person have expertise in public health or population health data.
2. The Medicaid Advisory Committee include professionals with experience in public health, behavioral health, and health related social service needs
3. That each CCO governing body include at least one senior local health department official – which could be a public health administrator or a community mental health director
4. And there is a provision around county commissioners as well, which I will let AOC speak to
5. Further, the CCO Community Advisory Council should also include representatives from local public health and community mental health
6. In addition, this bill adds some clarification that CCOs should try to align and coordinate with local public health on their community health assessments, to ensure efficiencies.
7. The bill also includes some permissive language that allows LPH to accept payments from CCOs as appropriate.

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.





# 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.

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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.

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.

Please support HB 2224. Thank you.

