

March 4, 2025

To the House Committee on Behavioral Health and Health Care,

I am writing to express my support for House Bill 2222, which aims to establish sustainable funding mechanisms and provide much-needed support for Mobile Integrated Health (MIH) providers in Oregon. The introduction of this bill will not only address the immediate needs of underserved communities but also improve healthcare delivery for some of Oregon's most vulnerable populations, including those on Medicaid.

MIH represents an innovative and effective model of care that brings health services directly to patients in their homes or community settings. By utilizing specially trained Emergency Medical Technicians (EMTs), paramedics, community health workers (CHWs), and other allied health professionals, MIH professionals are able to provide chronic disease management, preventative care, and wraparound health services essential for improving patient outcomes and reducing unnecessary hospitalizations.

Despite the demonstrated value these services provide, MIH programs lack sustainable funding mechanisms and support for their services. By tasking the Oregon Health Authority (OHA) with the management of an MIH registry and creating technical assistance pathways for certification and billing, HB 2222 will ensure that CPs are properly recognized and supported for the important services they provide. This also ensures that MIH providers operating in Oregon meet the standards set by OHA to adequately and effectively provide this type of care.

Additionally, HB 2222 will facilitate the establishment of new funding pathways for municipalities, healthcare providers, and organizations across the public and private sectors. This will not only benefit individual MIH programs as they look for ways to sustain operations but will also enhance the overall healthcare infrastructure by ensuring that services are adequately funded and supported without disrupting existing mechanisms already employed by some organizations.

Importantly, the bill aligns with parallel federal efforts aimed at expanding the role of paramedics and other non-physician healthcare providers within the healthcare system. By enabling MIH programs to access appropriate billing codes, the bill will improve the sustainability and growth of the MIH model, ensuring that patients receive high-quality care in the most accessible settings.

Portland Fire & Rescue's Community Health Assess and Treat (CHAT) program, launched in November 2021, enhances emergency response by handling non-emergent 911 calls, easing pressure on fire units, emergency dispatch, and hospitals. By responding to low-acuity cases, CHAT has diverted 30% of calls from emergency rooms and 20% from ambulance transport, saving the healthcare system over \$10 million.

Following the Fentanyl Emergency Declaration in January 2024, CHAT expanded its effort with Overdose Response and Support Teams, launching Oregon's first Medication for Opioid Use Disorder (MOUD) pilot program. This initiative provides buprenorphine (Suboxone®) at the time of a 911 call, facilitating immediate treatment and reducing overdose fatalities. CHAT teams also arrange same-day medical appointments, ensure access to continued treatment, and offer follow-up support, decreasing emergency department readmissions and promoting long-term recovery.

The CHAT program currently relies on grants and one-time city funding, making it vulnerable to budget cuts without sustainable financial support. Establishing funding pathways and billing mechanisms for MIH programs like CHAT is essential to ensuring long-term viability and continued service to the community.

CHAT Client Testimonials

"Everyone who said they would help us ended up not following through, but your team actually kept your word and provided the support my partner and I needed."

"I would not be here without CHAT. Sometimes, you need help, and you don't even realize it. When I needed help, the CHAT team was there. They visited me every day to check on me. When you are out here on the street, you can't trust anyone, but I learned I could trust that CHAT would be there for me."

"You saved my life! If not for all of you I wouldn't be in this shelter and getting my life together!"

"Without CHAT I would not have gotten the medicine I need and I would not be doing as well as I am now."

I strongly urge your support for House Bill 2222 and encourage you to take action to ensure that this important legislation moves forward. The recognition and support of MIH will lead to improved health outcomes, enhanced care access, and a more sustainable and equitable healthcare system in Oregon.

Thank you for your time and consideration.

Sincerely,
Stephenie Sullivan
Deputy Chief Community Health, Portland Fire and Rescue
55 SW Ash Street, Portland, OR 97204

Michelle LaViña, BSN, RN
CHAT Program Manager, Portland Fire and Rescue
55 SW Ash Street, Portland, OR 97204