

## **Robert M. Sanders Testimony in Support of HB 2506 3/15/2025**

Co-Chairs Senator Floyd Prozanski and Representative Jason Kropf, and Members of the Committee,

Thank you for your time today. My name is Robert Sanders, and I serve as the Director of Youth Services at 4D Recovery. I am honored to testify in **strong support** of House Bill 2506, a necessary and timely measure to expand access to **substance use disorder (SUD) treatment** in Oregon.

### **My Personal Journey and the Urgency of This Bill**

Before I found recovery, my attempts to get clean were always focused on **what I couldn't do**—a punitive system I created for myself because I didn't believe I deserved a worthwhile life. I didn't believe I could have fun in recovery, and I didn't believe I could succeed.

Everything changed over a **72-hour window** of willingness. It started when I found myself in a hotel room, breaking down, realizing the drugs weren't working anymore. I was exhausted and desperate, but I still didn't know how to ask for help.

I walked into a treatment center at **4:16 PM**, only to be told they weren't accepting anyone after 4:00. That one barrier could have cost me my life. Instead, I left, bought another bag, and nearly gave up. Had I not had family support—had my sister not let me in, had my family not organized getting me into treatment the next morning—I wouldn't be here today. I woke up to a knock at the door and was driven straight to treatment. That moment saved my life.

Since then, I have rebuilt everything I once lost through a supportive community, clinical supports, and ongoing recovery support services. I am **a former heroin addict who is now a college graduate, a husband, a father, a tax-paying citizen, and someone deeply committed to service**. I know firsthand what is possible with the right support and timely access to care.

But **not everyone gets that chance**. Many people hear “no” at 4:16 PM and don't make it to the next morning. **We must do better**. That's why HB 2506 is essential—it streamlines access to care, ensures individuals are met with solutions instead of barriers, and removes outdated restrictions that prevent people from receiving the help they need when they need it most.

### **Addressing the Opioid Crisis Through Expanded Treatment Access**

#### **Oregon's National Ranking in Substance Use and Treatment Access**

- **Highest Rate of Substance Use Disorders:** In 2021-2022, over **21.9% of Oregonians** aged 12 and older had a substance use disorder, significantly higher than the national average of 17.0% ([Oregon.gov](https://www.oregon.gov)).

- **Limited Access to Treatment:** Nearly **79.1% of Oregonians who needed treatment for substance use disorders did not receive it**, indicating severe gaps in the state's treatment infrastructure ([Oregon.gov](https://www.oregon.gov)).
- **Rising Overdose Deaths:** Oregon experienced a **22% increase in overdose deaths** between May 2023 and April 2024, totaling nearly **1,900 fatalities**, while the national trend saw a decline (Axios).

These statistics underscore the urgent need for legislative action, such as HB 2506, to expand access to effective SUD treatment and address the ongoing addiction crisis in Oregon.

## Expanding Treatment Access Through HB 2506

Oregon is in the midst of a **devastating opioid epidemic**. The need for **accessible, evidence-based treatment** has never been greater. Yet, systemic barriers continue to prevent many individuals—especially youth and underserved populations—from receiving the care they need.

HB 2506 takes a **decisive step forward** by directing the **Alcohol and Drug Policy Commission (ADPC) and Oregon Health Authority (OHA)** to develop statewide policies that increase the availability of **medications for opioid use disorder (MOUD) in emergency departments, behavioral health settings, and primary care facilities**. This initiative will ensure that individuals facing opioid addiction can receive **immediate, life-saving interventions** and a **clear transition to long-term care in the community**.

## Breaking Down Barriers to Treatment

HB 2506 addresses **several key gaps** in Oregon's current approach to opioid use disorder (OUD) treatment, including:

- **Expanding Medication-Assisted Treatment (MAT):** The bill **removes outdated restrictions on methadone clinics**, allowing them to operate closer to schools and childcare facilities. This eliminates a significant barrier to treatment access, particularly for parents and young people who need care without excessive travel burdens.
- **Low-Barrier Community Clinics:** The bill **creates an enhanced funding model** to support community-based, **low-barrier SUD clinics** that can accept **referrals from emergency rooms (ERs) and emergency medical services (EMS)**. By enabling direct referrals from first responders, this bill ensures that individuals in crisis are immediately connected to treatment, reducing overdose deaths and hospital readmissions.
- **Youth-Specific Treatment Access:** HB 2506 prioritizes treatment for **individuals under 18**, ensuring that youth experiencing opioid use disorder can receive **age-appropriate, medically supported care**, including access to **buprenorphine, methadone, and other MOUD options**.

## The Need for a Comprehensive and Coordinated System

To effectively combat opioid addiction, Oregon must adopt a **Recovery-Oriented System of Care (ROSC)**—an approach that prioritizes **early intervention, seamless transitions to care, and long-term recovery support**. HB 2506 aligns with this vision by:

- **Requiring hospitals to implement consistent screening and referral protocols** for SUD patients, mirroring best practices for other chronic health conditions.
- **Providing training and technical assistance to hospital systems**, ensuring that **clinicians and first responders** are equipped with the latest knowledge on **MOUD prescribing, overdose reversal medications, and referral pathways**.
- **Identifying regional gaps in treatment access**, allowing policymakers to address disparities in **rural and underserved communities**.

## **Building a More Effective and Equitable Treatment System**

Many individuals struggling with addiction encounter **stigma, financial barriers, and logistical hurdles** that prevent them from accessing care. HB 2506 acknowledges these challenges and works to **eliminate unnecessary obstacles** by:

- **Mandating fair reimbursement rates for MOUD providers**, making it financially viable for community clinics to expand services.
- **Establishing referral networks** that **streamline patient transitions from emergency departments to ongoing outpatient care**.
- **Holding coordinated care organizations (CCOs) accountable** for improving **MOUD access and follow-up care**, ensuring that treatment remains available **long after an initial crisis intervention**.

## **The Urgency of Legislative Action**

This bill is **not just about policy—it's about saving lives**. Every day, Oregonians lose their lives to opioid overdoses, many of which could have been prevented with **timely access to treatment and recovery support**.

## **Conclusion: A Call to Action**

HB 2506 provides an **evidence-based, scalable solution** to Oregon's addiction crisis. By expanding **treatment access, removing barriers, and ensuring continuity of care**, this bill **strengthens our state's ability to respond effectively to the opioid epidemic**.

I urge this committee to **support HB 2506** and ensure that all Oregonians—**especially our most vulnerable youth**—have access to the **life-saving care they need**.