Dear Oregon State Legislatures,

I am a physician in Medford testifying in support of HB2506 and in support of the work being done at OHSU's tele-mentoring program (ECHO) and the Clinical Trials Network/Impact Addiction Medicine team who has been instrumental in assisting me with implementing a substance use disorder (SUD) hospital treatment initiative in Medford, Ashland and Grants Pass.

The training and technical assistance I received from OHSU's ECHO and CTN/IMPACT team regarding how best to identify and treat patients with SUD and medication initiation for Opioid Use Disorder (OUD) with treatment protocols and established evidence-based best practices lead to a shift in culture and care for patients. We have seen a demonstrable improvement of patient engagement in treatment and recovery and fostered a more comprehensive approach to OUD and SUD.

As you know, rural Oregon communities and hospitals face unique challenges in addressing OUD including limited access to specialized treatment, shortage of trained physicians and financial constraints. Having a fully staffed addiction consult service is not an option. I was not trained in addiction medicine, yet I have seen addiction play a role in many of the conditions I treat. By participating in this mentorship program with our referral academic center, OHSU and the IMPACT team, this bill would help ensure that rural healthcare providers like me are equipped with the knowledge, resources, and support needed to provide high-quality local care to those struggling with addiction.

I now have a reliable network of experts in Oregon who I can turn to for. Having this network of experts local and stationed in Oregon is essential given that state laws, governing bodies, and professional boards vary across state lines. Other states and regions cannot lend the support and relevant resources I need to provide care for my patients, rural Oregonians.

The tele-mentoring program is not limited to physicians. Our team including nurses, case workers, pharmacists, social work and discharge planners have attended and helped model solutions based on sessions and expert advice. None of this would have been possible without their support.

This bill is vital for the health and wellbeing of our rural communities and will help reduce health care disparities by extending reach to underserved populations. It has done so in my community here in southern Oregon and I would like to see the program build on this positive experience for me and others.

Thank you for your consideration and time. I appreciate the continued commitment to improving healthcare access and OUD/SUD outcomes for all Oregonians.

Sincerely yours,

Erin Brender MD, FACP, MRCP(London)

226 Valley View Drive

Medford, OR 97504