

March 18, 2025

The Hon. Rob Nosse  
The Hon. Travis Nelson  
The Hon. Cyrus Javadi  
Members of the Committee  
House Committee on Behavioral Health and Health Care  
900 Court St. NE  
Salem, OR 97301

**RE: Support for House Bill 2203**

Chair Nosse, Vice Chairs Nelson and Javadi, Members of the Committee,

For the record, I am Eric Sévos, Chief Operating Officer for Cascadia Health. Cascadia Health is a large, comprehensive and integrated behavioral health provider in the Portland metro area, with over 1,000 employees and over 65 locations, providing a wide array of services to those most in need of support in our community. Cascadia is also a member of the statewide association of behavioral health providers: Oregon Council for Behavioral Health.

During the interim, I and two other OCBH members represented providers on a task force focused on improving the safety of the behavioral health workforce. You have heard from advocates this session about the dire need to strengthen the public behavioral health workforce due to several unique challenges:

- Behavioral health provider organizations such as ours primarily serve Medicaid populations with the greatest need. The high acuity, coupled with reimbursement rates that often don't fully account for that acuity, limits provider organization's ability to adequately invest in salaries, infrastructure and safety.
- Despite serving the most acute patients in the public system, Oregon's behavioral health workforce is compensated the least.

While there are several policies this session seeking to address aspects of these concerns, HB 2203 and the -1 amendment attempts to finally invest in safety in an impactful way.

Sections 3 and 4 develop a grant to invest in risk assessments and infrastructure changes. These long-overdue strategies will improve worker safety in the entire behavioral health sector.

This bill also seeks to provide the support necessary for providers to make decisions about who they can effectively serve and how they safely serve individuals with complex behavioral health needs. This will ensure providers have the full history of potential residents in making determinations about their ability to safely serve the individual. The -2 amendment also, importantly, clarifies that providers can, for the safety of their staff, reasonably limit the access of residents to weapons and substances like alcohol and drugs.

This work was not easy and will not be implemented without sustained efforts and collaboration. Due to our devastating state hospital capacity issues and our state's acute addiction crisis, providers are balancing the growing requests to serve increasingly complex patients with worker safety, all while held to a state-determined Medicaid reimbursement rate.

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We look forward to coming back to the sponsors and the chair to ensure implementation of this bill is workable within those confines.

We are also working with Representative Nelson and AFSCME in seeking an amendment to better reflect the recommendations of the task force which would require staff training to happen within the first 90 days of their employment. With this change, we look forward to supporting the legislation.

Thank you for your consideration, and with the forthcoming amendment, we urge your support of HB 2203.

Eric Sévos  
Chief Operating Officer  
Cascadia Health