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On Behalf Of:
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Measure, Appointment or Topic: HB2056

The data still indicates that 20% of the population consumes 80% of the services or costs, give or take a few percentage points. The populations covered in HB 2056-1 represents a portion of Oregonians that need a high level of support. The preponderance of services required to address their needs are not, as commonly believed, billable. Even if they were, in a capitated environment, it would still require Community Mental Health Programs to pull funding from one core service area to support services for these Oregonians. In Columbia County we are building for the future, where our citizens can be served locally. These types of facilities/services are not constructed/developed overnight and even when they are completed they will need additional funding. Hopefully, when fully operationalized the savings realized from a reduced population at OSH will help justify the increased costs at the local level. However, until then, there is a need to get people with intense needs out of OSH and back into the community. Columbia Community Mental Health is not in a position to pull funds from one core service area to support the high intensity needs of people coming out of OSH or preventing these Oregonians from going to OSH. We either restrict access to care to less intense, but still deserving Oregonians, or we risk public safety and health by overstretching our resources. Oregon needs to choose a path. We increase services to the 20% of Oregonians with intense service needs and modify access allowances for the others, or we distribute targeted funding such as proposed in HB 2056-1 to help reduce the strain on the system. The wild card in all of this is the workforce, no amount of money is going to fix the problem if no one wants to do this incredibly hard work.