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On Behalf Of: OR Cn for Retired Citizens United Srs of OR
Committee: Joint Committee On Ways and Means Subcommittee On Human Services
Measure, Appointment or Topic: SB5526

Testimony
Joint Ways and Means Committee
Aging and People with Disabilities/DHS Budget

I'm Dr. Jim Davis representing United Seniors of Oregon and Oregon State Council for Retired Citizens. We want to express our strong support for Oregon's nationally-acclaimed senior and disability services system and preventative community-based mental health services.

For 4 decades, Oregon has built a senior and disability service system that is considered a national model for in-home and community-based care, providing the most independent living environment for seniors and persons with disabilities through "continuum of care" options. Community-based care has been a cost-effective investment that helps respond to the physical and emotional problems of seniors and people with disabilities, allowing them to remain in their own communities and live independent lives. It has saved the state hundreds of millions of dollars in health care costs related to hospitalization and institutionalization.

We support the Governor's Recommended Budget around APD, which will maintain important statewide and local senior and disabled services at continuing levels. We hope the Legislature will continue to make funding of senior and disability services a top priority.

We also want to also strongly emphasize our support for senior and disability behavioral health. Seniors and people with disabilities are at high risk of developing behavioral health difficulties such as depression, anxiety, sleep disturbances, obsessive concerns about health, and mild paranoia, often exacerbated by the effects of complex medical problems, multiple medications and the use and abuse of alcohol and prescription medications.

We support the inclusion of Policy Option Package 560 which will remove the archaic exclusion that requires APD to deny eligibility to long term services and supports for individuals with a primary care need of mental health or substance abuse, many in the community mental health system. They account for nearly half of APD denials and rarely receive OHA mental health services.

However, this will only achieve half of the battle we advocates have been waging for

decades, namely for ODHS and the Oregon Health Authority (OHA) to create a more seamless path for OHA clients to be able to access APD long term care and supports without disruption of their OHA services and for APD clients to access OHA mental health and drug and alcohol treatment services while still receiving APD/ODHS long term care services and supports. There should be no barriers for both OHA and APD clients to receive a full array of community-based long term care and behavioral health services that they need and are eligible to receive.

In addition, advocates have fought very hard for the limited amount of APD/ODHS funding for treatment of preventative, more moderate mental health issues through a cost-effective vehicle that helps keep seniors and people with disabilities emotionally healthier and able to lead more productive lives. As a result, we are disappointed that current APD Senior/Disability Mental Health Projects will be phased out, especially as seniors and people with disabilities continue to face serious, on-going barriers to accessing appropriate public and private behavioral health services. The Projects, while currently limited, have, in the past, provided a vehicle for creative community and facility approaches for behavioral health within the senior and disability communities, including innovative programs such as the HOPE, PEARLS, and Healing Pathways, as well as information and referral-related services. There had been strong partnerships in local communities with area agencies on aging and disabilities, Centers for Independent Living, and Aging and Disability Resource Centers.

We urge you to support the maintenance and expansion of Aging and People with Disabilities/DHS services and the APD/DHS senior-disability preventive behavioral health services.