

Tina Kotek, Governor

**DATE**: May 13, 2025

**TO**: The Honorable Representative Ben Bowman, Chair

House Committee on Rules

FROM: Margaret Cary, MD, MPH

Medicaid Behavioral Health Medical Director

Oregon Health Authority

SUBJECT: Testimony in Support of House Bill 3835 -A5

Chair Bowman, Vice-Chairs Drazan and Pham, and Members of the Committee:

Thank you for the opportunity to provide written testimony in support of HB 3835 -A5. Medicaid is responsible for ensuring that all people enrolled in the Oregon Health Plan (OHP) have access to high quality medically necessary health care. Local care is prioritized, but when that is not available in the state, we are obligated to allow OHP enrolled members to access out of state care. Children in child welfare custody, as OHP members entitled to the Early and Periodic, Screening, Diagnostic, and Treatment (EPSDT) benefit, warrant the same access to the specialty medical care that is medically necessary for them, including when that care is not available in Oregon. HB 3835 -A5 establishes safeguards for out of state healthcare while also allowing access when it is medically necessary and appropriate.

The safeguards for out of state care that HB 3835 -A5 establishes are focused on strengthening oversight and verifying safety. These include:

- Requirement that there is no suitable local option: Section 36 (7)(a)(A)(i).
- Court Approval: required for all out-of-state health care: Section 36 (7)(c).
- License Verification: confirmation that the provider is in good standing with their licensing authority: Section 36 (7)(d).
- Oregon Licensing Specialist Inspections: prior to admission to an out-of-state health care facility, mandatory in-person inspection by state licensing staff to verify the safety and alignment with Oregon licensure standards: Section 36 (7)(e).

- Director Approval: all Out-of-state health care must be approved by each the Director of Child Welfare and the OHA Medicaid Director or their designee: Section 36 (7)(f).
- Establishment of quality assurance and oversight standards: Section 36 (7)(h).
- Multidisciplinary team monitoring of the child's health progress while out-of-state: Section 36 (9)(b).
- In-person visits with the child at least every 15 days: Section 36 (9)(c).
- Child Rights education and support: children must be informed of their rights and know how to report violations: Section 36 (9)(d).
- Additional safeguards for children with intellectual or developmental disabilities: Section 36 (8).

Thank you again for the opportunity to provide written testimony on this very important legislation.

Sincerely,

Margaret Cary, MD, MPH

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