## AOC ASSOCIATION OF OREGON COUNTIES

February 5, 2020

OREGON
COUNTIES
ASK FOR
YOUR
SUPPORT IN
FUNDING
COMMUNITY
MENTAL
HEALTH
PROGRAMS

Joint Committee on Ways and Means Subcommittee on Human Services Oregon 2020 Legislative Session

RE: Support for Release of \$9 million of 2019 Special Appropriation Funds for Community Mental Health Programs

Dear Co-Chairs Beyer, Nosse and Members of the Subcommittee:

We respectfully request that the 2020 Legislature release \$9 million of special appropriation funds to support community mental health programs.

As part of HB 5050 (Christmas Tree Bill) at the end of the 2019 Session, the Legislature appropriated \$6 million to partially address an initial \$15 million cut made to community mental health programs as contained in the Oregon Health Authority (OHA) budget, HB 5525. This reduction was linked to an apparent decline in the mandated caseload of civil commitment services. The 2019 Legislature also passed a budget note to create a workgroup to study this issue and earmarked a \$9 million special appropriation to be available to fill the remainder of this funding hole in community mental health programs.

The workgroup that met to explore this issue has identified several issues with the current caseload forecasting model. More work needs to be done to ensure this methodology accurately captures all populations that community mental health programs are mandated to serve. In the meantime, our communities need adequate support to respond to the incredible need for behavioral health services.

The release of this \$9 million will help restore critical safety net services for individuals suffering from serious mental health issues who are at risk of civil commitment, justice system involvement, homelessness and potential placement in the Oregon State Hospital (OSH). The release of this special appropriation would support the continuing work being done by the budget note workgroup to realign the Community Mental Health Caseload Forecast and to establish more reliable data mechanisms.

Without restoration of these funds, our community mental health system will be weakened at exactly the same time we are launching CCO 2.0 and raising hopes of improved behavioral health-physical health integration.

We appreciate the opportunity to be part of the budget note workgroup with OHA and other state partners on this issue and remain committed to developing better data collection initiatives. We strongly believe that the \$9 million to support community mental health programs should be restored









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without any further delay. Community mental health services act as a primary tool to divert people from having to go to the OSH.

It is also important to note the 60/40 match (or even higher match) of federal funds that comes with community-based care, as opposed to the 100 percent general fund obligation that comes with OSH care. We look forward to updating the civil commitment caseload formula to ensure that community-based care is incentivized.

Thank you for the opportunity to provide testimony on this important issue.

Andy Smith

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