

Oregon Health Authority Media Briefing, Sept. 20, 2022

Tera Hurst, Executive Director, Health Justice Recovery Alliance Steve Allen, Behavioral Health Director, Oregon Health Authority Sabrina Garcia, Tri-Chair, Measure 110 Oversight and Accountability Council Basilio Sandoval, Substance Use Disorders Program Manager, Centro Latino Americano

Tera Hurst

Thank you, Erica,

Good morning. My name is Tera Hurst and I am the Executive Director of the Health Justice Recovery Alliance.

We are the statewide advocacy organization fully focused on implementing the will of the voters when they passed Measure 110: to make sure that in every part of the state we have more treatment, more housing, more lifesaving services, and ultimately, more hopeful futures for people in our communities who struggle with substance use.

I'm excited to share this morning that all funds for Measure 110 Behavioral Health Resource Networks (BHRNs) have been approved and are being released to providers across the state. These funds will **expand critical services like overdose prevention services, low-barrier treatment, supportive housing, peer and mentor support, and more.** The Oregon Health Authority reported that in only six months, with early Measure 110 funding, providers were able to help more than 16,000 people to receive care.

To give a few examples — the HIV Alliance reversed over 500 overdoses in six months; Bridges to Change was able to save their Wasco County recovery house *and* use funds to expand their presence in The Dalles. Bridgeway Recovery Services was able to hire more peer recovery coaches, a vital support for people in recovery that is typically not covered by insurance. The Miracles Club was able to double their staff and hire more peer mentors to support their outreach efforts to the African American community. CORE, an organization that serves youth in Eugene, was able to increase their street outreach efforts from four times a month to four times each *week*. They were also able to expand outreach operations to serve more people in rural Lane County.

These things and more happened thanks to an initial \$30 million investment; just imagine the impact this remaining \$265 million investment will have.

• Soon, every community in all 36 counties across Oregon will have access to a full range of services to help meet people where they're at, address their trauma,

and provide the vital supports needed to heal and recover — closer to home, in that person's first language, and by someone who understands and shares their culture. Thanks to Measure 110, no one will be left behind.

Measure 110 is the first step in providing the communities most traumatized by the war on drugs with the tools they need to heal. We've spent more than half a century putting people in prison rather than offering them treatment. We've seen just how ineffective, broken and cruel this previous system was:

It was a system that ripped apart families.

It was a system that systematically targeted people of color, arresting and giving them harsh sentences at disproportionate rates when compared to their white counterparts, even for low-level, nonviolent drug offenses. ... Even though white people and people of color use drugs at the same rate in Oregon.

It was a system of shame and stigma, of wait lists and being turned away for help because you didn't have the right kind of health insurance, or you couldn't pay, or because there were simply no beds and the wait list was long.

Oregon voters recognized that it was time for a more effective approach. We passed Measure 110 into law by an overwhelming margin in 2020, and two years later new, independent polling shows that Oregonians still believe that drug use is a healthcare issue, not a criminal one. And they affirmed that they believe Measure 110 is how we get there. Measure 110 is just getting started, and Oregonians want Measure 110 to remain in place.

Today, we celebrate the massive community investments that this law is making possible. We celebrate how Measure 110 is creating a reality where being in crisis no longer means going to jail, but instead getting connected with support.

We celebrate that thousands of Oregonians struggling with drug use will now be able to get help without fear of arrest, and without fear of criminal records that make it harder — even years into recovery — to secure housing, employment, education and more.

We're creating a system of care that's rooting for you instead of against you.

Joining me today to tell you more about how we're working to fulfill the promise of Measure 110 are:

- Steve Allen, Behavioral Health Director at the Oregon Health Authority, who will
 update you on OHA's spending schedule to transform Oregon's behavioral health
 system.
- Sabrina Garcia, a Tri-Chair on the Measure 110 Oversight Accountability Council, who will describe how the lived experience of council members has guided its decision-making.

 And Basilio Sandoval, Executive Director of Centro Latino Americano, a Lane County culturally-specific, community-based organization that works to empower Latino families. Basilio will share how Measure 110 funding is enabling them to scale up programming, provide housing for more community members in early recovery, and increase the reach of its recovery mentor program Lane County.

Today, I am especially proud of my vote for Measure 110 and I hope that you are too. Our state is finally taking real steps to invest in services that save lives. As a person in long term recovery myself who has personally lost people to addiction, this is the first time in a long time that I've had hope for Oregon's recovery landscape. I look forward to everyone working together so that we can make the program even stronger and ensure that Oregonians are accessing the right care at the right time and in the right setting for them

Now I'd like to turn things over to Steve Allen who can talk about where Measure 110 fits within the larger behavioral health investment strategy in Oregon.

Steve Allen

Thank you, Tera.

I am Steve Allen, Behavioral Health Director with the Oregon Health Authority.

I want to echo what Tera said: We've reached a true milestone: Measure 110 funds are in the hands of local communities. Now is the moment that Measure 110 truly begins. This is a turning point for Oregon and for our nation.

Earlier this month OHA announced the completion of funding awards for the last of the 44 Behavioral Health Resource Networks established under Measure 110. These service networks now exist in every Oregon county. They offer a comprehensive array of community-based and culturally specific services for people seeking treatment for drug use and substance use disorders without regard to their ability to pay.

OHA is fully committed to working with the Oversight and Accountability Council, network providers and our community partners to fully see through and implement Measure 110.

Including the initial Access to Care grants, the Measure 110 rollout has now totaled more than \$302 million. This funding offers local providers a new, substantial, and flexible source of funding that has never previously been available.

The road to get here hasn't been easy. Oregon is the first state to try such a bold and transformative approach to the nationwide substance use crisis as Measure 110.

Until now, much of the public attention on Measure 110 focused on the difficulties encountered during the early phases of implementation and in getting money out the door to community providers.

There was a lot of learning – on the fly – during a time that the COVID-19 pandemic was depleting Oregon's behavioral health care workforce, diverting critical resources and driving a spike in demand for these services.

We understand and acknowledge the frustration this caused within our communities, among service providers and among people seeking behavioral health services.

But when you do something the first time, you're going to make mistakes and often learn hard lessons. At OHA, we've learned that we need to give our partners on the Oversight and Accountability Council more support, speed the distribution of funding, and be ready to give more technical assistance toward Measure 110 implementation.

Yet, despite these ups and downs, we've reached this pivotal moment: Measure 110 is launching and will provide critical supports and services for people, families and communities.

Supporting these networks and helping them save lives is a top priority for OHA.

Funding Measure 110 is a key part of OHA's broader work to fully transform our behavioral health system to better serve the people of Oregon.

And the latest update to OHA's Behavioral Health Investment report reflects the speed in which funding is now flowing to meet these needs.

By the end of this month, OHA will have spent or obligated \$845 million of the historic \$1.35 billion the legislature appropriated for the 2021-2023 biennium to transform the behavioral health care system. OHA spent or obligated a total of \$322 million in the last quarter.

We will continue to push out remaining funds with a key focus on moving more workforce incentives, getting federal approval on new provider rates for behavioral health services, and providing more resources for new behavioral health housing and treatment beds.

We expect to spend or obligate an additional \$291 million by the end of 2022, which would mean over 84% of the \$1.35 billion appropriation.

Let me say that again: By the end of this year, OHA will have spent or obligated 84% of the \$1.35 billion the legislature appropriated for the 2021-2023 biennium to transform the behavioral health care system.

In addition to Measure 110, that money is funding these vital priorities:

- Improvements to our statewide crisis care and support system.
- Treatment and housing support for people who are not competent to face a criminal proceeding due to the severity of their mental illness.
- Expanding residential settings for people with serious and complex behavioral health conditions.
- Funding to retain and replenish the behavioral health workforce.
- Funding to coordinate access to career development, encourage workforce diversity and incentivize culturally responsive and linguistically specific services.

We still have a lot of work to do.

Measure 110 will continue to be a learning process. The behavioral health system continues to recover from the COVID-19 pandemic.

Measure 110 will support a more effective and coordinated strategy, but it won't solve all our problems overnight.

Methamphetamine and fentanyl pose threats to too many lives. Too many people need housing. But for far too long, we've relied on law enforcement as our primary response to these problems. And the results of that have been a complete failure.

But with Measure 110, Oregon is once again leading the nation by forging ahead with an innovative, community-driven approach.

Now we will have more resources for harm reduction, treatment and other services that will give people seeking treatment for drug use and substance use disorders, the services and support they need to live safer and heathier lives.

It's going to take time before we see dramatic changes in quality of life, but this is a critical first step.

Now we have more than hope.

We are building a new, better coordinated, locally driven system, backed with resources to make treatment and other supports available for more people.

This is a game-changer.

Let me conclude with some final words about Measure 110.

I'm proud of the work that's been done, and I want to express my profound gratitude for the hard work and dedication of the Oversight and Accountability Council along with our community partners, OHA staff and leadership in bringing Measure 110 to realization. And now let me pass it to our Council Tri-Chair Sabrina Garcia.

Sabrina Garcia

Good morning. My name is Sabrina Garcia. I am an enrolled Tribal member of the Klamath Tribe. I am a Tri-Chair for the Measure 110 Oversight Accountability Council. I am a Prime Plus Certified Recovery Mentor 2 at Transformations Wellness Center, a substance use treatment disorder program, that provides harm reduction and peer support services in Klamath County.

Like many of my colleagues on the council I have lived experience in substance use. The council is a highly diverse group of 22 community leaders including people who have lived experience with substance use or substance use disorders, medical professionals, and Tribal Representatives.

This shared lived experience perspective was valuable in shaping our decisions around Measure 110.

For those who may not know, the role of the council is to determine how the grant funds are distributed, and to ensure that the most effective services are being funded. OHA provides support and assistance.

One of our tasks was to come up with a funding formula with weighted factors that considered for each county:

- The population of Medicaid patients,
- The houseless population,
- The number of drug arrests, and
- The number of overdose deaths.

We also selected providers to form Behavioral Health Resource Networks.

Providers in the networks, through shared agreements, will coordinate care to offer culturally responsive and linguistically specific services that include:

- Screening and comprehensive behavioral health needs assessment,
- Individual intervention planning, case management and connection to additional services,
- Low-barrier substance use treatment.
- Peer support, mentoring and recovery services,
- Housing services,
- Harm reduction intervention, and
- Supported employment.

There is at least one network in every Oregon county.

In May, the council approved the first network located in Harney County, and on August 31st the final network was approved in Jackson County.

In our decision-making, the council worked diligently to honor the intent of Measure 110, to provide low-barrier treatment and support services in a centralized way.

We prioritized service delivery to communities that were the focus of the creators of Measure 110 – people most impacted by the war on drugs – and African American, Black, Latinx and all people of color.

Prior to Measure 110, thousands of people were not able to get the support they needed.

The coordinated networks will make sure services are available through trusted community providers. This will lower barriers and enable more people to obtain the treatment and support they so badly need.

Now that the funding process is complete, the council has approved processes for monitoring grant recipients and ensuring that services are provided in an efficient way.

These include:

- Requiring grantees to periodically report service data and fiscal data.
- Requiring grantees to submit their service delivery policies and procedures.
- Performance audits and reviews by Oregon's Secretary of State.
- A requirement for OHA certification of community health workers, peer wellness specialists and peer support specialists working within the networks.
- And a similar requirement for outpatient substance use disorder treatment and recovery programs.

We know that there was a lot of disappointment about the early pace of our work. I share that disappointment.

But the reality is, you can't fix a system this broken in just 18 months.

What we can do over the next 18 months is support these networks by making sure they operate as intended. And make sure there is a stable source of funding.

I deeply believe in the promise of Measure 110 and the work that we are doing to reform Oregon's system of treating substance use and substance use disorder and supporting those seeking help.

I am committed to ensuring that funding remains available to complete this important transformation that will lead to a compassionate and caring system that will help break the chain of Substance use disorder, support those who are who are still using substances, and provide people seeking help with the resources they need to become self-reliant.

And with that, I'll pass things along to Basilio who will tell us how Measure 110 funding is already making a difference in Lane County.

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Basilio Sandoval

My name is Basilio Sandoval. I'm the Manager for the Substance Use Disorders Program at Centro Latino Americano, a non-profit organization serving Latinx and immigrant families in Lane County.

The mission of Centro Latino Americano is to support the lives of Latinx and immigrant community members by creating a safe space that fosters leadership, education, wellness, and connection. We envision an equitable and thriving intercultural community.

Our organization provides Latinx and immigrant families with a wide variety of services. These include substance use disorder treatment, family literacy programs, community gardens so families can grow their own organic food, support for people to start small businesses, and more.

We were thrilled to learn in August that we had been approved for Measure 110 funding.

We are one of three Behavioral Health Resource Networks serving Lane County, and we are the only Lane County network that is culturally specific in serving the Latinx community. Being part of this network allows us to expand our services beyond our previous capacity through a steady source of revenue.

Through Measure 110, we are receiving approximately \$4.5 million.

The money we are receiving will make it possible to:

- Expand our recovery and mentoring programs.
- Provide free outpatient treatment and mental health services to more people.

- Establish community partnerships through a collaboration with HIV Alliance. Through this collaboration we can expand the scope of services from testing and education, into harm reduction, moving them further down the path to recovery.
- Help clients meet their basic needs so they can focus on their recovery.
- Expand access to housing in partnership with Willamette Family.
- Even pay for gasoline for the people we serve, so that lack of access to transportation is not a barrier to accessing critical support services.

The Measure 110 money is especially important because the hard reality is that our organization is the only Spanish language provider of these services in Lane County.

And – maybe more significantly – Measure 110 makes it possible for us to provide these services free of charge.

This allows us to reach people we could not serve previously, because lack of insurance was a barrier. It also allows us to extend these services and support to their families. This is key because supportive family members can influence recovery behavior.

Every single staff person in our substance use disorders team is fully bilingual, and because of this, we can provide more equitable services in our community.

Also, because of this funding, we will be able to move our recovery treatment services to a bigger space where we can make our essential services available to even more people. This will enable us to hire more staff. We will now have the resources to keep four peer support specialists. Something we could not otherwise afford.

In addition, the Measure 110 dollars will allow us to provide wraparound services to every client who walks through our doors, helping them access peer support specialists, mental health therapists, substance disorder counselors and connecting our clients to additional resources in the community.

Our new building will bring together services – that were previously scattered – at a single location. We will be able to provide a confidential, safe space for our clients and host recovery activities.

Our priority is ensuring safety, confidentiality, and success for our recovering clients and their families.

Thanks to this Measure 110 funding, and the power of collaboration that Lane County is known for, we will expand services for a population that is often overlooked, but equally deserving of meaningful care and treatment services.

In conclusion, Measure 110 funding will forever change the system of care in Lane County by expanding services for a population that has been historically underserved.

We can now provide meaningful and responsive care that will make it more possible for more people to achieve a life-changing recovery.

Thank you for letting me tell our story today.

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