

Date: September 16, 2025

To: Governor Tina Kotek

Senate Interim Committee on Human Services

House Interim Committee on Early Childhood and Human Services Senate Interim Committee on Early Childhood and Behavioral Health

Senate Interim Committee on Education House Interim Committee on Education Senate Interim Committee on Health Care

House Interim Committee on Behavioral Health and Health Care

Senate Interim Committee on Housing and Development House Interim Committee on Housing and Homelessness

Joint Interim Committee on Addiction and Community Safety Response

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2025 System of Care Advisory Council Report

The System of Care Advisory Council (SOCAC) was established by the Oregon Legislature in 2019 to improve the effectiveness of state and local systems of care that provide services to youth, ages 0-25. The SOCAC provides a centralized and impartial forum for statewide policy development, planning, and funding recommendations.

This Legislative Report fulfills SOCAC's requirement to file an annual report to the Governor and Legislature, describing recommendations for legislative and agency action, barriers to access to children's services and supports, and how the council meets its goals. This report covers August 2024 through August 2025.

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Recommendations for Legislative Action

The passage of HR 1 in July, 2025 is expected to significantly reduce Oregon's state budget, as well as reducing access to Medicaid covered services, higher education loan funding, and nutrition supports like SNAP. HR 1 also creates significant administrative changes which are expected to require additional staffing and technology costs to ensure compliance. SOCAC expects these benefit cuts and increased expenses to cause significant disruptions to basic state-funded services and supports which many Oregonians rely upon for their health and well-being. It is within this context of uncertainty and

potentially devastating cuts to Oregon's safety net services, including services for vulnerable children, that the following report is provided.

The 2025 Legislative Session invested in children's services and supports, held meaningful discussions about the structure of Oregon's behavioral health policies, and increased understanding about how Oregon's policies impact on the ability of children and families to access care. As the provisions of HR 1 go into effect over the next six years, Oregon's Legislature must improve collaboration and partnership with executive branch agencies to protect and defend programs and services for children and youth, including behavioral health, intellectual and developmental disability (I/DD) supports, public education, and juvenile justice.

Due to decades of underfunding and the complexity of Oregon's child serving agencies, there are more youth with high-acuity treatment needs than would exist if community-based treatment services were easily accessible. As a result, some youth have much higher acuity than they otherwise would, and Oregon's Legislature has a critical role to play in resolving policy barriers to ensure youth and their families have access to the care they need, in their homes and communities, as well as in treatment facilities when appropriate. In the context of HR 1, this work should focus on aligning systems and combining duplicative programs to protect supports which are critical to the well-being of Oregon's children. This will require a rebalancing of investments, to set a 'floor' for state-funded services that provides basic supports for ALL residents of Oregon, ensuring no cuts are made to life-sustaining services which would cause significant harm if removed from the array of benefits.

Similar to the 2024 Legislative Report, the SOCAC strongly recommends **the priority for the 2026 Short Session should be to protect and defend existing services,** with a special focus on eliminating duplication to prevent the loss of existing services and providers.

Specific recommendations for agency or legislative action are highlighted with a red arrow.

<u>Recommendation 1:</u> Ensure children and youth are diagnosed and treated as early as possible to reduce acuity across the system.

<u>EPSDT</u>: Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) is an Oregon Health Plan (OHP) benefit that requires all OHP members up to age 21 are provided age-appropriate medical exams, screenings, and diagnostic services, and that any medically necessary treatments for physical, dental, developmental, or mental health conditions be provided in response to those exams.

The Legislature should direct the Oregon Health Authority (OHA) to require Coordinated Care Organizations (CCO) to ensure all EPSDT assessments are provided to each child and youth on OHP, and every support or service identified as medically necessary is provided, regardless of whether providers exist in network. This change can be made via the upcoming procurement process for renewing CCO contracts, including a process for appeal if the CCO is non-compliant.

Recommendation 2: Medicaid Fairness

The Legislature should direct OHA to implement parity between Fee-For-Service (Open Card) Medicaid benefits and benefits for those OHP members who are enrolled in a CCO as well as those in Child Welfare and Oregon Youth Authority (OYA) custody. Much of this work can be done at the policy level, without significant investment of state funds.

Recommendation 3: Mental and Behavioral Health Workforce

SOCAC urges the Oregon Legislature to review the January 2025 Report titled <u>Stabilizing Oregon's Public Behavioral Health System</u>. Many low-cost recommendations from that report can be implemented within current budget constraints, if combined with policy changes that allow a broader array of providers including the certified peer workforce to provide services to more people.

- Implement the recommendations on Page 16 of the report linked above to increase the certified peer workforce and the licensed workforce that supports them.
- Ensure statute and rule support the expanded use of peer-delivered services in schools, residential treatment settings, and community-based services.

Peers are a low-cost, culturally specific workforce who provide proven results. In addition, youth and families with lived experience consistently recommend increasing access to peer-delivered services and the licensed workforce that supports them. This is a low-cost way to expand access to services without creating any new programs or funding stream.

Maximizing the use of peers in every mental and behavioral health setting across the state, ensuring they are eligible for Medicaid billing, and providing up-skill training at low or no-cost, will significantly reduce existing strain on the children's system.

Recommendation 4: Use previously commissioned Reports & Recommendations to guide Legislative action

SOCAC urges the Oregon Legislature to read and take decisive action based on the following reports, upon issuance.

HB 4086 Reports: Two important reports are scheduled to be issued on September 15, 2025. The HB 4086 Committee on Children Exhibiting Complex Sexual Behavior will provide recommendations for improving access to services for children with problematic sexual behaviors who have not committed criminal acts. The HB 4086 Jurisdiction Committee will provide specific recommendations to ensure the scope of Oregon Department of Human Services (ODHS) child abuse investigations is based on national best practices, protects safety for children and reduces duplication/waste within the system.

➤ The Legislature should hold hearings during Legislative Days on both reports and commit to taking specific actions outlined in each report in accordance with national best practices during the 2026 Short Session.

LPRO's Joint Taskforce on Regional Behavioral Health

Oregon's Legislature should review the May 2, 2025 Report and consider regionalizing funding to reduce administrative layers, funding challenges, and increase collaboration across entities. Regionalization also helps increase access to key services by increasing the population base and decreasing duplication within the region.

Key findings of the report linked above are listed below. SOCAC urges swift legislative action in alignment with this report:

Funding decisions in Oregon's behavioral health system are made based on a variety of factors specific to the funding source and without consistent collaboration across these entities. While there is care coordination at the ground level, at the systems level there is a need to improve transparency and collaboration to support efficient funding across the system.

- Tools or information that could support "gap analysis" as a lens for planning and decision-making about behavioral health investments across funding conduits:
 - Shared understanding of which core services ought to be maintained as part of the delivery system
 - Tools to monitor ongoing existing capacity and forecast future demands/gaps for those services
 - Clarification on who pays first, last, etc. when services require braided or blended funds
 - A clearinghouse for information about entities receiving public funds from various conduits

HB 4002 Report: In 2024, Oregon's Legislature directed the Alcohol and Drug Policy Commission (ADPC) to study of barriers to and best practices for (a) youth accessing opioid use disorder treatment; and (b) increasing access to medications for opioid use disorder treatment. The <u>initial HB 4002 report</u> included short-term and long-term preliminary recommendations. The final report is due in September 2025, and the SOCAC strongly urges legislative action on the recommendations included in that report.

HB 4151 Report: In 2024, Oregon's Legislature directed SOCAC to convene a workgroup on the youth behavioral health workforce with HB 4151. The final report from that workgroup will be issued to the Oregon Legislature by December 15, 2025. SOCAC urges Oregon's Legislature to take the actions recommended in that report to increase access to peer delivered services and highly qualified early intervention to reduce overall acuity in the System. SOCAC is interested in briefing the Legislature once the full report is released.

System of Care Strategic Plan: The SOCAC's main task is to create a statewide Strategic Plan for the Children's System of Care. The next four year plan is due to be released January 2, 2026. The plan will include goals, strategies, action steps, and metrics to measure progress. More information about the System of Care Strategic Plan is included at the end of this report.

How the Council is Meeting its Goals

The <u>2024 SOCAC Legislative Report</u> suggested that OHA should revise the In-Home Intensive Behavioral Health Treatment (<u>IIBHT</u>) and Mobile Response and Stabilization (<u>MRSS</u>) rules to allow for increased access to these community-based services across Oregon. Both rulesets were updated to increase flexibility in the staffing and provision of these evidence-based programs. **SOCAC celebrates OHA's commitment to implementing these policy change recommendations**, and thanks our legislative and agency partners for working together to improve access for youth across Oregon.

The same 2024 report recommended specific funding investments from Oregon Legislature. We thank Oregon's Legislative leadership and the Governor's Office for the successful allocation of the following state expenditures, as recommended by SOCAC:

- > \$10 million for expanding residential treatment services for youth with co-occurring mental health and substance use disorders. These are one-time capacity investments.
- \$7 million for OHA to collaborate with SOCAC and the ADPC to integrate substance use disorder (SUD) treatment for youth into the IIBHT model.
- \$6 million to support School-Based Health Centers in providing mental health and SUD screening and prevention.

- \$1 million for culturally responsive suicide prevention.
- > \$1 million to support OHA's implementation of <u>SB 1557</u> and support SOCAC's staffing model.

One of the core values of the System of Care philosophy is building meaningful partnerships with families and youth in the delivery of services and the development of policy. In the past year, SOCAC supported the creation of a Youth Council, co-chaired by the two appointed youth with lived experience on the SOCAC, and a Family Advisory Committee, co-chaired by the two parents with lived experience on the SOCAC. Both committees have engaged deeply in policy development, strategic planning, data gathering, and improving the ability of providers and agencies to partner with people with lived experience for meaningful system improvements.

SOCAC also partnered with the ADPC to create a shared youth advisory body, called the Oregon Youth Addiction Alliance, which is crafting a Youth Substance Use strategic plan to be incorporated into the SOCAC and ADPC's separate strategic plans.

SOCAC has been working with other advisory bodies to clarify scope and roles, improve effectiveness, and decrease duplication. We supported the development of the Governor's Behavioral Health Initiative Subcabinet and continue to partner in resolving cross-system barriers for high acuity/complex children and youth. We have built strong connections to the <u>Governor's Foster Care Advisory Commission</u> to develop recommended strategies to eliminate the practice of temporary lodging in the Child Welfare System. We have partnered with <u>Youth Development Oregon</u> (YDO) to align our strategies for cross-system partnership and amplify YDO's work on youth re-engagement in education and career training. To further this work, SOCAC developed a <u>cross-agency communication tool</u> to help identify, streamline, and align the work of related advisory bodies.

Over the past 12 months, SOCAC has engaged in quarterly conversations with Oregon Health and Sciences University (OHSU) Doernbecher, ODHS, Governor's Foster Care Advisory Commission and several family members to review requests for voluntary custody agreements, what they entail, and who is using those agreements. Once the data is received, we will focus on developing processes that will not require Child Welfare or OYA involvement in order to obtain placement for necessary treatment.

In this reporting period, SOCAC published one report: <u>The SOC Data Assessment</u>, which provides an analysis of what services for children and youth exist in Oregon, who is accessing those services, and outcomes from those services. This report is one of the foundational documents used to craft the 2026-2029 System of Care Strategic Plan.

SOCAC continued oversight of \$4.8 million in grant funding provided to local Systems of Care and the nine Federally Recognized Tribes in Oregon. Funds are being utilized to increase youth and family engagement, advance DEI related initiatives, address locally identified system barriers, and distribute agile funding to meet emergent social needs of system involved youth and families. Final outcomes of this funding will be reported in January, 2026.

SOCAC has significantly improved collaboration between agencies that serve children and families who use state-funded services and supports to meet their needs. According to the SOC Data Dashboard, 660 people under age 26 were multi-system involved in 2024, down from 762 in 2020. **Between 2020 and 2024, the number of young people served by behavioral health and I/DD systems trended upwards and the number of children involved in child welfare decreased.** Interestingly, during that time period, the number of Oregon youth with juvenile justice involvement fluctuated from a high of 4,831 to a low

of low of 3,114 in November 2021. At the end of 2024, the number of youth with juvenile legal system involvement was 3,696.

When evaluating the effectiveness of our child-serving system, SOCAC looks at the number of children whose needs are met by low-intensity, community-based services. At first glance, it would be easy to think that Oregon should strive to reduce the number of children using multiple systems to zero, but that would be unwise. Imagine a child with mental health challenges, who lives with an intellectual or developmental disability, whose parents are not safely caring for their child. SOCAC would never advocate that Child Welfare should not become involved because this child is already involved in two other systems. As SOCAC works to improve collaboration between Oregon's child serving systems, the State's ability to provide the appropriate and responsive services, with effective coordination to ensure good outcomes will improve. In the meantime, it is critical to remember that every number in these reports represents a whole person, with goals and hopes and strengths and challenges, and our work is to create a system that supports and honors every child in Oregon.

Remaining Barriers to Access to Services and Supports

SOCAC is crafting the 2026-2029 Children's System of Care Strategic Plan, to be released in early January 2026. Part of the strategic planning process includes assessing current services across Oregon's child serving system, understanding gaps in services, and seeking solutions for those gaps. This process included quantitative and qualitative data strategies including using Medicaid and insurance claims data, the Data Dashboard, focus groups and other qualitative methods. While the Office of Reporting, Research, and Analytics (ORRAI) is a primary source of data about the System of Care, their internal capacity to meet SOCAC's data requests has been a challenge due to lack of funding and adequate staffing. For information on specific barriers to care that have been escalated to SOCAC for state-level resolution, please visit our SOC Barrier Reports webpage.

In May of 2023, SOCAC released the <u>Safety Workgroup Report</u>, which describes how Oregon's child serving system can become a trauma-informed service environment through specific policy and practice changes. SOCAC continues to partner with parents, youth, providers, and agencies to improve access to services and supports, and increase positive outcomes for youth, in the manners described in the report. State policy changes remain necessary to fully implement the vision outlined in this report.

> SOCAC strongly urges the Legislature to improve the regulatory environment for children's services before investing in new services or supports.

The <u>2024 Youth Respite Report</u> outlines a number of policy recommendations to expand and enhance youth respite, a missing yet foundational service within the continuum of care, and the need for which was highlighted both in the <u>Special Masters</u> report and <u>OHA's 2023 Ombuds Report</u>. Increasing respite services statewide continues to be a SOCAC priority as demonstrated by our leadership on <u>SB 1197</u> in the 2025 Legislative Session. However, in recognition of the challenges facing the state due to HR 1, SOCAC is pausing on this work for the upcoming legislative session.

The 2023 SOCAC Legislative Report discussed gaps in Oregon's data which prevent a full understanding of Oregon's children's system services, payers, access, and gaps which exist in geographic regions of the state. To close this gap, SOCAC partnered with OHA's Health Policy Analytics division to dedicate a full-time Research Analyst to SOCAC. SOCAC established a contract with OHSU to study Oregon's children's system and provide up-to-date information on which services exist, where services are provided, who pays for services, and who is or is not getting access to those services. This work set a baseline, and the assessment will need to be redone in 4 years to determine what progress has been made.

SOCAC intends for the Oregon Legislature to use the 2026-2029 System of Care Strategic Plan to outline specific strategic policy and funding recommendations to significantly improve Oregon's child-serving system. Until that plan is completed, **SOCAC recommends that the Legislature focus on protecting and defending existing services and supports for children and youth**, including addressing regulatory barriers outlined in the Safety Workgroup Report.

2026 - 2029 System of Care Strategic Plan

The primary duty of SOCAC is to develop a comprehensive strategic plan for services and supports for children and youth in Oregon. The System of Care Strategic Plan will be delivered to the Oregon Legislature on January 2, 2026. The plan has been crafted with significant community input over the course of 2025. The four-year plan will include specific strategies, action steps, and measurements to lead Oregon's children's systems to accomplish four main goals: 1) transforming the systems that serve children, youth, and families; 2) improving access to coordinated, integrated, and community-based care; 3) promoting the co-creation of equitable policies and systems by providers and the youth and families they serve; and 4) creating a sustainable System of Care structure that increases the capacity and credibility of the children's system.

The SOCAC looks forward to partnering with the Legislature, executive branch agencies, providers, and people with lived expertise in navigating our children's systems to improve access and quality of care for Oregon's children, with a particular focus on children with complex needs and those requiring services or supports from two or more systems.

SOCAC was founded with a mandate to focus on children and their families whose needs are at the high-acuity end of the service continuum. For that reason, the Strategic Plan does not focus on primary prevention for children. There are many other prevention-focused advisory bodies the Legislature should rely upon to provide guidance on best practices and next steps for building a strong prevention framework in Oregon.

Much work remains to align funding and terminology, reduce barriers and siloes within and between our systems, and ensure youth with complex needs get the care they need, in a way that works for them, in their homes and communities as much as possible. Future SOCAC Legislative Reports will focus on the steps the Legislature should take to support implementation of the System of Care Strategic Plan. Please join us in strategic systems change to improve access to care, and outcomes from that care, for Oregon's most vulnerable children.

Conclusion

SOCAC urges the Oregon Legislature to protect and defend existing children's services as they continue to suffer attacks at the Federal level. Eliminating duplication and waste will allow us to protect the services which provide critical safety-net care for Oregon's children and youth. This work will require partnership with executive branch agencies, commitment to listening to and acting on the advice of people with lived experience, and strong leadership and clear communication from legislators.

SOCAC continues the call for the Legislature to work with agency partners to adapt rules and regulations to be trauma-responsive, attainable by communities with different levels of resources, and accessible for youth and families before a crisis takes place. It is possible that, as we navigate the challenges facing our children's system over the next four years, a new spirit of partnership and collaboration can be built between people with lived experience, agency leadership, legislative leadership, and those who provide these critical services. Only when we have learned to listen and understand one another, and choose to prioritize outcomes over limiting liability, will we have the opportunity to build the system Oregon's most vulnerable children, youth, and their families deserve.