OREGON ASSOCIATION OF HOSPITALS AND HEALTH SYSTEMS (OAHHS)

Organization description of activities:

Transitional post-acute care programs at Critical Access Hospitals:
OAHHS, in partnership with Allevant Solutions, is working with 17 CAHs across Oregon to establish transitional post-acute care programs. It is based on a successful transitional post-acute care model through the Mayo Clinic Health System. The goal is to improve readmission, increase patient satisfaction, and transition care for patients back to their rural communities to increase hospital throughput by freeing up capacity in urban settings and reducing cost to the patient with local care and decreased transportation. The focus is on Transitional Care, which is a patient-centered, quality-driven clinical program for patients that are well enough to leave an acute care hospital but not yet well enough to go home or to a permanent nursing home setting. This is a multi-year program that began in January 2017.

Advocacy for behavioral health reform and mental health services:

2015 Legislative Session
OAHHS advocated for several bills during the 2015 legislative session to improve the availability of mental health services including:

- Clarifying the state’s responsibility for cost of care for committed patients who are in acute care hospitals awaiting placement in the Oregon State Hospital or another secure community facility. This was part of HB 3502, which did not make it out of the House in the 2015 Legislative Session.
- Cleaning up archaic statutory language enacted prior to state and national health reform that serves as a barrier to care coordination, also part of HB 3502.
- Enhancing Psychiatric Mental Health Nurse Practitioners’ ability to provide care and services, such as involuntary holds, that are currently limited to physicians. SB 840 was signed into law on June 16, 2015.
- Reducing or eliminating ED and hospital boarding for patients awaiting placement in the Oregon State Hospital or another secure community facility. Budget Note #6 requires OHA to present a report to the 2016 legislative session regarding the problem of boarding patients with mental illness in hospital emergency departments while waiting for a bed in an appropriate setting.
- Supporting the new psychiatric emergency services facility (Unity Behavioral Health Center) in Portland, serving patients in psychiatric crisis and housing 101 psychiatric beds; support for funding the crisis stabilization services needed to sustain this operation.

2017 Legislative Session
OAHHS supports an approach in which a series of collaborative stakeholder meetings -
including hospitals - would be convened to address holistic mental health system reform. OAHHS is tracking multiple behavioral health reforms and potential policy implications within OHA and the hospital systems. The US DOJ Oregon Performance plan was released this summer and has a number of initiatives; two of which could directly impact Emergency Department boarding. OAHHS assumes there will be legislation and policy changes to address the initiatives in the Performance Plan.

OAHHS continues to support:

- Reducing or eliminating emergency department and hospital boarding for patients awaiting placement in the Oregon State Hospital or another secure community facility.
- New psychiatric emergency services facility, like Unity Behavioral Health Center or other models that address communities’ mental health needs.
- Clarifying the state’s responsibility for cost of care for committed patients who are in acute care hospitals awaiting placement in the Oregon State Hospital or another secure community facility.

The future of the Affordable Care Act is expected to dominate the health care discussion for much of the year and could have a direct impact on behavioral health reforms and current operations. OAHHS will continue to monitor this and look at innovative solutions for Oregon.

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