

**February 11, 2009**

**Testimony of Liz Baxter, Executive Director of the Archimedes Movement**

Chair Greenlick, Vice Chair Maurer, Vice Chair Harker and members of the Committee.

My name is Liz Baxter, Executive Director of the Archimedes Movement. I am also on the board of Oregon Health Decisions, which both distributes and does statewide community education about Oregon's Advance Directive. I am also a taxpayer, voter, parent and grandparent.

The Archimedes Movement is a member of the Oregon Health Reform Collaborative, where there is agreement that health care needs to be more affordable, available to all, and be focused on eliminating health disparities and improving the health of all Oregonians.

I believe that **you** have an opportunity to set the direction for Oregon's future health system, one that creates several changes:

- First, ways for us to share **both the cost and the responsibility** for a new system;
- Second, a way for Oregon to spend its public resources more wisely, and
- Lastly, to create a framework of a system that makes sense and meets the needs of Oregonians.

For me, it's much more than an argument about saving programs. It is important to understand **why** what you're doing is important, in addition to talking about **what gets accomplished**.

So, I have a story, one that's hard to tell in a few short minutes, but I will try. My partner and I have raised three boys, 14, 16 and 27. Our youngest we adopted in 2000, a boy who spent his first 6 years in and out of foster homes.

The two of us have worked around the health care system for most of our careers, so we consider ourselves pretty savvy about navigating our way around and getting things done. And we were fully aware of the physical and mental challenges our son might face as he grew up.

We could not have envisioned what it would mean to live at the three-way intersection of 1) public education and special education services; 2) the mental health system; and 3) the medical system.

It is a 3-way intersection where the direction you're trying to go **never seems to have the green light**. And there are different rules to follow depending on every possible configuration of circumstances.

Our youngest son has mental health issues that have resulted in multiple hospitalizations and intensive treatment plans. In December of last year the inpatient team made a decision that he was ready to be discharged to home even though no referrals had been made for community based care upon his release. All of the team's decisions were made based upon **who would pay for what**.

This was not about lack of coverage, as my son has double coverage – private insurance and the OHP medical card. Yet we come to so many impasses because the rules vary, the options available to a family vary, and the landscape changes with every question you ask.

There is no ability to combine funding streams and leverage available resources. There was – and continues to be - a lot of money being spent on my son’s care, just not in an integrated, coordinated way – which, if we could change that, would undoubtedly result in less money being spent overall.

I do not want it to sound like I think anyone currently has enough money for mental health services. The schools aren’t funded adequately to take care of special needs kids; and I will be the first to tell you that the mental health system is woefully underfunded and under-resourced. But, my hope is that someday we can take a step back and ask ourselves whether what needs to be done can be **done in a different way**.

At one point I was so frustrated and confused during this discharge session that I asked them to stop and consider this question – “if we were not trying to figure out who would pay for what, but instead were asking ‘what was in the best interest of this young man’, would your recommendations for discharge today be the same?” Not one of the six staff present could say yes. **That is a problem**. And I believe that We Can Do Better.

The Archimedes Movement is advocating for a system that will improve the health of Oregonians, reduce per capita cost, and result in a better patient experience – using health outcomes and patient satisfaction as examples. Those are the same recommendations that were in the Executive Summary of the Oregon Health Fund Board. I encourage you to use that – the Triple Aim, as described by Don Berwick of the Institute for Healthcare Improvement - as the yardstick by which you will measure the recommendations you pass out of this committee.

Our Community Leadership Council took the Triple Aim and crafted a list of questions that we are hoping you will ask in reference to all the bills before you, because we believe that the question **isn’t** “Is everyone covered by insurance?” but rather **“What does insurance buy and how do we deliver services in the most efficient manner (cost, quality and otherwise)?”** So here is what they want you to ask:

- Does it lead to improved health of the population?
- Does it lead to reduced per-capita cost?
- Does it improve patient safety and lead to better health outcomes?
- Is everyone involved held accountable for the investments you are proposing to the system?
- Will there be a way to know if these changes are working?

Not so long ago, when the national media was focused on the bailout of the big 3 automakers there was a lot of concern about what letting those companies fail would do – how it would impact workers, local and national economies.

I have yet to hear anyone say that in exchange for getting that federal money that those companies should change their production lines in order to start producing lower emission

vehicles, vehicles that might run on alternative fuels, in other words building the cars that we need **tomorrow instead of continuing to build the cars of yesterday**. Instead we bailed them out with no expectation that they would change from what they are doing today.

Investments in a better health system are also investments in Oregon's economy, because those dollars result in jobs, and those workers pay for other goods and services in their communities. We are all connected.

I urge you as you continue deliberation on HB 2009 and other bills before you, to **move us toward the system we need tomorrow**, and to see the needed funds as investments to a better health system.

I believe that Oregonians are willing to support those investments if only they could see that this money will result in a better system. We cannot afford to leave federal money on the table, and inaction will not leave us at status quo; it will take us backwards to dark times.

The time is now for health reform, Oregon can lead the way and the Archimedes Movement is here to work with you – here in Salem and across the state.

Thank you.

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