

HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES

April 15, 2005 Hearing Room D

8:30 A.M.

Tapes 94-96

MEMBERS PRESENT: Rep. Carolyn Tomei, Vice-Chair

Rep. Gordon Anderson

Rep. Deborah Boone

Rep. Kevin Cameron

Rep. Mitch Greenlick

MEMBERS EXCUSED: Rep. Billy Dalto, Chair

Rep. Tom Butler, Vice-Chair

MEMBERS VISITING: Rep. Jeff Merkley

Rep. Brad Witt

Rep. Terry Beyer

Rep. Phil Barnhart

STAFF PRESENT: Sandy Thiele-Cirka, Committee Administrator

Kellie Whiting, Committee Assistant

MEASURES/ISSUES HEARD:

HB 2817 – Public Hearing

These minutes are in compliance with Senate and House Rules. Only text enclosed in quotation marks reports a speaker's exact words. For complete contents, please refer to the tapes.

TAPE/# Speaker Comments

TAPE 94, A

004 Vice- Chair Tomei Calls the meeting to order at 8:32 a.m. and opens the public hearing on HB 2817 as a sub-committee.

HB 2817 – PUBLIC HEARING

006 Sandy Thiele-Cirka Committee Administrator. Gives overview of HB 2817. Notes that HB 2817 has a subsequent referral to Ways and Means.

018 Rep. Greenlick Comments on HB 2817.

040 Vice-Chair Tomei Acknowledges the presence of Reps. Cameron and Boone and opens the public hearing as a full committee.

041 Rep. Phil Barnhart House District 11. Submits and reads from written testimony in support of HB 2817 (**EXHIBIT A**).

068 John Santa Physician. Submits and reads from written testimony in support of HB 2817 (**EXHIBIT B**).

177 Robert Sack Physician. Submits and reads from written testimony in support of HB 2817 (**EXHIBIT C**). Comments on the advertising issue in regards to pharmaceutical companies. Reads from the article he wrote in regards to the costs of prescription drugs. Comments on consumers including the doctor, the patient and the sponsors such as health care providers and insurance companies. Explains the complex transaction. Notes on the target in regards to marketing. References to paragraph one, (2) of HB 2817 and explains the medical education suppliers.

300 Sack Explains the financial arrangements and the appropriate marketer. States that HB 2817 will clarify the market for pharmaceutical drugs. Comments that HB 2817 would make the cost more transparent.

339 Rep. Greenlick Inquires about research in regards to patenting market drugs.

363 Vice-Chair Tomei Asks Rep. Greenlick to describe what patent is.

370 Rep. Greenlick Explains.

389 Sack Responds he has done both kinds of research. Discusses ethics in research. Comments on the different types of research.

TAPE 95, A

007 Rep. Cameron Mentions exemptions in regards to free samples in HB 2817. Asks if this would encourage a drug company to give more free samples of drugs to doctors and clinics rather than free trips.

013 Sack Discusses reasoning behind the distribution of the samples and the alternatives.

025 Rep. Cameron Verifies that witness is not concerned about that exemption.

028 Sack Replies there is some benefit for patients who cannot afford their own prescriptions. Opines that is probably the reason that exemption still exists.

032 Rep. Brad Witt Inquires about how much pharmaceutical companies rely on research and development for their profitability.

036 Sack Responds he does not have the information.

039 Rep. Witt Requests the information be provided to the committee. Says he is interested in the comment made by Mr. Sack that prescription drug companies spend more money on advertising than research and development.

047 Rep. Anderson Inquires about the patenting timeframe.

052 Sack Explains process.

055 Rep. Anderson Comments on pressure on pharmaceutical companies due to timeframe. Discusses recovery of costs.

061	Sack	Concurs. Responds about the proportion of advertising.
067	John Bruinrugge	Physician. Testifies in support of HB 2817. States that he has been practicing for 18 months at a clinic in Scappoose that gives free samples. Comments on: <ul style="list-style-type: none"> • · Culture of the medical clinic in Scappoose • · Alternation of prescribing habits • · Affordability of prescription medicine and dependence upon free samples • · Notes that studies are poorly done and discusses biases • · Drug representatives • · Reviewing what the staff is prescribing and following what is being prescribed
140	Bruinrugge	Continues to explain the requirements of prescribing and the allowance of prescription costs. Makes closing remarks about HB 2817.
152	Rep. Boone	Mentions comment that a drug company representative can track an individual's prescription. Asks about privacy laws.
157	Bruinrugge	Responds about the process of reviewing the prescription.
163	Santa	Responds about the privacy and information obtained by the pharmaceutical companies. Comments on the lack of communication about prescriptions that are being prescribed.
187	Rep. Boone	Asks for clarification of the "black box" warning.
190	Santa	Clarifies about the warnings and the in-balanced information.
207	Rep. Merkley	Inquires about witness' comment that drug company representatives check patient's charts.
216	Bruinrugge	Clarifies his previous comment.
225	Rep. Merkley	Verifies that the representatives lobby the nurses to lobby the doctors to switch patients to certain types of medications.
227	Bruinrugge	Replies correct and clarifies further.

228	Rep. Boone	Inquires about the samples and the comparison of generic drugs.
236	Bruinrugge	Responds they do not receive samples of generic drugs.
242	Rep. Cameron	Inquires who sets the rules on solicitation.
248	Bruinrugge	Responds.
256	Rep. Cameron	Inquires about receiving free lunches and not accepting free samples. Inquires about the process of prescribing generics.
274	Bruinrugge	Responds he does prescribe samples.
281	Rep. Greenlick	Inquires about the classic economic buyer. Comments on the complexity of determining who the buyer is. Comments on the unbalance of incentive.
309	Santa	Responds about a professional code and the market for the patients. Comments on the business models to compete on price and information. Comments that the government needs to referee the procedure. Discusses professionalism.
378	Rep. Greenlick	Comments on the role of the government and the free market. Verifies that witness believes that HB 2817 is an attempt is to provide more equity of information.
392	Santa	Confirms this.
404	Rep. Anderson	Comments on the interest of the patients. Comments on the ethics and the morality involved.

TAPE 94, B

003	Santa	Comments on the morality and the agreements to the code of ethics.
032	Rep. Cameron	Inquires if witness would support HB 2817 if line 5 was changed to state that all doctors have to report gifts.
039	Santa	Replies yes.

041	Sack	Comments on the issue of masking effects of marketing. Provides an example.
048	Jim Gardner	Submits and reads from written testimony in opposition to HB 2817 (EXHIBIT D) . Submits and refers to the PharmaCode booklet (EXHIBIT E) . Submits and refers to the Federal Register and Guidelines (EXHIBIT F) . Comments about public disclosure and privacy.
187	Gardner	Explains the tort and liability issues under section 193.
197	Rep. Greenlick	Discusses research alternatives for drug companies when they bring a drug to market. Refers to the preamble on page three of the PharmaCode booklet and asks about the disclosure standards.
231	Gardner	Responds he does not know why the exclusion is there.
238	Rep. Anderson	Comments that this should be federal legislation. States that if many states adopt different standards then a drug company has to report in many different ways. Asks witness to comment.
245	Gardner	Agrees and states that the Office of Inspector General (OIG) seeks to do this in the context of penalizing inappropriate conduct rather than in the context of disclosure. Believes that if there is a policy, it should be a policy at the federal level.
255	Rep. Witt	Asks witness to provide the market concentration ratios within the pharmaceutical market. Specifies the percentage of the market controlled by the largest ten companies, the largest five companies and the largest three companies.
267	Gardner	Responds he will provide the information.
270	Rep. Witt	Asks witness to also provide the industry average for the percent of capital outlays spent on research and development by the drug industry.
272	Gardner	Responds he will provide the information.
274	Rep. Cameron	Inquires about witness' opinion on line 5 of HB 2817 if the wording were changed to require all doctors to report gifts.

280	Gardner	Responds he will have to think about it. Comments on the Hippocratic Oath.
290	Rep. Cameron	Inquires if witness' group is involved in the free drug program here in the state of Oregon. Asks witness to explain program. Inquires if the passage of HB 2817 will affect that program.
296	Gardner	Describes the free drug programs.
310	Rep. Greenlick	States that Mr. Gardner was very influential in the passage of SB 875 (2003).
312	Gardner	Continues explanation of the free drug programs. Discusses effect of HB 2817 on these programs.
356	Rep. Witt	Makes comment about line 5 of HB 2817 in regards to language change.
360	Kate Newhall	Legislative Assistant, Sen. Alan Bates' office. Submits and reads written testimony on behalf of Senator Alan Bates in support of HB 2817 (EXHIBIT G) .
400	Earl Lui	Consumer's Union. Submits and reads from testimony in support of HB 2817 (EXHIBIT H) .

TAPE 95, B

003	Lui	Continues reading submitted testimony.
090	Vice-Chair Tomei	Inquires about the Consumer Union's position on legislation at the federal level.
100	Lui	Responds he does not see the need to address the issue at the federal level.
104	Vice-Chair Tomei	Asks if there are any states that currently have this type of law.
106	Lui	Replies Maine and Vermont.

107	Vice-Chair Tomei	Inquires about the results of those laws.
108	Lui	Offers to return information to the committee.
109	Lui	Makes closing remarks.
112	Rep. Witt	Asks if there have been cases brought in Maine and Vermont regarding takings relative to the reporting of the information requested in HB 2817.
115	Lui	Replies that he does not have that information.
121	Rick Bennett	American Association of Retired Persons (AARP). Submits and reads from written testimony in support of HB 2817 (EXHIBIT I).
184	Andi Miller	Executive Director, Common Cause Oregon. Submits and refers to prepared testimony in support of HB 2817 (EXHIBIT J).
209	Rep. Witt	Inquires about courts in Vermont.
213	Bennett	Responds he does not have the information.
219	Rep. Greenlick	States that he received an email from a constituent, Dr. Jenny Pompilio, Board Member of Physicians for Social Responsibility. States that she is in support of HB 2817.
229	Michael Garland	Retired Professor, Oregon Health and Science University. States that he is speaking as a private citizen. Submits and reads from prepared testimony in support of HB 2817 (EXHIBIT K). Comments that HB 2817 contributes a desirable new feature to the health policy landscape in Oregon and urges the passage.
327	Bruce Goldberg	Administrator, Office for Oregon Health Policy and Research. Testifies in support of HB 2817. Comments on the need for transparency in health care.
406	Vice-Chair Tomei	Inquires about educational requirements for drug representatives.
409	Goldberg	States that he does not know and someone else may be able to answer that question.

415	Rep. Cameron	Mentions conflict of interest. Believes that the doctor should be declaring the conflict of interest. Asks for witness' opinion about making it the prescribing doctor's responsibility to do this.
TAPE 96, A		
006	Goldberg	Responds disclosure should be uniform.
015	Garland	Comments on the issue of transparency.
028	Crista Schivlley	Legislative Staff, Rep. Carolyn Tomei's office. Reads written testimony on behalf of Martin Donohoe in support of HB 2817 (EXHIBIT L) .
078	Maribeth Healy	Executive Director, Oregonians for Health Security. Submits and reads from written testimony in support of HB 2817 (EXHIBIT M) .
143	Vice-Chair Tomei	Closes public hearing on HB 2817 and adjourns meeting at 10:40 a.m.

EXHIBIT SUMMARY

- A. **HB 2817, written testimony, Rep. Phil Barnhart, 1 p**
- B. **HB 2817, written testimony, John Santa, 2 pp**
- C. **HB 2817, written testimony, Robert Sack, 5 pp**
- D. **HB 2817, written testimony, Jim Gardner, 2 pp**
- E. **HB 2817, PharmaCode Booklet, Jim Gardner, 29 pp**
- F. **HB 2817, Federal Register and Guidelines, Jim Gardner, 13 p**
- G. **HB 2817, written testimony of Sen. Alan Bates, Kate Newhall, 1 p**
- H. **HB 2817, written testimony, Earl Lui, 24 pp**
 - I. **HB 2817, written testimony, Rick Bennett, 18 pp**
 - J. **HB 2817, written testimony, Andi Miller, 1 p**
- K. **HB 2817, written testimony, Michael Garland, 2 pp**
- L. **HB 2817, written testimony of Martin Donohoe, Crista Schivlley, 1 p**
- M. **HB 2817, written testimony, Maribeth Healy, 4 pp**

8:30 A.M. Tapes 71 - 73

MEMBERS PRESENT: Rep. Billy Dalto, Chair

Rep. Tom Butler, Vice-Chair

Rep. Carolyn Tomei, Vice-Chair

Rep. Gordon Anderson

Rep. Deborah Boone

Rep. Kevin Cameron

Rep. Mitch Greenlick

STAFF PRESENT: Sandy Thiele-Cirka, Committee Administrator

Pamella Andersen, Committee Assistant

MEASURES/ISSUES HEARD:

Oregon Alliance for Child Advocacy - Informational Meeting

HB 2640 – Public Hearing

HB 2362 – Public Hearing

These minutes are in compliance with Senate and House Rules. Only text enclosed in quotation marks reports a speaker's exact words. For complete contents, please refer to the tapes.

TAPE/#	Speaker	Comments
TAPE 71, A		
004	Chair Dalto	Calls the meeting to order at 8:36 a.m. Opens the informational meeting on Oregon Alliance for Child Advocacy.

Oregon Alliance for child advocacy – INFORMATIONAL MEETING

013	Mary Monnat	President, Oregon Alliance for Child Advocacy. Explains the Alliance and its services.
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053	Janet Arenz	
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Executive Director, Oregon Alliance for Child Advocacy. Submits and reviews written testimony on child advocacy (**exhibit a**). Introduces Clark Luster, explaining his background and work.

- 080 Clark Luster President and CEO, Kansas Children's Service League. Relates his experience that children's issues cross party lines. Discusses his experiences in Kansas, stating desperation combined with strong leadership provokes change. Notes large, tripled increase in adoptions with a dissolution rate of less than two percent compared to twelve percent nationally.
- 175 Chair Dalto Inquires why adoptions fall apart.
- 176 Luster Reports there are many possibilities, noting the average age of adopted children is eleven years old, sibling groups need to be kept together, sometimes there is a poor match, families dissolve, people don't understand the challenges and commitment, etc. Reports Kansas case workers now provide 24-hour responses and foster parents are paid at a rate double the previous amount. Comments one critical outcome is kids are no longer in mental health programs and groups homes, but are in foster care and are adopted.
- 224 Chair Dalto Questions how much the amount paid to foster families influences the outcomes.
- 230 Luster States people do this type of work because of their heart. Notes the goal is to pay enough money that the foster parents don't want to walk away when things get tough. Reports paying a foster parent costs less than a treatment program and allows children to remain connected to their daily lives. Discusses structure of the Kansas system, noting costs were not reduced, but they have better outcomes. Relates the mechanics of the Kansas process and creative components that have been introduced into the system to move children toward permanency. Explains the system is designed around achieving outcomes, and explains how the contractor's rate is reduced based on how long it takes for a child to be released from the system. Discusses the portrait gallery the League moves around the state to motivate people to consider adoption.
- 403 Rep. Butler Asks if Kansas was the first state to enter into a pilot program with federal funds.
- 425 Luster States he is unsure.

- 435 Rep. Butler Asks about medical provisions for special needs children in foster care.
- 437 Luster Responds each child has a Medicaid card, the Department of Education takes care of special education, and mental health costs and in-patient residential costs will be paid by Medicaid in the future.

TAPE 72, A

- 003 Rep. Butler Questions whether there is a warning system if the state does not see the outcomes they are seeking from a contractor.
- 010 Luster Reports the contractors meet quarterly with the state and the state can take corrective action if needed.
- 019 Rep. Butler Inquires about therapeutic foster care.
- 021 Luster States the League created a model of trained families who can take tough kids and increased payment to them, intensified training, and reduced their caseworker's workload.
- 037 Arenz Clarifies the Alliance is not promoting a particular model, but seeking to look at ideas and pitfalls and develop reasonable expectations for outcomes. States in Kansas the private sector assumes all the risks and must demonstrate effectiveness.
- 099 Chair Dalto Asks Luster what role methamphetamine plays in Kansas.
- 101 Luster Relates methamphetamine is a serious problem particularly in the rural areas. Elaborates on responses within their state.
- 115 Chair Dalto Requests comparison between Kansas and Oregon in terms of the number of methamphetamine-affected kids that enter the foster care system and how their needs are addressed within the League's model.
- 114 Luster Reports their program is geographical, so all problems within their area have to be addressed.
- 122 Rep. Cameron Asks what issues Florida encountered.

140	Luster	States Florida erroneously thought they had trained people to do the work when they privatized. Notes the new, inexperienced staff created chaos, judges were brought into the process too late, and state workers remained state employees rather than becoming contractors. Changes have been made to balance the program, and state employees are doing prevention, now. Reiterates the importance of communicating with all parties early, and to ensure there is a prepared workforce.
170	Arenz	Interjects some non-profit organizations failed as a result of this process.
179	Rep. Anderson	Questions whether private contracts work.
186	Luster	Believes they work in terms of outcomes, but transitions are difficult. States motivators and incentives are necessary.
194	Rep. Anderson	Inquires regarding the categories of children that were adopted and requests a comparison to Oregon.
203	Luster	Discusses Kansas numbers. Explains the changes the new contract will make with caseworker stability and contractor follow-up.
226	Arenz	Provides comparison with Oregon, stating she does not know the number of children facing adoption.
236	Rep. Anderson	Asks who the private adoption and foster care contractors are.
237	Arenz	Elaborates there are options through the juvenile justice system, and Department of Human Services (DHS). Mentions three agencies in Portland that have private foster care beds.
247	Rep. Greenlick	Inquires how much money was added to the Kansas system by caseworkers handling both child protective services and adoption.
257	Luster	Replies the state-side staff has been reduced by attrition and re-directed toward prevention, but he is unsure of the dollars.
270	Rep. Greenlick	Requests an idea of the magnitude of dollars.
275	Luster	States Kansas has \$125 million in total contracts. Elaborates.

- 281 Rep. Greenlick Asks if Oregon could provide a more effective adoption model if they found that much money.
- 298 Arenz Lists other services Kansas also provides to children.
- 323 Chair Dalto Closes the informational meeting on Oregon Alliance for Child Advocacy. Opens the public hearing on HB 2640.

hb 2640 – PUBLIC HEARING

- 329 Sandy Thiele-Cirka Administrator. Summarizes HB 2640.
- 340 Bruce Bishop Oregon Association of Treatment Centers (OATC). Submits and reviews written testimony in support of HB 2640 (**exhibit b**), noting it will treat residential and day treatment providers alike with respect to accessing liability insurance.
- 373 Rep. Tomei Requests clarification of the existing situation.
- 376 Bishop Explains it would allow them to join a pool to access lower cost coverage.
- 385 Chair Dalto Reports there is no known opposition to this bill, and the committee will be seeking to remove the subsequent referral.
- 405 Larry Tang Polk Adolescent Day Treatment. Mentions the present substantial rate increases this will preclude.
- 408 Thiele-Cirka Requests clarification regarding the reference to HB 2254 on Bishop's written testimony.
- 412 Bishop Clarifies his wish to connect this testimony to the original bill, to bring continuity.
- 418 Chair Dalto Charges Bishop to seek rescindment of the referral.
- 427 Chair Dalto Closes the public hearing on HB 2640. Committee stands at ease from 9:30 a.m. to 9:45 a.m. Opens a public hearing on HB 2362.

hb 2362 – PUBLIC HEARING

455 Bob Joondeph Executive Director, Oregon Advocacy Center. Submits and reviews written testimony in support of HB 2362 (**exhibit c**).

TAPE 71, B

002 Joondeph Continues testimony. States the goal is to develop a task force to review how funding and resources can be redesigned with integration for greater efficiency.

026 Mark McKechnie Social Worker, Juvenile Rights Project. Submits and reviews written testimony in support of HB 2362 (**exhibit d**). Discusses Wraparound Milwaukee. Notes the Project works with children with complicated issues, and does so with lower costs due to outcomes and the drastic reduction in hospital care. Discusses costs of three specific clients who have been institutionalized.

Committee stands at ease 9:55 to 10:05 a.m.

173 Rep. Greenlick States HB 2362 creates a task force, and asks the purpose in creating a task force rather than just making suggestions to change the system.

186 McKechnie Relates the objective is to have a group design changes and complete the task, not study the problem.

208 Joondeph Confirms need for a firm plan with support of governmental leaders.

223 Rep. Greenlick Reiterates need for a bill that moves in a direction to improve the system.

225 McKechnie Mentions submitted written testimony of Judge Nan Waller (**exhibit e**), who is also interested in developing a similar approach to Wraparound Milwaukee.

275 Rep. Boone Requests explanation of the Wraparound program.

277 McKechnie Explains the program and the incentives to provide preventive services earlier.

295 Jim Russell

Director, Mid-Valley Behavioral Care Network (BCN). Testifies in support of HB 2362. Notes need of collaboration and removal of barriers.

- 334 Rep. Greenlick Requests an explanation of what the coordinated plan will look like.
- 368 McKechnie Notes the pooled fund in Minnesota and the need to borrow benchmarks from other states on how to coordinate services and funding effectively.
- 408 Rep. Butler Asks if there is a state with an effective model Oregon can borrow while the study is being conducted.
- 418 McKechnie Replies each state is unique in how they address these issues and some models could not be adapted to Oregon.
- 445 Joondeph Discusses statutory structures of other states, and need to obtain buy-in from agencies involved.

TAPE 72, B

- 003 Rep. Butler Asserts if Oregon's statutory structure is not designed to accomplish the job, changes need to be made.
- 028 Rep. Anderson Reads into record a recommendation by George Longden (**exhibit F**).
- 054 Madeline Olson Assistant Administrator, Office of Mental Health & Addiction Services (OMHAS), Department of Human Services (DHS). Submits and reviews written testimony on HB 2362 (**exhibit g**), noting concern regarding the necessary funding for staff to implement the requirements. Because of the intricacies of funding and the federal strings attached, the Director would need additional staff expertise.
- 112 Kristen Anderson Parent of mentally ill child. Submits and reviews written testimony in support of HB 2362 (**exhibit h**). Relates mental health issues of her nine-year-old son. Notes the costs to the community and that lack of coordination of services prevents her son from receiving the services he needs. Recommends the bill be amended to design coordination rather than study the issue.
- 161 Jimmy Boyer Uncle of mentally ill youth. Reads testimony of mentally ill niece and her experiences (**exhibit i**). Supports HB 2362.

- 237 David Hitt Brother of mentally ill adult. Submits and reviews written testimony in support of HB 2362 (**exhibit j**). Shares story of personal and family recovery following drug use and loss of parental rights. Notes the people who helped them through recovery. Relates the experience of his mentally ill brother who has been in and out of the mental health system with no coordination of treatment, no continuing team and no structure.
- 358 Bruce Bishop Oregon Association of Treatment Centers. Testifies in support of HB 2362. Recommends an amendment.
- 416 Angela Kimball Parent of mentally ill child. Submits and reviews written testimony in support of HB 2362 (**exhibit k**). Relates personal experiences.
- 446 Jeanne Schultz Director, Oregon Family Support Network. Submits and reviews written testimony in support of HB 2362 (**exhibit l**). Lists valuable outcomes of streamlining.

TAPE 73, a

- 015 Chris Krenk President and CEO Albertina Kerr Centers. Submits and reviews written testimony in support of HB 2362 (**exhibit m**). Elaborates on the possible outcomes of the task force.
- 056 Janet Urton Parent of mentally ill children. Submits and reviews written testimony in support of HB 2362 (**exhibit n**). Notes her experiences as a parent of mentally ill children and an educator.
- 075 Chair Dalto Inquires how HB 2362 will further coordination of services for her children.
- 082 Urton States the bill would allow creation of a blueprint for action that allows flexibility of funding and programming.
- 105 Jessica Stevens Service Employees International Union (SEIU). Testifies in support of HB 2362. Recommends a representative of employees be included in the task force. Addresses Rep. Butler's earlier question about the intervening 18-month period. Discusses concept of funding following children rather than individualized contracts.
- 125 Randy Franke Coalition of County Children and Families Commissions. Testifies coalition has not taken a position on HB 2362. Recommends

legislative team makeup. Notes there is no coalition member on the committee in the bill.

165 Chair Dalto Closes the public hearing on HB 2362. Adjourns the meeting at 11:00 a.m.

The following prepared testimony is submitted for the records without public testimony:

Angela Kimball Written testimony from Catherine Mains in support of HB 2362 (**exhibit o**).

Angela Kimball Written testimony from Association of Oregon Community Mental Health Programs in support of HB 2362 (**exhibit p**).

Janet Arenz Written testimony in support of HB 2362 (**exhibit q**).

EXHIBIT SUMMARY

- A. Oregon Alliance for Child Advocacy, written testimony, articles and reports, Janet Arenz, 10 pp
- B. HB 2640, written testimony, Bruce Bishop, 1 p
- C. HB 2362, written testimony, Bob Joondeph, 2 pp
- D. HB 2362, written testimony, Mark McKechnie, 5 pp
- E. HB 2362, written testimony of Judge Nan Waller, Mark McKechnie, 3 pp
- F. HB 2362, email testimony of George Longden, Rep. Gordon Anderson, 1 p
- G. HB 2362, written testimony, Madeline Olson, 2 pp
- H. HB 2362, written testimony, Kristen Anderson, 2 pp
 - I. HB 2362, written testimony of his niece, James Boyer, 1 p
 - J. HB 2362, written testimony David Hitt, 2 pp
- K. HB 2362, written testimony, Angela Kimball, 2 pp
- L. HB 2362, written testimony, Jeanne Schultz, 1 p
- M. HB 2362, position paper of Children's Array of Psychiatric Programs, Chris Krenk, 2 pp
- N. HB 2362, written testimony, Janet Urton, 2 pp

The following prepared testimony is submitted for the records without public testimony:

- O. HB 2362, written testimony of Catherine Mains in support, Angela Kimball, 1 p
- P. HB 2362, written testimony of Association of Oregon Community Mental Health Programs in support, Angela Kimball, 1 p
- Q. HB 2362, written testimony, Janet Arenz, 1 p