



# Oregon

John Kitzhaber MD, Governor

## Department of Corrections

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May 23, 2013

The Honorable Jackie Winters, Co-Chair  
The Honorable Jennifer Williamson, Co-Chair  
Ways and Means Public Safety Subcommittee  
900 Court St. NE, H-178  
Salem, OR 97301

Dear Co-Chairs Winters and Williamson:

Thank you for the opportunity to present additional detail on our budget. I have provided follow up to the questions that were asked during Phase II of the Oregon Department of Corrections' (DOC) presentation to the Ways and Means Public Safety Subcommittee in the attached document.

For your convenience, I have inserted a table of contents for quick reference to the information provided and to make it easier to navigate through the document.

I hope this information is helpful. As always, please feel free to contact me about this or any other DOC issue.

Sincerely,

Colette S. Peters  
Director

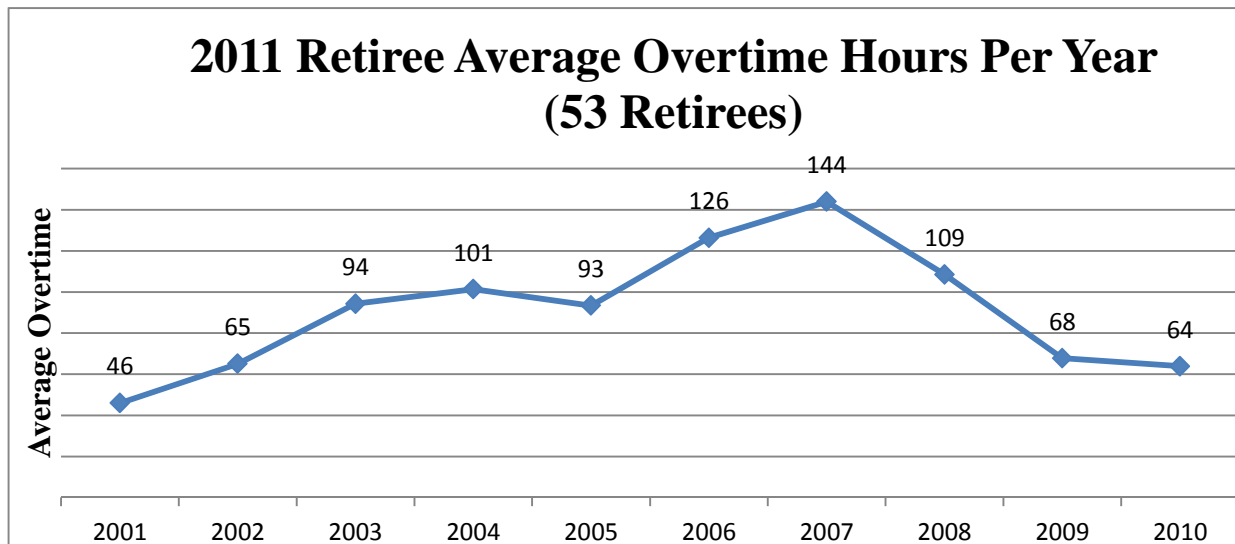
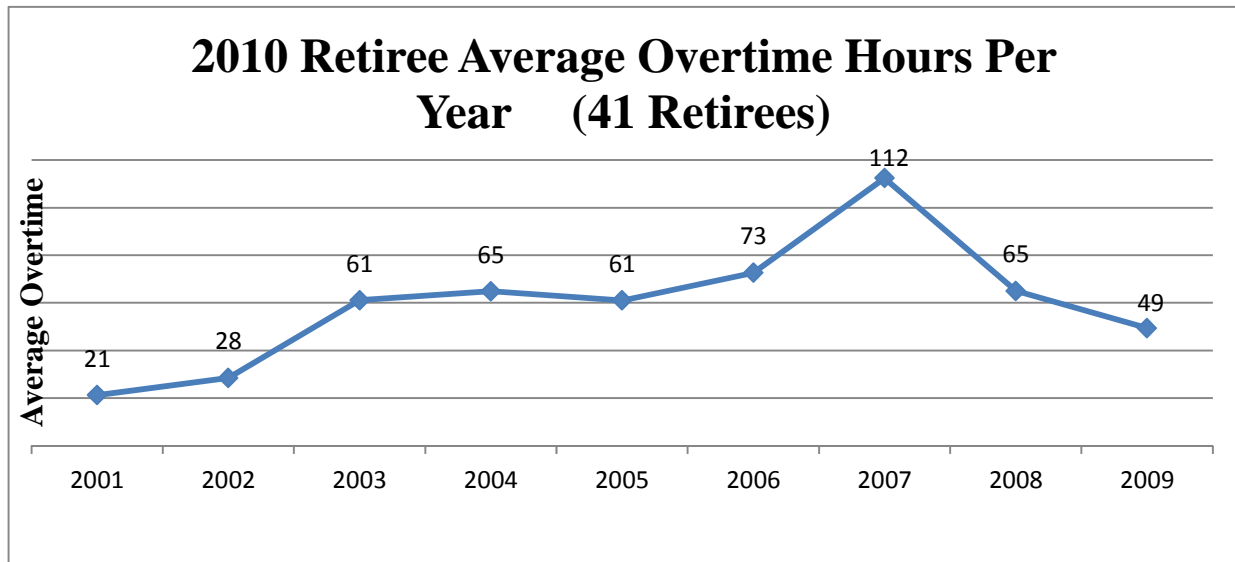
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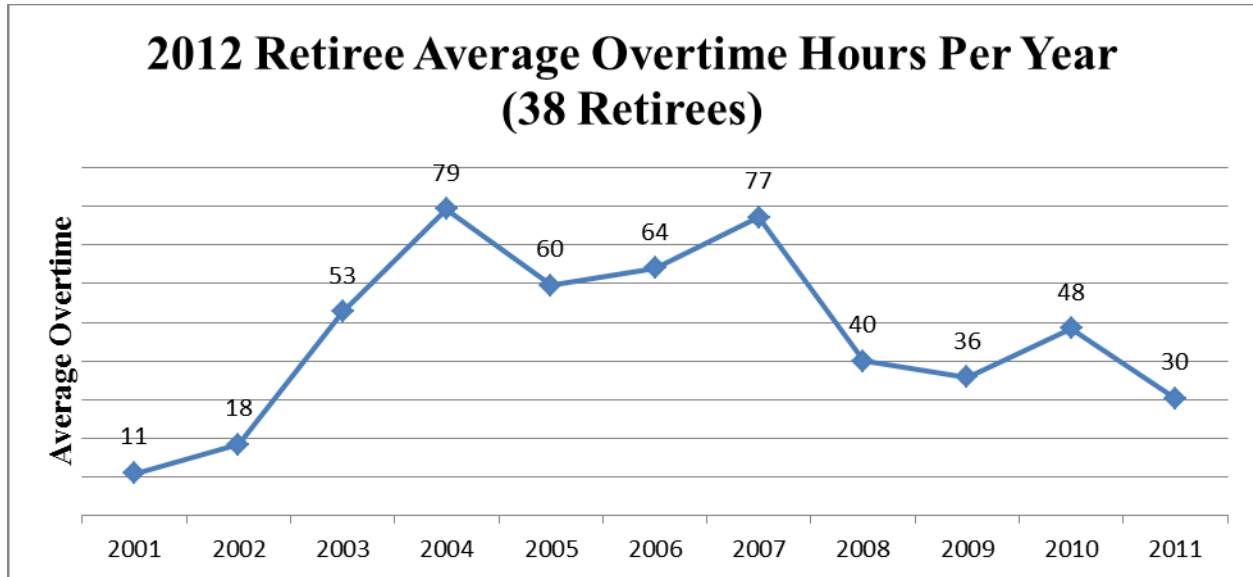
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**What is the average overtime cost for DOC employees through their career versus the cost three years prior to retirement?**

We had hoped to provide you with the overtime hours for long-term employees over the course of their careers. However, our payroll system can only track data back to 1985. In addition, the records from 1985 to 2005 are stored on microfiche (electronic payroll records started in 2005). Needless to say, looking up each individual's payroll records by each month of each year would be cumbersome.

But, our Institution Security Deployment System (ISDS) can electronically track security employees' time back to 2000. Security employees represent the majority of the department's overtime use. We have used this group to provide the information in the three tables that follow. These tables represent the average overtime hours worked per year by each of the 132 security staff members who retired in 2010, 2011, and 2012.





**What are the demographics for the 33 cases referred for early release?**

The table on the next page provides demographic details of the 33 adults in custody who were considered for early release in 2011-12. These adults in custody range in age from 31 to 87 years. The medical costs, from 2009 to 2012, total \$5,138,824.

**Provide the actual state/federal cases relating to laws pertaining to health care for inmates.**

Below are references to state and federal cases that pertain to health care for inmates.

- U.S. Constitution, 8<sup>th</sup> Amendment – prohibits the government from imposing cruel and unusual punishments.
- “Intentional denial to a prisoner of needed medical treatment is cruel and unusual punishment,” Ramsey v. Ciccone (1970).
- “Deliberate indifference to serious medical needs of prisoners constitutes the unnecessary and wanton infliction of pain,” Estelle v. Gamble (1976).
- “Inmates must be able to make problems known. Medical staff must be competent to examine and diagnose. Medical problems must be treated,” Capps vs. Atiyeh (1981).
- “Corrections officials may not lawfully make a blanket decision to deny inmate’s medical treatments based solely on budgetary reasons,” Delker vs. Maass (1996).
- ORS 423.020 (24) - The Department shall “Provide adequate food, clothing, health and medical care, sanitation and security for persons confined.”

**How many local jails participate in the Minnesota Multi-State Contracting Alliance for Pharmacy (MMCAP) contract for pharmaceuticals and supplies?**

The table on the next page lists all the Oregon entities that purchase through MMCAP. As you can see, DOC averages around 50 percent of the total volume.

**State of Oregon**  
**MMCAP Sales**  
Quarterly Report as of 3/31/13

Customer Name	City	State	Volume Group	JAN 2013 Sales	FEB 2013 Sales	MAR 2013 Sales	3 Month Average Sales	Previous Quarter - 3 Month Average Sales	Matrix Volume
<b>County Entities</b>									
BENTON COUNTY HEALTH DEPT 340B	CORVALLIS	OR	OR	\$ 8,993	\$ 3,137	\$ 12,358	\$ 8,163	\$ 4,402	\$ 1,738,466
COOS COUNTY HEALTH DEPARTMENT	NORTH BEND	OR	OR			97	97	-	1,738,466
LANE CO. PUBLIC HEALTH-340B	EUGENE	OR	OR			271	271	48	1,738,466
LINCOLN CO HEALTH DEPT 340B	NEWPORT	OR	OR	3,472	4,964	2,860	3,765	3,778	1,738,466
MIDCOUNTY CLINIC PHARMACY	PORTLAND	OR	OR	38,656	32,157	32,559	34,457	32,886	1,738,466
MULT CO HLTH, NE HLTH CTR PHY	PORTLAND	OR	OR	27,228	34,004	36,514	32,582	30,618	1,738,466
MULT CTY OCCUPATIONAL HEALTH	PORTLAND	OR	OR	9,541	4,340	2,344	5,408	3,875	1,738,466
MULT. EAST COUNTY HEALTH CLIN.	GRESHAM	OR	OR	29,555	19,160	35,143	27,953	29,935	1,738,466
PORTLAND STATE UNIV	PORTLAND	OR	OR	16,443	10,045	18,640	15,043	19,292	1,738,466
WASH CO PUBLIC HEALTH 340B	HILLSBORO	OR	OR	27,657		11,485	19,571	20,209	1,738,466
<b>Universities</b>									
EASTERN OREGON UNIVERSITY	LA GRANDE	OR	OR	804	7	140	317	345	1,738,466
OREGON INSTITUTE OF TECHNOLOGY	KLAMATH FALLS	OR	OR	1,683	1,680	2,651	2,005	1,534	1,738,466
OSU - ORE. ST. UNIV. PHARMACY	CORVALLIS	OR	OR	100,513	93,537	98,971	97,673	87,992	1,738,466
OSU STUDENT HEALTH SERVICES	CORVALLIS	OR	OR	13,576	16,050	9,451	13,025	16,435	1,738,466
OSU ACHESON TEACHING HOSPITAL	CORVALLIS	OR	OR	8,663	9,916	7,617	8,732	9,337	1,738,466
SOUTHERN OREGON UNIV/ROBIN	ASHLAND	OR	OR	13,950	5,710	12,603	10,754	10,687	1,738,466
U OF O STUDENT HEALTH SERV PHY	EUGENE	OR	OR	73,469	62,833	54,319	63,540	57,382	1,738,466
WESTERN OR UNIV STUDENT HTH CT	MONMOUTH	OR	OR	13,550	6,770	3,116	7,812	11,760	1,738,466
<b>Other State Entities</b>									
PSYCHIATRIC HOSP. - EAST. ORE.	PENDLETON	OR	OR	1,116	748	812	892	900	1,738,466
OREGON ST. HLTH DIV 340B - TB	PORTLAND	OR	OR	11,740	5,986	11,335	9,687	4,593	1,738,466
STATE OF OREGON STD PROGRAM	PORTLAND	OR	OR	409	288	519	406	615	1,738,466
<b>Department of Corrections</b>									
OR. DEPT. OF CORR. PHCY-SALEM	SALEM	OR	OR	374,088	323,220	324,079	340,463	328,157	1,738,466
DEPT OF CORR CENT DIST CENT	SALEM	OR	OR	77,688	6,552	7,056	30,432	27,840	1,738,466
SNAKE RIVER CORR. INST.PHCY	ONTARIO	OR	OR	530,761	485,245	534,319	516,775	307,622	1,738,466
<b>Miscellaneous Entities</b>									
BIO-MED TESTING SERVICES INC.	SALEM	OR	OR	667		1,001	834	667	1,738,466
BISHOP WELLNES CTR/BARRY-LEVER	SALEM	OR	OR	3,371	3,333	1,623	2,776	2,786	1,738,466
CHRISTIAN'S DNTN PHCY 340B S/T	MEDFORD	OR	OR	21,404	25,779	20,619	22,601	16,957	1,738,466
CITY OF SALEM	SALEM	OR	OR		174		174	-	1,738,466
DEPT OF SCHOOL HLTH SVCS	PORTLAND	OR	OR			235	235	-	1,738,466
HIRONS, INC #2 ADAP S/T	EUGENE	OR	OR	90,031	66,487	70,509	75,676	51,079	1,738,466
NORTH PORTLAND CLINIC PHARMACY	PORTLAND	OR	OR	23,145	16,563	19,471	19,726	23,920	1,738,466
ROCKWOOD HLTH CLINIC PHAR 340B	PORTLAND	OR	OR	22,299	16,172	22,583	20,351	19,522	1,738,466
SAFEWAY #1558 340B S/T	LEBANON	OR	OR	3,866	2,697	2,892	3,152	3,258	1,738,466
SAFEWAY #4333 340B S/T	CORVALLIS	OR	OR	10,274	8,200	7,664	8,713	8,466	1,738,466
SAFEWAY 1765 340B S/T	CORVALLIS	OR	OR	2,314	1,757	3,381	2,484	2,668	1,738,466
SAFEWAY PHARMACY 1659 340B S/T	ALBANY	OR	OR	1,136	1,141	1,068	1,115	1,579	1,738,466
SAFEWAY PHARMACY 1690 340B S/T	CORVALLIS	OR	OR	3,348	2,597	2,328	2,758	2,697	1,738,466
WESTSIDE HLTH CNTR PHCY -340B	PORTLAND	OR	OR	331,718	363,542	288,887	328,049	374,457	1,738,466
				\$ 1,897,128	\$ 1,634,791	\$ 1,661,523	\$ 1,738,466	\$ 1,518,296	
Department of Corrections Share of Total Purchases				\$ 982,537	\$ 815,018	\$ 865,455	\$ 887,670	\$ 663,619	
Department of Corrections % of Total Purchases				52%	50%	52%	51%	44%	

**What are the medical costs, to date, on the \$50K case Director Peters mentioned in our presentation?**

The total medical costs for the patient I referred to in our Ways and Means presentation through March 12, 2013, are \$489,831.

**What is our practice for using brand names vs. generic brands of medications and what is the impact on our costs?**

DOC monitors the medication marketplace on an ongoing basis to identify the availability of new generic versions of branded drugs. DOC's medication formulary is developed and overseen by a Pharmacy and Therapeutics Committee made up of physicians and pharmacists. This committee meets monthly to review the list of approved medications and make appropriate changes, including adding new medications, removing medications that are no longer useful, placing restrictions on the use of certain medications, and adopting generic versions of medications as they become available. It is a general practice that branded medications are discontinued and generics are considered for adoption as soon as they receive FDA approval.

It is important to note that during calendar year 2012, DOC packaged and delivered 429,974 prescriptions. Of that number, 394,817 (91.8 percent) were filled using generic versions of medications, and 35,157 (8.2 percent) were filled with branded medications.

Per unit, branded medications are significantly more costly than generic medications. During calendar year 2012, DOC issued prescription medications at a cost of \$10,758,261. Generic medications represented 63.2 percent (\$6,792,158) of that purchase cost, while branded medications consumed 36.8 percent (\$3,966,103) of that budget.

Serious medical issues such as cancers, ophthalmological conditions, psychiatric conditions, and diseases of specific organ systems will frequently need to be treated with sophisticated and medically complex brand-protected drugs. Because these are the drugs of choice for specific treatments, DOC does not have the option to refuse to supply them.

**How many inmates are currently in hospice and what are their demographics - age, crime, condition, medical costs, institution, and release date? What does it cost for hospice care per inmate, including medical costs prior to being placed on hospice?**

DOC manages hospice (end-of-life care) patients on site with existing staff and trained inmate volunteers. The majority of the health care costs associated with these patients occur prior to formal hospice care. Hospice care is mostly palliative and/or routine (less extensive), and as such is less costly than the care preceding hospice.

Common expenses for hospice care include staff (limited due to the use of inmate volunteers), pain medications, and any typical medical supplies necessary to provide comfort for the patient.

The following table shows the demographics for the six adults in custody who are currently on hospice.

Age	Location	Institution Admission Date	Date of Hospice Admission	Health Condition	Crime	Offsite Care Dates	Offsite Care Costs	Release Date
87	OSP	4/24/2001	8/11/2011	Cardiac	Sex Abuse 1	8/4/2011	\$ 796.96	4/18/2013
49	OSP	3/27/2012	4/23/2012	Liver disease with Cirrhosis	Burglary, aggravated harrassment	7/25/2010 - 9/21/2012	\$ 9,722.43	10/16/2013
55	OSP	1/23/2007	3/21/2013	Cancer/Leukemia	Sex Pen I, Sodomy I, Mistreatment I	7/9/2010 - 11/29/2012	\$ 6,414.59	2/21/2015
41	SRCI	9/27/2011	3/25/2013	Cancer	Sex Pen I, Rape I x 2	11/18/2011 - 3/26/2013	\$ 15,738.01	6/21/2021
45	TRCI	9/26/1996	3/15/2013	Cancer	Sodomy I X 7, Sex Abuse I X 5, Solicitation X 4	7/6/2011 - 3/22/2013	\$ 270,813.82	9/11/2112
81	TRCI	7/14/2009	8/1/2011	Chronic Obstructive Pulmonary Disease	Sex Pen I X 2, Sex Ab I	11/23/2009 - 6/12/2012	\$ 24,209.31	6/9/2029
<b>TOTALS</b>							<b>\$327,695.12</b>	

**What are the changes in Health Services administration costs between the 2009-11 actuals and the 2011-13 projections?**

This table includes the administrative elements of the medical, dental, and behavioral health units, as well as the entire pharmacy unit (administration and all pharmaceutical costs for all institutions). Please note that prior to 2011-13, medical and dental expenditures were combined. These numbers reflect General Fund only.

The difference between the 2009-11 actual cost and the 2011-13 projected cost for Health Services administration is \$6,141,339. The reasons for this difference between the 2009-11 actuals and the 2011-13 projections are:

- Personal Services costs (step increases, COLAs, benefit rate changes, etc.) and the small rate of inflation attributed to S&S for Pharmacy and Medical Stores.
- Medical projections for 2011-13 include approximately \$950K in project management for the start-up of electronic health records (EHR), an additional \$400K in cost associated with the Oregon Health Network (also EHR-related), and approximately \$800K in replacement costs as equipment lifecycles expire.
- Pharmacy saw a \$2.1M increase related to new, more effective HEP-C pharmaceuticals.

Institution	Section	2009-11 Actuals	2011-13 Projections
MCCF Total		\$0	\$23,105
SFFC Total		\$2,563	\$11,701
PRCF Total		\$1,462,161	\$1,765,209
SCCI Total		\$1,575,851	\$1,723,019
CRCI Total		\$6,311,799	\$6,302,017
OSP Total		\$25,468,671	\$25,429,138
WCCF Total		\$1,934,063	\$2,456,673
OSCI Total		\$8,252,964	\$8,332,341
TRCI Total		\$20,126,965	\$20,616,016
OSPM Total		\$0	\$0
CCCF Total		\$25,695,109	\$26,656,593
EOCI Total		\$13,357,189	\$16,399,019
DRCI Total		\$6,961,655	\$8,197,447
SCI Total		\$3,065,992	\$3,367,354
SRCI Total		\$25,617,127	\$25,839,184
Admin			
	Medical	\$8,295,050	\$10,681,434
	Dental	\$0	\$1,054,243
	BHS	\$2,577,262	\$2,597,695
	Pharmacy	\$25,560,151	\$28,240,430
Admin Total		\$36,432,463	\$42,573,802
Grand total		\$176,264,572	\$189,692,618

**Please provide funding history of M57 supplemental treatment grants to counties for current and last biennia.**

The table below shows the chronology of the BM57 funding for enhanced local treatment since its passage. The table on the next page shows the grant allocation outcomes by county for the 2011-13 biennium.

Oregon Department of Corrections Ballot Measure 57 (2008) Funding History Enhanced Treatment in the Community		
	Community Treatment Funding	
<u>Background:</u>		
Legislative Referral 408, which led to Ballot Measure 57 (2008), proposed funding for enhanced addition treatment at the local and state levels. Funding was proposed in the Referral at \$40M: \$30M for enhanced treatment in local communities and \$10M for additional treatment for incarcerated offenders. These estimates were reflected in the Voter's Pamphlet for the 2008 General Election.	\$ 30,000,000	
The <b>2007-09 Governor's Recommended Budget</b> requested funding for both state and local enhanced treatment funding at a 50% level, based on the state's fiscal condition at the time and this received legislative approval.	\$ 15,000,000	LAB
The <b>2009-11 Governor's Recommended Budget</b> requested continued funding at the previous level, but the 2009 Legislature reduced funding by one-third, to \$10M GF for local treatment.	\$ 10,000,000	GRB
During the biennium, as part of the mandatory Allotment Reduction exercise, uncommitted grant funds were uncommitted to provide statewide savings to rebalance the General Fund.	\$ 9,279,160	LAB
For the <b>2011-13 Agency Request Budget</b> , restoration was requested to the original \$15M level, along with \$465K of inflation. The Governor's eliminated \$363K of inflation.	\$ 15,101,280	GRB
The 2011 Legislature did not approve restoration of the requested \$5M and removed \$678,293 for the Supplemental Ending Balance - this was restored in the February 2012 Session.	\$ 10,101,280	LAB
For the <b>2013-15 Agency Request Budget</b> , only standard inflation was requested and approved in the Governor's Balanced Budget.	\$ 10,343,711	GBB



County	Legislatively Adopted Budget	Adjustment	Current Allocation	Notes/comments
Baker	\$ 50,000		\$ 50,000	
Benton	109,620		109,620	
Clackamas	591,570		591,570	
Clatsop	123,795		123,795	
Columbia	126,630		126,630	
Coos	158,760	(79,380)	79,380	Only requested one year
Crook	51,975		51,975	
Curry	50,000		50,000	
Deschutes	438,480		438,480	
Douglas	325,080		325,080	
Gilliam	50,000		50,000	
Grant	50,000		50,000	
Harney	50,000		50,000	
Hood	50,000		50,000	
Jackson	545,265	54,000	599,265	
Jefferson	68,040		68,040	
Josephine	254,205		254,205	
Klamath	236,250		236,250	
Lake	50,000		50,000	
Lane	949,725	28,500	978,225	
Lincoln	145,530		145,530	
Linn	414,855	49,267	464,122	
Malheur	118,125	(118,125)	-	Did not apply for funds
Marion	1,041,390		1,041,390	
Morrow	50,000		50,000	
Multnomah	2,096,955		2,096,955	
Polk	160,650	60,000	220,650	
Sherman	50,000		50,000	
Tillamook	64,260		64,260	
Umatilla	240,030	51,200	291,230	
Union	64,260		64,260	
Wallowa	50,000		50,000	
Wasco	71,820		71,820	
Washington	771,120	43,447	814,567	
Wheeler	50,000		50,000	
Yamhill	205,065		205,065	
Statewide Total	\$ 9,923,455	\$ 88,909	\$ 10,012,364	

**On the transport matrix, what does the "other" category include?**

The "other" category for DOC transport mileage is attributed to the following:

- Inmate self-pay trips for bedside or funeral visits
- Requests from State Police or other law enforcement agencies for inmate interviews
- Travel for employee training and/or range qualifications
- Assistance with county transports when counties have inmates that cannot travel on the shuttle due to medical concerns, escape history, behavioral issues, and high profile or protective custody status
- Release planning – offender field trips and DMV trips for identification cards
- Releases – transport released offenders to the Greyhound station or, for high profile offenders, directly to the parole office
- Transporting offender property, hard files, medical files, or medications when they do not make it on regularly scheduled transfers
- Conducting weekly Northwest Shuttle from Salem to Siskiyou County, California

**How many transport vehicles does DOC own/lease, and what are the variations in costs?**

DOC transport currently has 43 vehicles assigned to the unit. Thirty-three vehicles are leased as outlined below:

- 14 sedans with monthly lease costs ranging from \$50 to \$380
- 17 full-size vans from \$277 to \$309 per month
- 1 mini-van at \$256 per month
- 1 Jeep at \$259 per month

DOC owns the remaining 10 specialty vehicles, which include:

- 4 wheelchair accessible vans for offender transports
- 3 mini-buses that bridge the gap between a full-size van and a Motor Coach Industries (MCI) bus, to maximize cost savings associated with transporting larger groups of adults in custody
- 3 large Motor Coach Industries (MCI) buses for the mass movement of adults in custody throughout the state (holds 34 to 36 passengers).

**What is the "full cost" of inmate transport costs including staff, vehicle repair, maintenance costs, insurance, operating supplies, and capital outlay?**

The chart on the next page lists all costs associated with inmate transports through March 31, 2013, of the current biennium. Auto insurance costs are not listed separately on the chart below as those costs are folded into the single invoice DOC pays to DAS to cover all our vehicles; the costs are not itemized by division or vehicle. DOC's cost for auto insurance for the current biennium is \$33,243.

<b>DOC Transport Costs</b>			
<b>July 1, 2011 – March 31, 2013</b>			
<b>Category</b>	<b>Sub-Category</b>	<b>Total expended to date</b>	<b>Average monthly cost</b>
Personal Services	Personal Services	\$10,020,142.00	\$477,149.62
Overtime	Overtime	\$207,582.00	\$9,884.86
Travel In-State	Travel for meetings	\$6,365.24	\$303.11
Travel Out of State	Extraditions & Interstate Compact	\$33,084.12	\$1,575.43
Travel Training	TERT Basic, Less Lethal, OC training	\$16,381.08	\$780.05
Transportation of State Wards	State Ward Reimbursements	\$75,254.46	\$3,583.55
Vehicle Lease	Motor pool Lease	\$161,832.05	\$7,706.29
Security Modifications	Caging vehicles	\$23,260.76	\$1,107.66
Fuel	Fuel	\$312,316.02	\$14,872.19
Vehicle Maintenance and Repairs	Vehicle maintenance & repairs for own	\$141,835.72	\$6,754.08
Copier Lease	Copier lease and supplies for five copier	\$17,692.68	\$842.51
Security Equipment	Vests, Taser Cartridges, Targets, Holste	\$15,538.82	\$739.94
Alarm monitoring for four offices	Alarm monitoring for four offices	\$1,517.30	\$72.25
CDL/Biomed/DMV	CDL licensing, drug & U.A. testing, and	\$3,351.01	\$159.57
Staff Uniforms	Uniform shirts and pants for staff	\$3,161.31	\$150.54
Keys for residence	Replacing keys and locks for Res. # 5 &	\$392.10	\$18.67
Cleaning supplies for four offices	Vehicle cleaners, disinfectant, portable bus toilet cleaner, garbage bags for property and residences, gloves, paper cups, toilet paper, paper towels, toilet seat covers, four offices	\$6,481.13	\$308.63
Replacement of damaged property	Eye glasses, two legal boxes and CD pla	\$334.15	\$15.91
Plaques	Plaques, Officer of the quarter & Office	\$434.00	\$20.67
PGE	Electricity	\$8,990.69	\$428.13
Ammunition	Duty and training ammunition replaceme	\$9,060.00	\$431.43
Staff Coats	Replacement coats for inclement weather - one time expenditure	\$17,201.64	\$819.13
Paint & materials	Paint and materials for Transport office	\$186.52	\$8.88
Employee relocation	Relocation - one time expenditure	\$4,358.17	\$207.53
Totals		\$11,086,752.97	\$527,940.62

**What are the costs associated with medical transports?**

Below are transport costs associated with medical transports for the period of January 1, 2012, through December 31, 2013.

Cost Straight Time (+) OT Costs = Overall Costs for Medical Transport

Salem – 329,928 + 36,878 = \$366,806

Ontario – 88,901 + 10,838 = \$99,739

Umatilla – 303,904 + 30,559 = \$334,463

Madras – 44,911 + 4,194 = \$49,105

Transport Total – 767,644 + 82,469 = \$850,113

**How do we expect the 2015-17 and 2017-19 Community Corrections budget to roll out? Is it artificially lower?**

There were two main cost control factors used when completing the 2012 Actual Cost of Community Supervision study. As part of the Public Safety Checklist (PSC) Implementation, the workgroup was tasked with selecting the current risk tool cut-off scores. The specific purpose with this decision point was to balance what is an acceptable public safety risk with a palatable Community Corrections budget.

Once the cut-off scores were determined, the next cost control factor was to freeze the rate per hour. This was needed because the Oregon Association of Community Corrections Directors (OACCD) had made the policy decision to collapse the “low” and “limited” risk level groups. When we made those adjustments in our calculations, it dropped the hours of supervision per month, which resulted in an increased rate per hour. Therefore, the group chose to freeze the rate per hour to prevent any increases to the overall cost when workload shifts were made.

Most importantly, OACCD made the policy decision to accept a Community Corrections budget amount that is significantly less than the budget calculated using the traditional budget building process and submitted by way of a Policy Option Package. Of interesting note is that the budget supported by OACCD is also significantly less than the 2007-09 Legislatively Approved Budget (\$225M) that resulted from the 2006 Actual Cost Study. Further, the budget proposed in the Policy Option Package, with the updated forecast, is only slightly more than the 2007-09 LAB.

Should the traditional budget building process be utilized for the (2015-17) budget, it will result in a larger biennium-to-biennium increase than is usually experienced; it almost could be characterized as a “phase in” of the actual cost study. The impact to the 2017-19 budget building would be that we see a return to simple current service level caseload growth plus inflation.

**How many misdemeanants are in each of the three levels of supervision categories? What are the costs for each level? How many misdemeanants are not being supervised?**

The table to the right shows all misdemeanor convictions for 2011 and the available data for 2012. Convictions are broken out by level: A, B, C, and Unclassified. Data was compiled by the Criminal Justice Commission utilizing the Oregon Judicial Information Network (OJIN).

	2011	2012 (not the full year)
	MIS	MIS
	N	N
A	2,2900	14,711
B	3,627	2,303
C	6,753	4,870
U	3,252	2,577
Total	36,532	24,461

The table to the right shows the sentence types for the misdemeanor convictions listed above. The “Other” category reflects sentences such as: Suspension of Licenses, Community Service, Deferred Sentencing, Diversion Programs, and Monitoring Programs. Probation includes formal probation and bench probation.

	Case Year	
	2011	2012
	N	N
Jail Only	5,197	2,993
None	12,102	9,883
Other	1,191	1,509
Post	2	1
Prison	41	34
Probation	17,999	10,041

The table to the right shows the number of Assault 4 and Driving Under the Influence of Intoxicants convictions.

	Misdemeanor Convictions	
	2011	2012
	N	N
Assault-4	1,858	1,121
DUII	5,487	3,476

As for the costs associated with each of the three levels of supervision, there are only a few counties that supervise misdemeanants (and they only supervise certain crimes) they do so with no additional funding, unless they use county general funds.

We are unable to provide the number of misdemeanants that are not being supervised as the state does not track nor fund supervision of misdemeanants.

**How does the cost of supervising misdemeanants compare to supervising a Class C felony?**

Currently, those counties that supervise misdemeanors do so in accordance with the risk/need model used for supervising felons. If the person is high risk, then a greater level of supervision is provided, which increases costs. If the person is low risk, then case bank or limited supervision may be used. It is not possible to take OJIN data and determine the risk level of these individuals; therefore, it is difficult to determine their costs. More analysis would need to be conducted to determine the effect of funding misdemeanors within the current capitated rate formula. Options could include specific misdemeanor categories of crimes, Assault 4 and DUII for example, included in the funding formula.

**List of 2011-13 budget actions and their status for 2013-15 – “what’s continued, what’s not.”**

In the following table, the numbers in the reference column link actions for the same issue in both budget phases: Governor’s Balanced and Legislatively Adopted budgets. Actions noted as ‘permanent’ indicate funding was cut and not restored in the 2013-15 Governor’s budget. Actions noted as ‘one-time’ indicate funding that impact the current biennium but resets for the next biennium by either new forecasts or by DAS.

**Oregon Department of Corrections  
2011-13 Budget Adjustments - 2013-15 Impact**

Budget Phase	2011-13 Budget Development	Actions Included in 2013-15 GBB	Ref.	Explanation
<b>2011-13 Current Service Level Budget - Agency Request</b>	\$1,526,439,274	\$ -		
<b>Adjustments in Governor's Budget:</b>				
Continuation of 2010 allotment strategies	(6,856,032)	-		Permanent Base reduction
Standard inflation eliminated and service charge rate reductions	(14,935,398)	-		Permanent Base reduction
5.5% Reduction to all Personal Services - statewide	(47,017,869)	-		Position funding reset at 6/30/13 level in Base
Substitute temporary/emergency beds for permanent beds	(18,483,232)	-		Continued in 20-3-15; reflected in Base
BM 57 suspension continues	(2,066,220)	-	(1)	Restored by Ways & Means
BM 11 modifications and federal 15% earned time model	(2,948,130)	-	(2)	Restored by Ways & Means
Delay opening permanent beds at Deer Ridge (Madras)	(7,281,170)	-		One-time - integrated into new forecast plan
Eliminate county rental beds	(706,088)	-		One-time - no remaining funding for rental beds
Unspecified "vacancy savings" reduction	(20,000,000)	(10,000,000)		Reduced to \$10M in Governor's Budget
SB 75 - community corrections inactive supervision status	(1,100,000)	-		Repeal of July 2013 sunset proposed in HB 2234
Alcohol & Drug, cognitive and work-based education cuts	(16,623,718)	-	(3)	Partial restoration by 2011 Ways & Means
Debt Service fund-shift to federal stimulus financing	(1,262,825)	-		One-time funding opportunity (ARRA)
Shift core construction-related staffing to General Fund	2,196,296	-	(4)	Net adjustment to Base
BM 73 implements with prison sentences - initiative language	14,639,464	(6,300,000)	(5)	Base adjustment reflecting actual experience
<b>2011-13 Governor's Balanced Budget</b>	<b>\$1,403,994,352</b>	<b>\$(16,300,000)</b>		
<b>2011 Legislative Actions:</b>				
Partial restoration of A&D, cognitive and education programs	12,000,000		(3)	Resulted in net 11-13 reduction of \$4.6M for prgrms.
BM 57 community enhanced treatment reduced to 2009-11 level	(5,000,000)			Reduced \$10M budget w/inflation in 2013-15
BM 73/SB 395 creates reimbursement for 3rd DUI's served locally	(1,994,641)		(5)	Jail housing option eliminates state positions
Unspecified Services & Supplies reduction (6.5% target)	(7,211,803)			Permanent Base reduction
Adjustment to statewide assessments & state government charges	(837,700)			One-time cut to 11-13 DAS Price List items
Debt Service - DAS recalculations & refinances	(3,022,038)			One-time - current refinances
Operations Division management reductions	(1,036,769)			Permanent position eliminations
Legislative management reductions	(1,135,910)			Permanent position eliminations
Re-entry pilot - grants to local communities	1,000,000			Continued in 2013-15 - Base
Central Administration reductions to Services & Supplies	(700,000)			Permanent Base reduction
April 2011 Forecast population adjustments	(1,067,214)			One-time based on specific population forecast
Staffing analysis for Deer Ridge institution	(1,860,692)			Permanent position eliminations
Continued savings from deactivation of OSP minimum facility	(7,002,654)			One-time - still deactivated in 2013-15
Continuation of further 2010 allotment reductions	(835,388)			Permanent Base reduction
Elimination of all vacant BM 57 positions	(14,548,426)			Permanent position eliminations
Transitional Services Deer Ridge positions eliminated	(310,150)			Permanent position eliminations
Deer Ridge double-deduction is restored	8,273,137			One-time technical correction
BM 11 modifications and federal 15% earned time model are restored	2,948,130		(2)	Restored - no further impact
Expanded transitional leave - legislative directive	(500,000)			Permanent Base reduction
BM 57 re-starts on January 1, 2012	2,424,107		(1)	Population now included in DAS Forecast
SB 730 - 60-day cap on jail time for revocations	(9,800,000)			6/30/13 sunset extension requested in SB 70
Various technical adjustments	(905,448)		(4)	Permanent Base reduction
Legislative supplemental ending balance - 3.5% statewide	(48,185,571)			Subsequently restored in Feb. 2012 session
HB 2940 sentence modifications for "strangulation" laws	100,095			Permanent addition to stock population forecast
<b>2011-13 Legislatively Adopted Budget</b>	<b>\$1,324,785,417</b>	<b>\$(16,300,000)</b>		

**Explain the 2013-15 growth and the average bed vacancy rate of 13 percent.**

The table below is an explanation for the 13 percent average vacancy rate. This number does not accurately represent the average vacancy rate for the agency. It does accurately capture the vacant rate of beds planned for activation in 2013-15 when compared to the projected change in the inmate population during the biennium.

Oregon Department of Corrections 2013-15 Population and Bed Capacity Analysis				
2013-15 Biennium		April 2013 Forecast		
		Total	Male	Female
July 1, 2013	Forecast Population	14,600	13,343	1,257
	Bed Capacity	15,040	13,713	1,327
July 1, 2015	Forecast Population	15,021	13,689	1,332
	Bed Capacity	15,646	14,237	1,409
<b>Biennial Change:</b>	Forecast Population Growth for 2013-15	421	346	75
	Population growth not projected for 2011-13	114	114	0
	Bed Capacity Activated in 2013-15	606	524	82
	2013-15 activated beds in excess of population growth	71	64	7
	Vacant beds as % of population growth	13%	14%	9%
	Vacant beds as % of newly activated beds	12%	12%	9%
	Typical vacancy rates for General Purpose		< 2%	8%
	Typical vacancy rates for Special Purpose		13% - 22%	19%

When comparing the net change in a particular biennium between the inmate population and the number of beds activated, the timing of activations, the number of existing general population beds, and the interval between the last unit opened in a biennium and the first beds activated in the following biennium must be taken into consideration. The number of available management beds at the beginning of the biennium is also a factor. The type, or planned use, of the beds is also a consideration.

Virtually all of the beds activated beyond the forecast population for males are a function of opening the first unit at Deer Ridge Correctional Institution late in the biennium (March 2015). Of the 140 beds activated for the final four months of the biennium, only 112 are available for general population; the remaining 28 are special use beds (20 disciplinary segregation beds and eight infirmary beds).

These additional beds will provide general population capacity for the 120 additional males expected to be received between March 2015 and August 2015 when the next housing unit at DRCI is scheduled to open.

**Why would it cost so much to remodel Oregon Women’s Correctional Center (OWCC) to be a medical facility? Why is it \$600 per square foot for new construction? (Provide backup).**

The following is a draft of the revised pricing for the proposed remodel of the OWCC facility for use as an undefined medical facility. This has been prepared by our Facility Services and New Construction staff and reflects the assumptions listed with regard to code compliance and other considerations.

Estimating the cost of converting OSPM to an infirmary requires assumptions as a starting point. Our three basic assumptions are:

1. Conversion to a dedicated medical facility for inmates will be viewed as a “Change in Use” for the purposes of codes application. These “Change in Use” impacts include but are not limited to:
  - a. ADA Access
  - b. Fire suppression and alarm systems
  - c. Seismic Upgrades
  - d. Hazardous Material removal (asbestos, lead paint)
  - e. SEED energy requirements (windows, insulation)
  - f. Mechanical & Plumbing code (HVAC, low flow toilets, etc)
  - g. Electrical (wiring and fixtures)
  - h. 1.5% for Solar
  - i. State Historic Preservation Office (SHPO)
2. Remodel would affect 80% of the building or 20,000 square feet, however, the code required upgrades will apply to the entire 26,000 square feet.
3. The cost of remodeling/retrofitting an existing building is approximately 25% higher than new construction based on recent contracting experience.

DRAFT

Cost Estimate:

1. The costs to develop plans and specifications (design) for remodeling an existing structure was quoted in the range 15% by two different firms who have done work for the department in the past. The percentage is expected to increase if there are additional needs including asbestos abatement or complex seismic retrofit requirements. 17% A/E fee is used in the attached estimate. All legal, construction management, DOC administration, commissioning, plan review and permit, SEED and CM/GC preconstruction fees are identified as Administration Costs in the Summary table below.
2. Our Construction Cost estimate is based on the 2009 Junction City Minimum Medical/Dental area cost estimate, escalated to a 2015 midpoint of construction as shown below in dollars per square foot (\$/SF).

JC Min Dental/Med per program	\$	365
Escalate to 2015	\$	411
Add for remodel (25%)	\$	513
Deduct for structure/reuse (10%)	\$	462
Add for added equipment (5%)	\$	485

3. Below is the summary table of the cost estimates for the contemplated conversion of OSPM into an infirmary/geriatric custody facility.



<b>Summary</b>	<b>Per Sq. Ft.</b>	<b>At 26,000 Ft.</b>
Construction	\$ 481	\$ 12,512,000
Site (solar)	\$ 8	\$ 211,000
Design	\$ 80	\$ 2,088,000
Administration	\$ 88	\$ 2,286,000
Contingency	\$ 99	\$ 2,565,000
<b>Total</b>	<b>\$ 756</b>	<b>\$ 19,662,000</b>

**What is the recidivism rate for the DOC offenders that are housed at Oregon Youth Authority (OYA) and then transferred to the Oregon State Penitentiary (OSP)?**

The department does not track offender's recidivism rate by institution. In order to get an idea of what the recidivism rate is, we pulled data for those offenders who fit this criterion and released in 2008, 2009 and 2010. Our data shows that there were 15 offenders that fit this criterion, five recidivated, which makes the recidivism rate for this group 33 percent.

**What is the recidivism rate for sexually violent and dangerous offenders?**

Our data shows that there are 37 offenders who have been designated as sexually violent and dangerous offenders (SVDO) and have been out of prison for the full three years. Of those 37 offenders, eight committed a new crime, which translates to a 21.6 percent recidivism rate. Of those eight, four committed a new sex crime, which translates to a 10.8 percent sexual recidivism rate. The department's overall recidivism rate is currently 25.6 percent.

**Copy of the All Staff email regarding PREA zero tolerance**

Below are copies of two e-mail messages I've sent to all Department of Corrections staff regarding the department's zero tolerance for sexual abuse and misconduct.

**Email 1 – May 1, 2012**

**From:** Peters Colette S  
**Sent:** Tuesday, May 01, 2012 3:36 PM  
**To:** DL DOC-All - All DOC Employees  
**Subject:** Directors' Comments on Recent DOC Media Coverage

To All DOC Staff,

Some of you may have seen the [article](#) that came out in this Sunday's Oregonian about the Prison Rape Elimination Act (PREA) and custodial sexual misconduct within DOC facilities. This was also the topic of conversation on this morning's Think Out Loud program on OPB Radio – you can listen to the program [here](#).

The Department has and will continue to have a **zero tolerance** policy for this type of behavior. The laws of the State of Oregon and the rules and policies of the Department are clear: Having a sexual relationship with people in custody is an inherent abuse of power, endangers public safety, endangers the safety of our prisons, and is a crime.

This is a sobering reminder that we must hold ourselves accountable for our actions. As we've said before, if you feel you are on a path to an inappropriate relationship, regardless of its nature, contact a peer, supervisor or other management staff member as soon as possible. There are many people who will

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recognize your strength in coming forward and who can help stop the behavior before an inappropriate and illegal line is crossed.

As another reminder, please read the attached [email](#) that we sent to all staff in September 2008 regarding inappropriate relationships between staff and inmates. Please engage in discussions about this with your peers and supervisors.

We share in the collective disappointment that these circumstances raise for the entire department. The actions of a few impact all of us and we must work together to continue to uphold the mission and vision of the Department, while rebuilding trust from the public in the good work that we do every day.

While cases like these shed a negative light on the Department, we know that the majority of you work hard to model pro-social behavior, keep our facilities safe, help us fulfill our mission, and ultimately provide outstanding public service each and every day. Thank you for the dedication and commitment that you demonstrate in your work. I know that we will continue to work together in upholding the mission, vision and values of the Department.

Sincerely,



Colette S. Peters  
Director



Mitch Morrow  
Deputy Director

### **Email 2 – February 22, 2012**

**From:** Peters Colette S  
**Sent:** Friday, February 22, 2013 8:05 AM  
**To:** DL DOC-All - All DOC Employees  
**Subject:** Preparing for Upcoming PREA Audits

To All Staff,

This year, the department will enhance our efforts on the Prison Rape Elimination Act (PREA) and our zero-tolerance policy toward sexual abuse. In 2012, the U.S. Department of Justice finalized and published national PREA standards for all prisons, jails, lockups, and detention facilities in the United States. Compliance with the standards is required and audits of our facilities will begin this August.

#### **Past Work**

DOC began implementing PREA strategies in 2005. Since that time, the department has made great strides towards creating safer prisons. Thanks to the hard work of many staff, we have been nationally recognized for our PREA efforts. We will continue to build on this work to prevent, detect, and respond to sexual assaults in all DOC institutions.

In September 2011, DOC was awarded a grant from the Bureau of Justice Assistance. The grant money allowed us to conduct assessments at five facilities. These assessments were comprehensive in nature and

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were intended to identify areas where policy, practice, and institution culture either enhance or hinder our ability to meet PREA standards.

Next Steps

Jennifer Black, PREA Administrator, is working with all institutions and divisions to prepare for the audits. In late 2012, DOC established a PREA work group to address these important measures. We have identified gaps between where we are today and what it will take to achieve compliance with the published standards and are working diligently toward closing those gaps. Over the coming months, we will continue to send information about the department's efforts.

The importance of our ongoing efforts to eliminate sexual assault in our institutions cannot be overstated. Stopping abuse is essential to operating safe prisons. Our work in establishing compliance with the PREA standards will assist us in meeting our mission.

Thank you for your diligent work regarding PREA. If you have any PREA-related questions, please contact Jennifer Black.

Sincerely,



Colette S. Peters  
Director



Mitch Morrow  
Deputy Director

## Demographics for the Thirty-three Cases Referred for Early Release

Health Conditions Included	Crimes Included	Release dates	Institutions
Brian Injury	Aggravated Theft	2 offenders with a 2011 release date	6 offenders located at CCCF
Leukemia	Assault	6 offenders with a 2012 release date	2 offenders located at CRCI
Cardiac	Burglary	9 offenders with a 2013 release date	1 offender located at DRCI
COPD	ID Theft	4 offenders with a 2014 release date	3 offenders located at OSCI
Heart Disease	Manslaughter II	3 offenders with a 2015 release date	10 offenders located at OSP
Liver Disease	Murder	3 offenders with a 2017 release date	6 offenders located at SRCI
Pancreatic Cancer	Possession of Meth	1 offender with a 2018 release date	5 offenders located at TRCI
Renal Failure	Rape	1 offender with a 2020 release date	
Brian Tumor	Robbery	1 offender with a 2025 release date	
Lung Cancer	Sexual Penetration	3 offenders serving a life sentence	
	Sodomy		
	Theft		