



Oregon

John Kitzhaber, MD, Governor

Department of Corrections

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RE: Responses to questions asked during Ways and Means presentation on February 13, 2013

Dear Ways & Means Public Safety Subcommittee Members:

Below is information to the questions that were asked during the Oregon Department of Corrections' (DOC) Ways & Means Public Safety Subcommittee presentation on Wednesday, February 13, 2013.

1. Is Marion County the only county with a re-entry program?

Chemeketa Community College's SOAR program is the only transition program done in a partnership with community corrections. While there are transition programs in several other counties, this is the only one of its kind.

2. Mileage for off-site trips broken out by type of trip. (i.e. medical, court, etc.)

	DOC Transport Mileage					
	2007	2008	2009	2010	2011	2012
Transfers	336,225	347,259	303,023	296,413	339,560	316,577
Medicals	192,594	212,782	249,983	232,132	235,079	244,272
Court Trips	5,773	3,575	2,758	2,159	4,542	2,351
Extraditions	3,450	2,068	3,452	4,048	2,508	3,312
Interstate Compact Transfers	1,567	1,512	1,104	1,590	1,693	1,986
Other	17,377	42,083	42,431	21,210	20,660	17,571
	556,986	609,279	602,751	557,552	604,042	586,069
						3,516,679

The Madras Transport Office opened September of 2007 and those miles are included from that date.

The category labeled "Other" includes transports such as - hospital watches, parolees, approved bedside visits for inmate on self-pay trips to visit family members deemed terminally ill, approved inmate self-pay trips for body viewings of deceased family, Northwest Shuttle, Training, and Administrative functions (i.e. meetings, travel, security audits).

3. What are the overtime costs associated with medical trips?

Institution	Hospital Watch Post Regular Time Hours	Hospital Watch Post Overtime Hours	Hospital Watch Post Holiday Pay Hours	Additional OT Hours Exceptions
CCCF	5501.17	514.08	188	
CRCI	10094.42	223.82	280	1673.5
DRCI				1626.52
EOCI	7863.89	486.96	200	531.31
MCCF	5040	500.5	216	81.5
OSCI	2910.75	276.25	76.5	101.33
OSP	3527.5	353.75	64	1179.51
PRCF				24.25
SCCI				14.25
SCI				174.49
SRCI	7383.42	167.34	166	3893.37
TRCI				7324.52
WCCF				142.58
Total Hours	42321.15	2522.7	1190.5	16767.13
* Step 4 CO	\$1,533,718			
** Top Step CO		\$149,722	\$70,656	\$995,129

- Step 4 officer wages for regular hours considered – staff with less seniority may occupy hospital watch posts. Regular rate wages used \$36.24 (includes OPE)
- Top step officer wages for overtime rates considered because overtime is assigned by seniority. Topped out officers will secure overtime shifts more frequently than on officer with little seniority. Overtime rates used \$59.35 (includes OPE)

4. What is the reason for incarceration for those 46-60 and those 61 and older?

Offense Group	Age Group	Count	Percent	Offense Group	Age Group	Count	Percent
ARSON	46 TO 60	28	0.80%	ARSON	61 AND OLDER	3	0.30%
ASSAULT	46 TO 60	356	10.70%	ASSAULT	61 AND OLDER	42	5.50%
BURGLARY	46 TO 60	201	6.00%	BURGLARY	61 AND OLDER	9	1.20%
DRIVING OFFENSES	46 TO 60	109	3.30%	DRIVING OFFENSES	61 AND OLDER	16	2.10%
DRUGS	46 TO 60	225	6.70%	DRUGS	61 AND OLDER	25	3.30%
ESCAPE	46 TO 60	3		HOMICIDE	61 AND OLDER	140	18.30%
FORGERY	46 TO 60	2		KIDNAPPING	61 AND OLDER	12	1.60%

Offense Group	Age Group	Count	Percent	Offense Group	Age Group	Count	Percent
HOMICIDE	46 TO 60	468	14.00%	OTHER	61 AND OLDER	23	3.00%
KIDNAPPING	46 TO 60	98	3.00%	RAPE	61 AND OLDER	67	8.80%
OTHER	46 TO 60	189	5.70%	ROBBERY	61 AND OLDER	13	1.70%
RAPE	46 TO 60	304	9.00%	SEX ABUSE	61 AND OLDER	239	31.20%
ROBBERY	46 TO 60	274	8.20%	SODOMY	61 AND OLDER	155	20.30%
SEX ABUSE	46 TO 60	510	15.30%	THEFT	61 AND OLDER	18	2.40%
SODOMY	46 TO 60	369	11.00%	UNKNOWN	61 AND OLDER	1	0.10%
THEFT	46 TO 60	174	5.20%	VEHICLE THEFT	61 AND OLDER	2	0.26%
UNKNOWN	46 TO 60	6	0.20%				
VEHICLE THEFT	46 TO 60	25	0.75%				

5. Where are the inmates who are 46-60 and 61 and older housed? What's their security level?

Location	Age Group	Custody Level	Count	Location	Age Group	Custody Level	Count	Location	Age Group	Custody Level	Count	Location	Age Group	Custody Level	Count	Location	Age Group	Custody Level	Count
CCCF	46 TO 60		17	CRCI	46 TO 60		48	OSCI	46 TO 60		47	SCCI	46 TO 60		17	TRCI	46 TO 60		45
CCCF	46 TO 60		8	CRCI	46 TO 60		23	OSCI	60 and Older		13	SCCI	60 and Older		8	TRCI	46 TO 60		9
CCCF	46 TO 60		51	CRCI	60 and Older		38	OSCI	60 and Older		6	SCI	46 TO 60		94	TRCI	46 TO 60		134
CCCF	46 TO 60		34	CRCI	60 and Older		2	OSCI	60 and Older		4	SCI	46 TO 60		24	TRCI	46 TO 60		154
CCCF	46 TO 60		1	DRCM	46 TO 60		189	OSP	46 TO 60		87	SCI	60 and Older		17	TRCI	46 TO 60		2
CCCF	46 TO 60	UNCLAS SIFIED	10	DRCM	46 TO 60		34	OSP	46 TO 60		17	SCI	60 and Older		1	TRCI	60 and Older		26
CCCF	60 and Older		5	DRCM	60 and Older		41	OSP	46 TO 60		3	SPFC	46 TO 60		27	TRCI	60 and Older		3
CCCF	60 and Older		6	DRCM	60 and Older		1	OSP	46 TO 60		4	SPFC	60 and Older		1	TRCI	60 and Older		52
CCCF	60 and Older		10	EOCI	46 TO 60		46	OSP	46 TO 60		5	SRCI	46 TO 60		63	TRCI	60 and Older		68
CCCF	60 and Older	UNCLAS SIFIED	4	EOCI	46 TO 60		5	OSP	46 TO 60	UNCLAS SIFIED	4	SRCI	46 TO 60		6	TRCM	46 TO 60		25
CCCM	46 TO 60		111	EOCI	46 TO 60		168	OSP	60 and Older		35	SRCI	46 TO 60		238	TRCM	46 TO 60		1
CCCM	46 TO 60		18	EOCI	46 TO 60		145	OSP	60 and Older		2	SRCI	46 TO 60		4	TRCM	60 and Older		4
CCCM	60 and Older		16	EOCI	60 and Older		5	OSP	60 and Older		3	SRCI	46 TO 60		22	WCCF	46 TO 60		91
CCCM	60 and Older		1	EOCI	60 and Older		42	OSP	60 and Older		4	SRCI	60 and Older		38	WCCF	46 TO 60		15
CCIC	46 TO 60		6	EOCI	60 and Older		40	OSP	60 and Older		5	SRCI	60 and Older		2	WCCF	60 and Older		32
CCIC	46 TO 60		1	MCCF	46 TO 60		79	OSP	60 and Older	UNCLAS SIFIED	1	SRCI	60 and Older		3				
CCIC	46 TO 60		3	MCCF	60 and Older		6	PRCF	46 TO 60		1	SRCI	60 and Older		4				
CCIC	46 TO 60	UNCLAS SIFIED	45	OSCI	46 TO 60		57	PRCF	46 TO 60		2	SRCM	46 TO 60		1				
CCIC	60 and Older		3	OSCI	46 TO 60		7	PRCF	60 and Older		1	SRCM	46 TO 60		2				
CCIC	60 and Older	UNCLAS SIFIED	7	OSCI	46 TO 60		43	SCCI	46 TO 60		1	SRCM	60 and Older		1				

6. What would it take to make compassionate release a common practice?

To make compassionate release a common practice, changes to Oregon law are necessary. Since at least 1983, Oregon law (ORS 144.126)¹ has allowed prisoners with severe medical conditions to be released from prison early. The only agency with the authority to make this release decision is the Board of Parole and Post-Prison Supervision. The Department of Corrections, while not the releasing authority, does identify inmates who could be considered for release, develops the release plan, and collects information the Board relies on to make their decision.

Per advice from general counsel, the following inmates are restricted:

- ORS 137.700 since 1995, for inmates sentenced under Ballot Measure 11, the Board has no authority to grant an early release due to a medical condition.
- ORS 137.750, for inmates who committed their crime(s) after June 12, 1997, if the Judge's sentencing order states that the inmate is not entitled to any form of early release, the Board has no authority to grant an early release date due to a medical condition. If a sentencing order states that the inmate is eligible for early release, the Board may grant an early release due to a medical condition as provided in this rule.
- In addition to ORS 137.750 there is Article I, Section 44 of the Oregon Constitution which effectively constitutionalizes this standard: "A term of imprisonment imposed by a judge in open court may not be set aside or otherwise not carried out, except as authorized by the sentencing court."

7. What is the head count of inmates between 2005 and 2012?

OREGON DEPARTMENT OF CORRECTIONS Average Daily Population 2005 -2012		
Year	Date	Average Daily Population
2005	1/1/2005	12,953
2006	1/1/2006	13,199
2007	1/1/2007	13,491
2008	1/1/2008	13,704
2009	1/1/2009	13,964
2010	1/1/2010	14,103
2011	1/1/2011	14,252
2012	1/1/2012	14,248

¹ **144.126 Advancing release date of prisoner with severe medical condition including terminal illness or who is elderly and permanently incapacitated; rules.** (1) The State Board of Parole and Post-Prison Supervision may advance the release date of a prisoner who was sentenced in accordance with rules of the Oregon Criminal Justice Commission or ORS 161.610. The release date may be advanced if the board determines that continued incarceration is cruel and inhumane and that advancing the release date of the prisoner is not incompatible with the best interests of the prisoner and society and that the prisoner is:

(a) *Suffering from a severe medical condition including terminal illness; or*

(b) *Elderly and permanently incapacitated in such a manner that the prisoner is unable to move from place to place without the assistance of another person.*

(2) The board shall adopt rules establishing criteria for release plans for prisoners released under this section that, at a minimum, must insure appropriate supervision and services for the person released.

(3) The provisions of this section do not apply to prisoners sentenced to life imprisonment without the possibility of release or parole under ORS 138.012 or 163.150.

8. What is the number of inmates with ICE detainers and the cost of incarcerating inmates with ICE detainers?

Oregon reports the number of foreign-born inmates in an annual application for federal funding earmarked to partially reimburse states for incarcerating inmates with ICE detainers. That funding is called a "SCAAP" grant, which is short for the State Criminal Alien Assistance Program.

SCAAP funding covers only a small part of the cost of incarcerating those with ICE detainers. As of January 1, 2013, we had 1,233 inmates with ICE detainers. Assuming a population of 1,233 ICE detainer inmates at the 2011-13 biennium cost per bed day of \$84.81 (731 days), the total biennial cost of incarcerating this population is \$76,441,204. DOC received \$4,666,307 in SCAAP federal revenue in the 2011-13 biennium, resulting a net cost of \$71,774,897.

Deportation treaties could spare Oregon some expense of incarcerating inmates with ICE detainers. However, the prevailing public policy is that DOC should hold inmates accountable for their felony crimes committed in Oregon.

9. What options do we have to move inmates with an ICE detainer to federal prisons?

Because these inmates were not charged with a federal crime, but by the state, there are no options to house inmates with ICE detainers in federal prisons.

The department recently entered into a Memo of Agreement on Jan 11, 2010. This agreement allowed for expedited removal of those inmates with ICE detainers, on a voluntary basis, who were not convicted of a person to person felony or Class A misdemeanor; didn't have any other federal, state or local detainers; and had six months or less of to do on their sentence. The screening of these inmates was multifaceted:

- Those inmates who met this criteria were initially screened by the department
- Names were then given to ICE agents for screening, which often included a face to face meeting with the inmate
- Department of Justice reviewed any potential commutations to ensure those offenders being considered did not have pending legal cases
- The department then prepared a packet of information for review by the Governor's office
- Commutation was approved or denied by the Governor

The process proved to be very staff time intensive and resulted in very few commutations. In all, 44 inmates had sentences commuted and were transitioned to ICE custody, saving 4,388 bed days.

The projected savings through this program was expected to be \$2.1 mill (and we received a budget cut in that amount) but resulted in only about \$190,000 savings.

This agreement was utilized for about 6 months, after which time it was suspended due to the lack of realized savings.

10. How many children of offenders are in foster care?

The information below is provided by the Department of Human Services.

Number/Percent of Child Removals Associated with Parental Prison Terms Starting within 4 months of Removal

Year of Removal (Calendar Year)	Number of Removals*	Removals with Parental Prison Terms Starting +/- 160 Days of Removal	% of Children Removed
2006	5,155	1,461	28.3%
2007	4,709	1,343	28.5%
2008	4,586	1,102	24.0%
2009	4,777	1,224	25.6%
2010	4,849	1,322	27.3%
2011	4,470	1,075	24.0%
2012 (Jan-May)**	1,910	543	28.4%

* A child is counted once for each removal during the year

**Prison records through 9/30/2012

11. Update on OHA/DOC report.

DOC and OHA submitted its report to the State Emergency Board. In the report, the following next steps were identified:

- Those products that Oregon Prescription Drug Program (OPDP) /Premier did not have on their contract list need reviewing. The number presented assumed that DOC would buy these products through the OPDP/Premier contract and receive the 5.6% discount or through Minnesota Multistate Contracting Alliance for Pharmacy (MMCAP), whichever is less expensive. Further analysis is necessary for these products. The OPDP/Premier contract allows customers to bring to the buying group's attention products that are not on contract. OPDP/Premier will then seek a contract with the manufacturer.

NEXT STEPS:

1. Determine if DOC can purchase through multiple GPOs.
2. Determine cost comparisons.
3. Build timeline for OPDP/Premier to have contracts in place for those products.
4. This may require commitments to a certain volume of these products.

- 340B price savings should be explored^[1]. One of DOC's most expensive drug treatments is for Hepatitis C and is consuming 15% of their total drug spend. Current 340B prices for this drug are 50% less than what DOC is currently paying.

NEXT STEPS:

1. Continue to explore mechanisms to allow DOC access to 340B pricing.
- DOC purchases a number of non-drug supplies through their MMCAP contract. OPDP/Premier believes they can provide the same supplies but a full review of availability and pricing needs to be completed. The OPDP/Premier contract allows DOC to continue to purchase these supplies from another source, including MMCAP.

NEXT STEPS

1. Determine OPDP/Premier's ability to provide these types of products to DOC and compare prices.
2. Determine if DOC can still receive MMCAP discount on non-drug supplies if not under contract with MMCAP.

These next steps are to be completed by April 1, 2013. DOC and OHA are working collaboratively in order to meet this timeline.

12. Cost of medical care per inmate A) by capacity (daily population) B) people in and out of system (actual numbers).

A) By capacity, the prison population on November 30, 2012, was 14,274, making the average cost of health care \$561 per month, per inmate.

B) People in and out of the system in 2012, the total health care expenditures July 1, 2011 – November 30, 2012, was \$133,594,748, divided by 21,453 inmates passing in and out of the system for the same date range = \$6227 per inmate divided by 17 months = \$366 per month, per inmate.

In comparison, a study conducted by the Department of Health & Human Services stated, "Public and private spending for health care totaled \$2.6 trillion in 2010, or \$8402 per person, according to the Department of Health and Human Services." Dividing the \$8,402 by 12 = \$700 per month in spending per person.

There was also a study printed in the February 2013 issue of Governing magazine about total worldwide health expenditures for 2010. It states, "Americans' health spending per capita topped all other countries in 2010, climbing to \$8,362, divided by 12 = \$697 per month in spending per person according the World Health Organization. The U.S. health tab, about half of which is publicly funded,

^[1] The lowest prices available anywhere in the commercial market are 340B prices. This name comes from the federal code section that authorized the program. The program was authorized in the mid 1990's as a means to provide reduced out-patient drug prices to federally qualified health clinics and teaching hospitals. The program allows the clinics to buy drugs at very low prices and sell them from their own or contracted pharmacy for a "profit." In order for a drug to be purchased at 340B prices, there needs to be two parties. First, the provider that writes the prescription must be employed by a federal qualified entity. Second the clinic or hospital must own or have a contractual relationship with a specific pharmacy, usually located within the clinics facility. If these two conditions are met the drug may be purchased at 340B prices.

more than doubles that of Great Britain, Japan, and New Zealand – all which provide universal health care.”

13. What are the health care costs per inmate on dialysis?

Our current dialysis contracted rate is \$369 per treatment. With 23 inmates on dialysis, the total cost for dialysis per week is \$26,199. The current contract recently came up for renewal. The rate for the new contract begins on July 1, 2013, and the new rate will be \$350 per treatment.

Dialysis Schedule	Cost Per Inmate Per Week	Cost Total Per Week
2 inmates receive dialysis twice a week	\$ 738.00	\$ 1,476.00
17 inmates receive dialysis three times a week	\$ 1,107.00	\$ 18,819.00
4 inmates receive dialysis four times a week	\$ 1,476.00	\$ 5,904.00
Total Cost		\$ 26,199.00

14. Provide some examples of the costs for some of our high-end medical cases.

Top 5 high dollar inmates:

1. Female patient is currently an inmate at CCCF, dollar amount reported to date is \$254,295.00

This patient is diagnosed with End Stage Renal Disease secondary to hyperparathyroidism and anemia. Because we don't have dialysis at CCCF, this patient requires dialysis in the community setting which is the primary reason she makes the top 5 list of high dollar medical care inmates.

2. Male patient expired 7/25/2012, dollar amount reported to death is \$241,522.00

This patient was diagnosed with End Stage Renal Disease, Chronic Ischemic Heart Disease with multiple myocardial infarctions, Chronic Systolic Heart Failure and Kidney Failure. This patient was treated multiple times at Kadlec Medical Center in Richland, Washington.

3. Male patient is currently an inmate at OSP, dollar amount reported to date is \$224,428.00

This patient was an SRCI inmate who sustained major trauma, post-assault. He was diagnosed with a closed C1-C4 spinal cord injury. His injuries resulted in quadriplegia and will require ventilator assistance to sustain life. This patient was air lifted on two occasions and was admitted to Vibra Specialty Hospital for stabilization before returning to an ODOC infirmary. Additional costs were incurred due to complications from injuries.

4. Male patient paroled from ODOC 2/5/2013, dollar amount reported to parole is \$165,219.00

This patient received a diagnosis of malignant neoplasm of the rectum, colon, stomach, brain and spinal cord. He also suffered acute kidney failure/chronic kidney disease. This patient was admitted to OHSU on multiple occasions, last admit at OHSU was 12/21/2012 – 12/27/2012.

5. Male patient currently lives in the Mental Health Infirmery at OSP. Dollar amount reported to date is \$143,468.00

This patient has been hospitalized for multiple self-injurious episodes of ingestion of a wide variety of foreign bodies. This behavior has resulted in trauma to the patient's digestive system including the larynx, esophagus, stomach, appendix, intestines and colon. In addition, the patient has suffered cardiac related complications. Medical Services and Behavioral Health Services work closely to manage this patient's self-injurious behaviors.

15. Provide a trend of health care costs over the past 10 years.

Biennium	Health Services GF/FF Expenditures	\$ Increase from Prior Biennium	% Increase from Prior Biennium
2003-05	\$90,327,372		
2005-07	124,536,828	34,209,456	38%
2007-09	165,042,563	40,505,735	33%
2009-11	183,437,018	18,394,455	11%

16. What savings have we seen from our partnership with our TPA?

From the 07/09 biennium to the 09/11 biennium we saw a reduction in the rate of increase of offsite expenditures. This reduction occurred with the execution of the new Third Party Administrative contract. Further, our 11-13 projections reveal a flattening of offsite expenditures.

The reduction and flattening are a result of the following:

- Discounted Provider Network: we were previously paying 100% of billed charges to most medical providers and facilities. We pay an average of 70-80% of billed charges.
- Denied Services and fewer offsite bed days: our offsite care case management reviews offsite care charges for clinical efficacy as well as cost efficiency. A group of providers makes decisions daily on the denial or payment of offsite care based on national standards

17. What outcomes can we share about our partnership with our TPA?

The role of the third party administrator is to:

- Case manage inmates receiving hospital care;
- Offsite care claims management and bill review;
- Provision of a discounted network of hospitals and specialty providers; and
- Delivery of offsite patient data to DOC

The outcomes we have experienced with our TPA are:

- Fewer hospital bed days;
- A discounted provider network;
- Offsite care case management;
- Data housing and reporting;
- Claims processing with auditing to prevent erroneous billing practices which can lead to overpayment.

18. What is the predominant medical issue within the 61 and older age group?

- 516 of our 61 and older age group suffer from Hypertension
- 301 of our 61 and older age group suffer from High Cholesterol
- 203 of our 61 and older age group suffer from Diabetes

19. How many inmates have multiple chronic illnesses?

We have a total of 5,814 inmates with at least 1 chronic illness and of the 5,814 inmates, we have 2,830 with at least 2 chronic illnesses.

20. For off-site medical care, what is the reason for the increase between 05-07 and 07-09?

From the beginning of the 2005-07 biennium through the end of the 2007-09 biennium, our population increased by 1,000 inmates.

Also, during this time frame, our former Third Party Administrator (TPA) was paying costs at 100% of billed charges. We entered into a contract with a new TPA beginning 7/1/2009. This TPA has aggressively pursued a discounted provider network.

21. Breakdown of mental health diagnoses.

As of February 1, 2013; 7,140 inmates, approximately 50 percent, of the total inmate population have been diagnosed with a mental health disorder. Below is a breakdown of those inmates, broken out by acuity levels and the common types of diagnoses in each level.

Mild - Benefit from Treatment (MH1): 2, 497 Inmates

- ADHD
- Gender Identity and sexual disorders
- Substance abuse related disorders
- Delirium due to medical condition
- Impulse Control Disorder
- Anxiety Disorder NOS
- Tourette's disorder
- Antisocial personality disorder
- Phobia, social/other
- Adjustment disorder

Moderate Treatment Needs (MHR): 1,374 Inmates

- Anyone diagnosed with mild mental health need but under observation for suspect of major mental illness diagnosis
- Anyone diagnosed with mild mental health need that is treated with medication
- Anyone diagnosed with mild mental health need with a moderate or severe acuity level
- Anyone who recently attempted suicide (had no current mental health diagnosis)

Severe Mental Problems need (MH2): 2,323 Inmates

- Delusional Disorder
- PTSD
- Dysthymic Disorder

- Obsessive Compulsive Disorder
- Major Depression Single Episode
- Agoraphobia
- Generalized anxiety disorder
- Brief Psychotic disorder
- Pervasive Developmental disorder NOS
- Borderline Personality disorder
- Cyclothymia
- Panic disorder
- Anorexia

Highest Treatment Need (MH3): 946 Inmates

- Schizophrenia
- Schizoaffective disorder
- Bipolar I and II
- Dementia; Vascular; due to medical condition; Alzheimer's Type; NOS
- Schizophreniform
- Psychosis NOS
- Psychotic disorder due to medical condition
- Major Depressive disorder, recurrent

Acuity Level	Number of Inmates	Percent of Population
Mild - Benefit From Treatment	2497	17%
Moderate Treatment Needs	1374	10%
Severe Treatment Needs	2323	16%
Highest Treatment Needs	946	7%
Total	7,140	50%

22. Has there been an analysis done regarding maintenance vs. new construction?

The department has not done a cost analysis regarding the cost of maintenance versus new construction. However, the department uses a "zero-base" budgeting approach when developing budgets for the opening of new prisons or housing units within existing facilities. The budget is literally developed from itemized lists of staff, by position/classification and post, quantities of medical and operational supplies, weapons and ammunition, physical plant and kitchen tools, equipment, furniture, etc., and are all individually priced by room, office, and housing unit. The budgets for treatment and education programs are also developed based on the institution mission and objectives.

The Rough Order of Magnitude (ROM) estimate and breakdown to replace the function of the Oregon State Penitentiary with a new facility on the same site is \$489M. Currently, OSP contains approximately 710,000 SF and we assumed 2000 medium and higher custody beds. Our ROM is based on the CCCF/DRCI proto-typical design. The costs are based on the DRCI medium construction costs, Junction City estimated costs, Coyote Ridge (WA) construction cost all escalated to a mid-point of construction in 2017. The costs do not include any inmate re-location costs or start-up costs for the new facility nor any historical preservation costs.

Regarding our maintenance costs, below is what the department has spent to maintain OSP for the last two bienniums, and what we project will be spent in the current biennium.

	07-09 Actuals	09-11 Actuals	11-13 Projected Actuals as of 12/31/2012
Physical Plant Staff Costs	\$3,681,508	\$3,839,875	\$4,237,687
Maintenance/utilities	\$7,525,258	\$6,989,386	\$6,346,902
Total	\$11,206,766	\$10,829,261	\$10,584,589

24. Have we looked at the feasibility of OSPM as an infirmary facility?

The total cost for a conversion of OSPM into a medical infirmary is approximately \$15 million. We assume we would be required to upgrade wiring, and the majority of the building systems and equipment.

The new construction cost of infirmary at DRCI was \$600 per square foot. With the required design work, we believe the OSPM conversion will be closer to \$750 per square foot for a renovation.

If we are correct in assuming that there will be no work in culinary or the administration areas beyond code change requirements, which would leave us with 20,000 square feet being renovated and give us approximately 53 beds.

We estimate the structure costs will be about \$75 per square foot, with the remainder of the costs per square foot being infrastructure costs. The costs may seem excessive, but retrofit construction is significantly more expensive than new construction.

25. Have we analyzed the cost-effectiveness of switching to liquid natural gas?

Converting Vehicles from Gas to Propane:

	Natural Gas	Propane
Per Vehicle Conversion Cost	\$5,000-\$6,000	\$4,000-\$12,000
Quick Fill Compressed Natural Gas Fueling Statement	\$100,000	N/A
Slow Fill (could take up to 4 hours) Natural Gas Fueling Statement	\$50,000	N/A
Propane Filling Station – Mobile	N/A	\$25,000*
Propane Filling Station – Permanent	N/A	\$175,000*
Number of Filling Stations already in Oregon	Very Few	33 (only a few could benefit DOC – they are in Salem, Portland, Madras, Hermiston, The Dalles)

*we can also explore having a propane supplier donate the filling station to use for buying the fuel from them, but they like to have at least ten (10) vehicles using it.

Both propane and natural gas is low carbon and low oil contamination results in longer service life and lower maintenance.

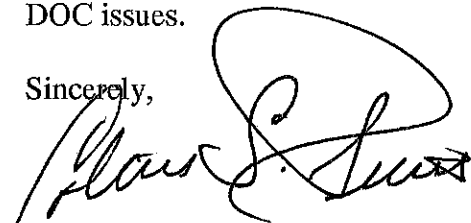
DOC is currently working with ODOT (who has already converted their big trucks) and the State Motor Pool to explore propane conversion of some or all of our fleet.

26. How many children are connected to offenders at CCCF?

Approximately 20,000 to 25,000 children in Oregon have parents in prison. Of the male inmates coming through intake, about 57% have children. Of the female inmates coming through intake, about 68% have children. Both male and female inmates who are parents average 2.5 kids a piece.

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

Sincerely,

A handwritten signature in black ink, appearing to read "Colette S. Peters". The signature is written in a cursive style with a large, looping initial "C".

Colette S. Peters
Director



Oregon

John Kitzhaber, MD, Governor

Department of Corrections

Office of the Director
2575 Center Street NE
Salem, OR 97301-4667
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March 12, 2013

Senator Jackie Winters, Co-Chair
900 Court St. NE, S-301
Salem, OR 97301

Representative Jennifer Williamson, Co-Chair
900 Court St. NE, H-372
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Senator Doug Whitsett
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Representative Bruce Hanna
900 Court St. NE, H-382
Salem, OR 97301

RE: Responses to questions asked during Ways and Means public testimony on February 14, 2013

Dear Ways & Means Public Safety Subcommittee Members:

I'd like to provide follow-up information to the questions that were asked during the Oregon Department of Corrections' (DOC) Ways & Means Public Safety Subcommittee public testimony on Thursday, February 14, 2013.

1. Would we save money with increased post relief factor?

We are gathering this data and will provide information on this in a separate response.

2. Post Relief Factor – how long do we assume positions to remain vacant? (Why does it take four to six months to get hired)

Eighty-five percent of all DOC's security posts are fixed posts and are staffed twenty-four hours a day, seven days a week. At no time are fixed posts vacant.

An applicant may be on the approved list without being hired for an undetermined amount of time based on their score, selected area of availability (location), and the need in the selected area (vacancy). DOC averages an 8 -10 percent vacancy rate; however, the vacancy rate in the valley is much lower. The department maintains a list of security applicants approved for hire to fill vacancies as needed.

3. Work with DOC on getting workers comp claims down.

Given the size of our agency, we may always be near the top of the list for number of claims. However, according to OR OSHA, DOC has fewer injuries per 100 employees in the same Standard Industrial Class (SIC) code. DOC is working towards a day when we have zero accidents to report.

The DOC measure for tracking Workers Compensation time loss days compares the average number of days a standard pool of employees (100) is off work due to a reported injury. This standardized approach is intended to facilitate comparison with other agencies having a similar measure. In order to truly see how low the incident rate is for the department, we need to convert everything to a common denominator – numbers of days.

During the report period, each of the 100 employees works an average of 260 days, which produces a total days worked of 26,000 (100 employees time 260 days).

Employees in the pool 100

Annual work days scheduled per employee 260

Total annual scheduled work days – 100 employees 26,000

Days off-duty for an average 100 employees 57

Comparing the 57 days off-duty to the total scheduled work days for the 100 employees (26,000), produces a Workers Compensation “off-duty” rate of just over 2 tenths of 1% (0.219).

4. Cost analysis on overtime related to furlough days.

For management and executive service employees and most non-security staff, this played out simply as unpaid days off, with no backfill to address ongoing workload.

For security staff and other employees working inside institutions, the DOC worked with labor organizations to develop alternative approaches for meeting the mandated furlough obligation. The primary objective being to minimize overtime costs associated with backfilling a post impacted by an employee out on a furlough day. Options included a reduction of the holiday premium pay differential (employee actually works the holiday, but does not get the full multiplied differential), taking furloughs during the course of a bid vacation week and a direct salary reduction. All of these options have helped to reduce the impact of managing the overtime costs resulting from mandated furloughs.

Overtime cost for backfilling behind posted staff out on furlough leave was \$606,048 through November 26, 2012 and is expected to cost approximately \$856,000 for the entire 2011-13 biennium. This is an unfunded liability to the DOC that must be absorbed by savings in other areas. The overtime cost for a furlough backfill will certainly add cost as a result of the time-and-a-half multiplier, but the cost differential will also be impacted by the pay range of the furloughed staff and the overtime replacement. Since overtime bids are seniority-based, overtime shifts typically are given to senior staff in higher salary brackets. There has not been any individual position-by-position analysis done on this process.

5. What is the medical retirement trend?

The department tracks employees who retire but not by the reason for retirement. PERS records show 78 DOC retirements in 2012; two were duty disability retirements (there were no non-duty disability retirements).

6. Explain the drop in community corrections funding.

We are gathering this data and will provide information on this in a separate response.

7. What would it cost to open OSPM as an infirmary and geriatrics facility?

The structural cost for a conversion of OSPM into a medical infirmary is in the neighborhood of \$15 million. Our assumption is that we would be required to upgrade wiring, and the majority of the building systems and equipment. This estimate does not include administrative and staffing costs.

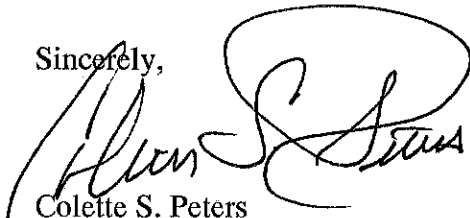
The new construction cost of infirmary at DRCI was \$600 per square foot. With the required design work we believe the OSPM conversion will be closer to \$750 per square foot for a renovation.

If we are correct in assuming that there will be no work in culinary or the administration areas beyond code change requirements, which would leave us with 20,000 square feet being renovated and give us approximately 53 beds.

We estimate the structure costs will be about \$75 per square foot, with the remainder of the costs per square foot being infrastructure costs. The costs may seem excessive, but retrofit construction is significantly more expensive than new construction.

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



Oregon

John Kitzhaber, MD, Governor

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RE: Responses to questions asked during Ways and Means public testimony on February 18, 2013

Dear Ways & Means Public Safety Subcommittee Members:

I'd like to provide follow-up information to the questions that were asked during the Oregon Department of Corrections' (DOC) Ways & Means Public Safety Subcommittee presentation on Monday, February 18, 2013.

1. How many offenders with misdemeanor's are supervised in the counties? How many are not being supervised?

Twenty-eight of the thirty-six counties responded to a recent survey requesting this information. Of those that responded:

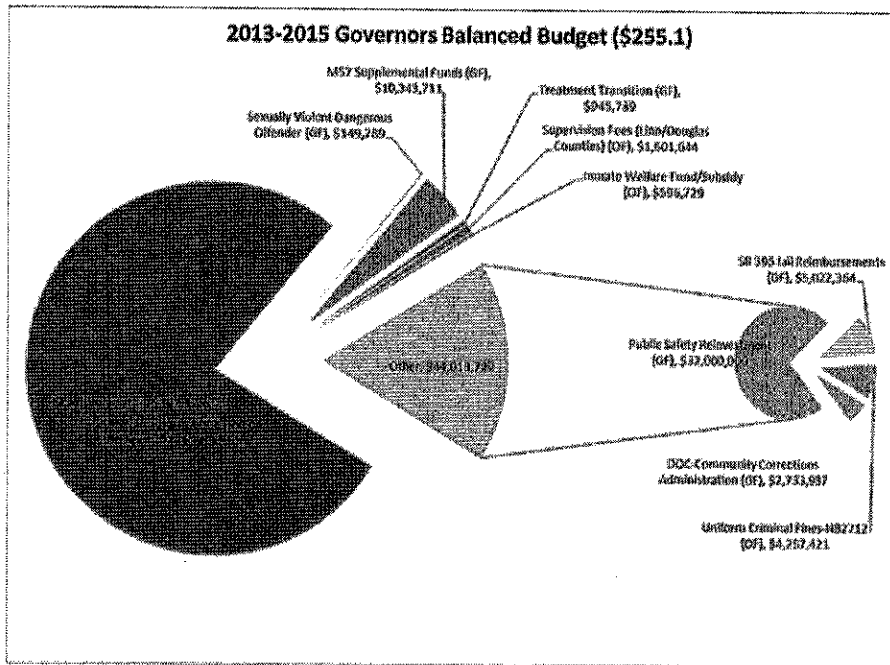
- 26 supervised misdemeanors through community corrections
- 1 supervises misdemeanors through a private company or courts
- 1 did not provide misdemeanor supervision.

2. Are other counties using a private firm like Klamath County?

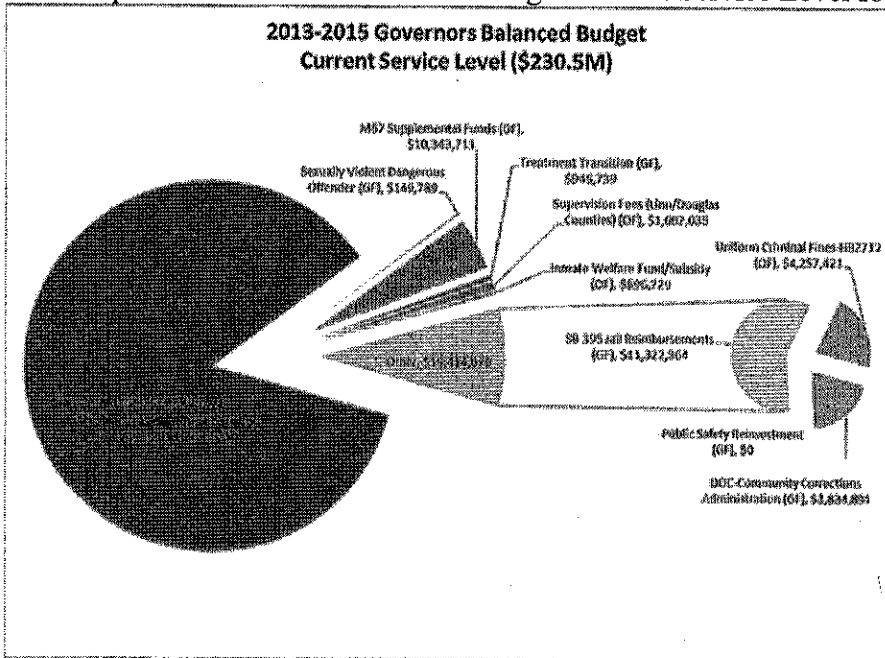
Of the twenty-eight counties that responded to the survey, Klamath County is the only county that reported using a private firm.

**3. Provide chart with only CSL. And provide Community Correction funding pie charts using:
a.) The \$230 million CSL proposed budget b.) The \$230 million CSL proposed budget corrected for PERS savings in the event that the PERS savings does not occur.**

Below is the chart that was in DOC's Ways and Means presentation for comparison with the requested chart using only CSL.



Below is the requested Governor's Balance Budget Current Service Level for Community Corrections



The difference between GBB and GBB-CSL are the 4 components listed below.

Governor's Balance Budget	\$230,477,753
CSL	
May 2012 EBoard Reduction	(\$791,678)
PERS Policy Reductions	(\$309,670)
SB 395 Reduction (10% Plan)	(\$6,300,000)
Public Safety Reinvestment	\$32,000,000
Governor's Balanced Budget	\$255,076,405

The PERS policy recommendation component is (\$309,670) (all funds)

- o (\$309,279) reduction was taken from DOC-Community Corrections Administration (GF)
- o (\$391) reduction was taken from Supervision Fees (Linn/Douglas Counties (OF)

4. How many community corrections employees work in the other (non-Linn/Douglas) counties?

Twenty-eight of the thirty-six counties responded to a recent survey requesting this information and reported the following:

- Parole/Probation Officers - 298
- Administrative Staff (ie., Management, HR, Payroll) – 73.6
- Support Staff (ie., Reception, Data Entry, Techs, Aides) -114.2
- Other (ie., in-house treatment staff, evaluators, clinicians, counselors) – 120.25

5. Is DOC working with Energy Trust of Oregon on finding ways to reduce our energy usage and costs?

Energy Trust of Oregon (ETO) funding is available for projects that meet the established criteria. One of the criteria is to be a contributor to the Energy Trust by paying the public purpose charge on our utility bills. DOC pays the public purpose charge on electrical bills for some institutions and has received incentive funds from ETO for projects.

In the past, DOC has not been eligible to apply for ETO funding or incentives on natural gas projects at institutions that are on interruptible natural gas service. However, in recent discussions with the Energy Trust they have indicated that we may now be eligible in some cases.

6. Why do the radios cost so much? What do they give us?

The Federal Communications Commission (FCC) allocates radio frequency spectrum (radio channel) utilization and in doing so sets aside specific frequencies for specific purposes.

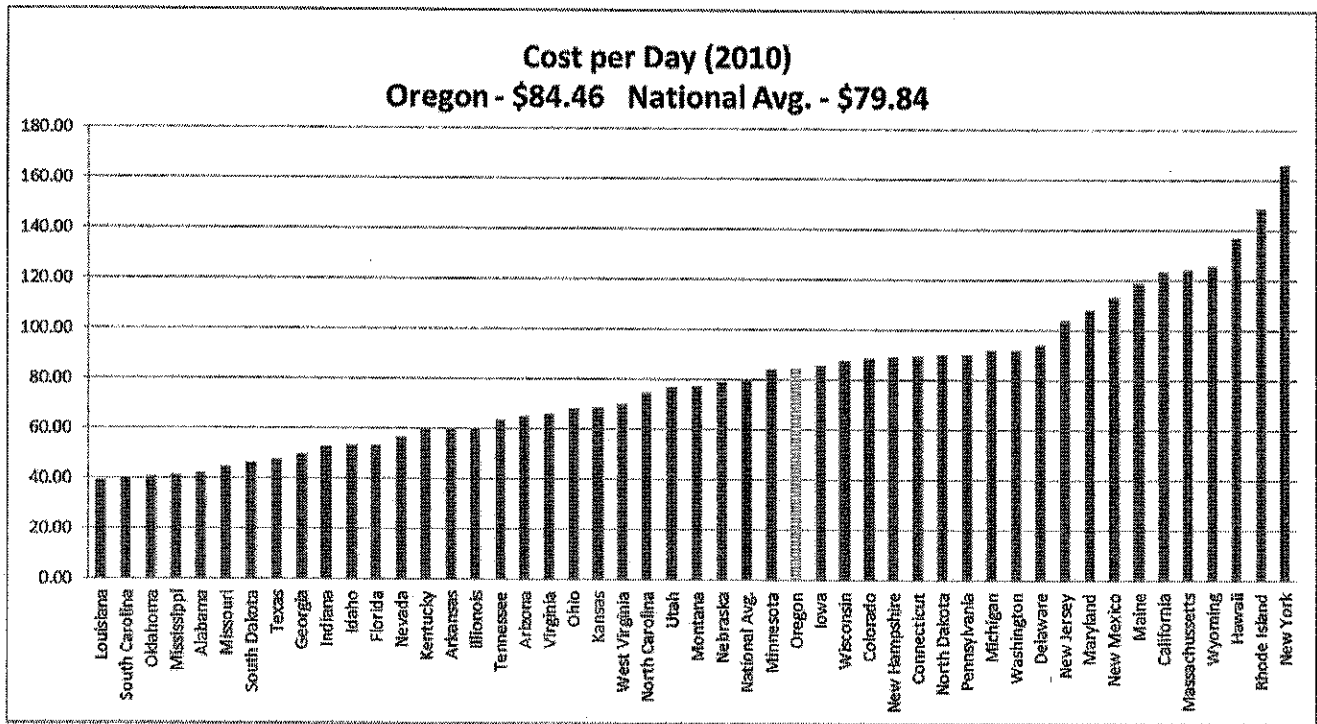
In short, DOC, as a public safety agency and can only use the public safety channels. If DOC used unauthorized channels, it could receive heavy fines from the FCC for unauthorized use of radio channels. These fines can be in the tens of thousands of dollars.

The FCC also certifies radio equipment to operate on specific radio channels. Public safety equipment has stringent certification requirements. Using equipment with a certification other than that intended by the FCC for a particular radio service is not allowed per FCC rules and regulations. To do so could result in fines from the FCC.

Public safety radios are significantly more expensive than those used for other radio channels because the certifications are significantly different. Not only are the electrical specifications more stringent; these radios need to meet military shock, vibration and water submersion standards to hold up to the wear and tear of daily usage. First responders, correctional officers, and military lives depend upon these radios to not only work, but work every time. All these certification, shock, vibration and water submersion requirements make these radios highly reliable with life expectancies of 5 to 7 years operating in a public safety environment.

7. What is the source, origin and the statistical confidence of the comparative bar graph for inmate cost per day among the several states?

The chart we used in our presentation was 2009 information. We thought the source of that chart was NIC but upon further investigation, we found that not to be true. DOC pulled information from the American Correctional Association 2011 Directory and created the updated chart below. As you can see, just like the other chart, DOC is right in the middle.



Data for Alaska and Vermont not available.
 Federal Bureau of Prisons = \$77.49 per day (\$28,284 per year)

8. Can DOC please provide a budget analysis of the effects on each of their divisions in the event that the Governor's proposed PERS reform initiatives are not enacted?

Oregon Department of Corrections			
2013-15 Governor's Balanced Budget			
All Funds			
	PERS Taxaction Policy Pkg 092	Other PERS Adjustments Pkg 093	Division Totals
Operations	(1,519,202)	(12,162,655)	(13,681,857)
Health Services	(322,280)	(2,580,159)	(2,902,439)
Central Administration	(47,056)	(376,729)	(423,785)
General Services	(130,491)	(1,044,705)	(1,175,196)
Human Resources	(35,407)	(283,468)	(318,875)
Community Corrections	(34,385)	(275,285)	(309,670)
Offender Management	(84,631)	(677,552)	(762,183)
Agency Total	(2,173,452)	(17,400,553)	(19,574,005)
In the event that the Governor's proposed PERS reform initiatives are not enacted, DOC's budget would see an increase of \$19,574,005 (all funds).			

**9. Please explain the concept of average daily weighted beds: a.) How is it calculated?
 b.) How is it used in calculation of the average daily inmate cost?**

The weighted average daily bed value is calculated by multiplying the number of beds activated in each month throughout the biennium times the number of days in that particular month. The monthly bed/days are then summed for the 24 months to derive a total biennial bed-day value. This represents the total capacity funded by the budget for that period of time.

In periods of relatively little activity related to new bed activations or deactivations, the weighted average is very close to a simple average. But in periods of significant change, the weighted average value captures the change in a way that should mirror the development of the budget values, which are derived from the timing of opening and closing housing units or beds and the specific number of days in each month. The attached schedule shows the monthly active bed capacity at each institution and the resulting biennial average daily bed capacity.

The budgeted average daily bed cost is computed by dividing the total budget for the elements included in the cost-per-day formula by the average daily bed count and the number of days in the biennium – 731 for 2013-15.

For example; the Governor's Balanced Budget cost elements included in the cost-per-day model total \$1,023,365,359. This is the numerator in the equation. The denominator is the average daily capacity times the number of days in the biennium, or 15,145 times 731 = 11,070,995 (total bed-days in the full biennium). Dividing the included costs of \$1,023,365,359 by the total bed-day value of 11,070,995 produces the budgeted cost-per-day per bed rate of \$92.44 for the Governor's Budget.

$$\frac{\$1,023,365,359}{15,145 \times 731} = \frac{\text{Total Included Costs}}{\text{Avg. Daily Capacity} \times \text{Days in Period}} = \$92.44$$

Oregon Department of Corrections																				
Institution Budgeted Population																				
2013-15 Governor's Balanced Budget																				
Month	Year	Days	MCCF	SFFC	PRCF	SCCI	CRCI	OSP / OSPM	WCCF	OSCI	TRCI	CCCF	EOCI	DRCI	SCI	SRCI	Total BI Avg	Rentals	Total Budgeted Beds	Bed Days
Jul	13	31	290	204	316	302	593	2,308	466	972	1,802	1,777	1,767	787	440	3,142	-	15,136	469,216	
Aug	13	31	290	204	316	302	593	2,308	466	972	1,802	1,777	1,767	787	440	3,142	-	15,168	470,146	
Sep	13	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	455,430	
Oct	13	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,811	
Nov	13	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	455,430	
Dec	13	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,811	
Jan	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,811	
Feb	14	29	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	440,849	
Mar	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,811	
Apr	14	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	455,430	
May	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,811	
Jun	14	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	455,430	
Jul	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,811	
Aug	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Sep	14	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	453,090	
Oct	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Nov	14	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	453,090	
Dec	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Jan	15	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Feb	15	28	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	422,884	
Mar	15	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Apr	15	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	453,090	
May	15	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Jun	15	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,153	454,500	
Total Bed Days		731																		11,070,995
Biennial Average			290	204	316	304	593	2,308	465	936	1,802	1,791	1,767	787	440	3,142	15,145		15,145	
% of Total Beds			1.91%	1.35%	2.09%	2.01%	3.92%	15.24%	3.07%	6.18%	11.90%	11.82%	11.67%	5.20%	2.91%	20.76%				
Share of Rental Beds																				
Total # of Beds			290	204	316	304	593	2,308	465	936	1,802	1,791	1,767	787	440	3,142	15,145			

A printout of this chart is also included in the attachments.

10. The cost per inmate per day (according to DOC) will increase from about \$84 to about \$94 from 11-13 to 13-15 or about 12 percent. What are the drivers for this alarming cost increase?

The cost drivers include rise in salary, benefits, retirements, commodities, healthcare, pharmaceuticals, and no furloughs to name a few. The attached documents show the details, by division, to the cost per day and an agency-wide breakdown of package impacts.

11. What is the average cost per inmate per day when projected CSL 13-15 All Funds, less Community Corrections, is divided by the actual inmate head count?

If we include these it would no longer be cost per day (CPD) because we define CPD as security, housing, health services, programs, education, institution management, social services, food services, physical plant, and inmate work programs.

The agency's approach has traditionally been to include approximately the components that would increase if we add additional inmates.

Because of this, the CPD model does not include Community Corrections, Debt Service, State Government Service Charges (SGSC), and components of Central Administration, General Services, Human Resources, Capital Improvement and Capital Construction.

The information you requested is in the chart below.

Oregon Department of Corrections					
LFO Cost Per Day - Specific Criteria					
All Funds					
2007-09 Biennium through 2013-15					
	2007-09 Actual	2009-11 Actual	2011-13 Projected	2013-15 CSL	2013-15 GBB
Total Agency Expenditures	\$ 1,359,181,968	1,603,530,242	1,400,733,895	1,578,688,220	1,532,302,310
- Community Corrections Expenditures	\$ 219,864,821	222,631,152	199,928,528	230,477,753	255,076,405
Total	\$ 1,139,317,147	1,380,899,090	1,200,805,567	1,348,210,467	1,277,225,905
Average Daily Inmate Population	13,809	14,228	14,170	14,897	14,600
Days Per biennium	730	730	730	730	730
CSL (minus) Community Corrections (divided by) population	\$ 113.02	132.95	116.08	123.97	119.84
Also removing:					
Debt Service	\$ 130,125,291	344,784,117	133,644,598	132,706,940	132,706,940
SGSC	\$ 30,703,143	35,348,813	37,101,698	39,769,663	39,769,663
CSL (minus) Community Corrections (divided by) population	\$ 97.07	96.35	99.58	108.11	103.65

12. What is the DOC's biennial cost for paid leave, and for unpaid leave, including the cost of overtime directly related to leave time?

The graphs below show the cost for paid leave for a two year period ending June 30, 2012, and what the unpaid leave liability to the department was as of June 30, 2012. The cost of overtime, as it relates to leave time, is very complex. The system we currently use to record time and attendance hours is effective, but with regard to being able to definitively say which overtime hours are directly related to absences would be difficult to determine without reviewing every employee's overtime rate for each hour of overtime recorded. However, with the data were are able to filter, the total estimated hours of

overtime for security staff, due to probable absences, from July 1, 2010, through June 30, 2012, was 309,664.33 hours, multiplied by mid step Sergeant overtime rate of \$60.00 per hour, equals approximately \$18,579,859. We are working to develop a more clearly defined process to identify actual overtime drivers.

Leave Paid Report for Two Years Ending June 30, 2012

LV Type	Description	Leave Paid	Leave Paid with OPE
CT	Comp Time	989,999.22	1,410,748.89
DH	Donated Hardship	299,659.48	427,014.76
EL	Educational Leave	103,561.12	147,574.60
FL	Funeral Leave	721,433.96	1,028,043.39
GL	Governor's Leave	237,721.66	338,753.37
IT	Interview Time	40,643.13	57,916.46
JD	Jury Duty	140,709.94	200,511.66
ML	Military Leave	250,909.1	357,545.47
MP	Misc Paid Leave	28,914.5	41,203.16
OD	Officer of the Day	232,327.46	331,066.63
PB	Personal Business	1,345,049.21	1,916,695.12
PR	Pre-Retirement Leave	70,183.36	100,011.29
RL	Relocation Leave	9,381.11	13,368.08
SL	Sick Leave	18,585,721.69	26,484,653.41
ST	Straight Time Leave	321,004.15	457,430.91
UB	Union Business Leave	34,766.36	49,542.06
VA	Vacation Time	31,244,941.85	44,524,042.14
VF	Excess Vacation Leave	32,845.55	46,804.91
		54,689,772.85	77,932,926.31

Leave Paid with OPE uses an estimated %42.5 for OPE costs.

Unpaid Leave Liability at 6/30/12

LV Type	Leave Description	LV Liability Amt	LV Liability with OPE
PB	Personal Business	671,760.16	957,258.23
SL	Sick Leave	24,097,157.60	34,338,449.58
VA	Vacation Time	16,287,094.62	23,209,109.83
CT	Comp Time	451,955.72	644,036.90
DH	Donated Hardship	26,035.91	37,101.17
ST	Straight Time Leave	183,059.99	260,860.49
UB	Union Business Leave	60,860.98	86,726.90
		41,777,924.98	59,533,543.10

LV Liability with OPE is calculated using an estimated 42.5% for OPE

13. What is DOC's analysis of the incredibly high percentage of workman's compensation claims for DOC employees?

Given the size of our agency, we may always be near the top of the list for number of claims. However, according to OR OSHA, DOC has fewer injuries per 100 employees in the same Standard Industrial Class (SIC) code. DOC is working towards a day when we have zero accidents to report.

The DOC measure for tracking Workers Compensation time loss days compares the average number of days a standard pool of employees (100) is off work due to a reported injury. This standardized approach is intended to facilitate comparison with other agencies having a similar measure. In order to truly see how low the incident rate is for the department, we need to convert everything to a common denominator – numbers of days.

During the report period, each of the 100 employees works an average of 260 days, which produces a total days worked of 26,000 (100 employees time 260 days).

Employees in the pool 100
Annual work days scheduled per employee 260
Total annual scheduled work days – 100 employees 26,000
Days off-duty for an average 100 employees 57

Comparing the 57 days off-duty to the total scheduled work days for the 100 employees (26,000), produces a Workers Compensation “off-duty” rate of just over 2 tenths of 1% (0.219).

14. What percentage of all DOC employees retire pursuant to disability claims and what percentage of uniformed corrections officers retire pursuant to disability claims?

The department tracks employees who retire but not by disability. This information is self-reported by the retiring employee and is on a volunteer basis. PERS tracks this information for the department and their records show 78 DOC retirements in 2012; two were duty disability retirements (there were no non-duty disability retirements). We have requested the classification of these two retirees from PERS and will provide that information in a separate response.

15. Provide an analysis of the effect of holding vacancy positions on their posting factors?

We are gathering this data and will provide this information in a separate response.

16. Provide an analysis of the effect of unpaid furlough on overtime costs by division including a cost benefit analysis to determine if furlough savings is in fact an oxymoron in any or all of DOC divisions?

As we mentioned in an earlier response, for management and executive service employees and most non-security staff, this played out simply as unpaid days off, with no backfill to address ongoing workload.

For security staff and other employees working inside institutions, the DOC worked with labor organizations to develop alternative approaches for meeting the mandated furlough obligation. The primary objective being to minimize overtime costs associated with backfilling a post impacted by an employee out on a furlough day. Options included a reduction of the holiday premium pay differential (employee actually works the holiday, but does not get the full multiplied differential), taking furloughs during the course of a bid vacation week and a direct salary reduction. All of these options have helped to reduce the impact of managing the overtime costs resulting from mandated furloughs.

Overtime cost for backfilling behind posted staff out on furlough leave was \$606,048 through November 26, 2012 and is expected to cost approximately \$856,000 for the entire 2011-13 biennium.

Ways and Means 2/18/13

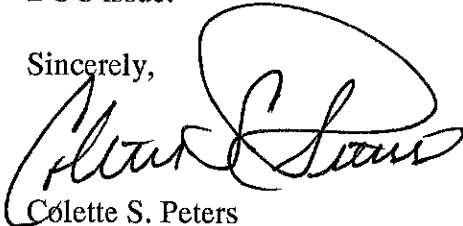
March 12, 2013

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This is an unfunded liability to the DOC that must be absorbed by savings in other areas. The overtime cost for a furlough backfill will certainly add cost as a result of the time-and-a-half multiplier, but the cost differential will also be impacted by the pay range of the furloughed staff and the overtime replacement. Since overtime bids are seniority-based, overtime shifts typically are given to senior staff in higher salary brackets. There has not been any individual position-by-position analysis done on this process.

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

Sincerely,

A handwritten signature in black ink, appearing to read "Colette S. Peters". The signature is written in a cursive style with a large, prominent loop at the top.

Colette S. Peters
Director

Oregon Department of Corrections

Budget Chronology from 2011-13 Legislatively Approved Budget thru 2013-15 Governor's Balanced Budget All Funds, Positions and FTE

Pkg	Description	Total	General Fund	Other Funds	Other Funds - Nonlimited	Federal Funds	POS	FTE
2011-13 Legislatively Approved Budget								
	2013-15 Rollup of 2011-13 actions, merit increases, Base Debt Service adjustments, Non-limited reset	\$ 1,597,128,598	\$ 1,362,844,564	\$ 31,298,404	\$ 193,906,622	\$ 9,079,008	4,509	4,414.55
		\$ (109,560,825)	82,965,493	1,485,918	(193,906,622)	(105,614)	(2)	51.56
	Agency Request Base Budget	\$ 1,487,567,773	\$ 1,445,810,057	\$ 32,784,322	\$ -	\$ 8,973,394	4,507	4,466.11
	2013-15 Base Change From 2011-13 Legislatively Adopted Budget:	-6.9%	6.1%	4.7%	-100.0%	-1.2%	0.0%	1.2%
010	Non-PICS P/S Inflation & Vacancy Factor	23,859,981	23,892,222	(32,241)				
020	Phase-In/Phase-Out	4,173,924	4,515,914	557,782		(899,772)		(5.25)
030	Inflation: S&S, CO & Special Payments	24,602,809	23,704,643	632,044		266,122		
040	Caseload Impact: April '12 Current Law Forecast	64,762,526	64,702,817	59,709			283	200.08
050	Fund Shifts	-	315,362	-		(315,362)		
060	Technical Adjustments	-	-	-		-		
2013-15 Current Service Level Budget								
	CSL Change From 2011-13 Legislatively Adopted Budget	0.5%	14.7%	8.6%	-100.0%	-11.6%	6.2%	5.6%
080	May '12 Eboard Management Cuts Policy Packages	(4,244,672)	(4,244,672)	-		-	(21)	(21.00)
		334,194,296	76,717,134	257,477,162			202	167.25
2013-15 Agency Request Budget								
	Agency Request Change From 2011-13 Legislatively Adopted Budget	21.1%	20.0%	831.3%	-100.0%	-11.6%	10.2%	8.9%
	2013-15 Agency Request Budget Total:	\$ 1,934,916,637	\$ 1,635,413,477	\$ 291,478,778	\$ -	\$ 8,024,382	4,971	4,807.19
Governor's Actions:								
Base	Policy Option Packages Desired	(339,178,433)	(31,701,271)	(257,477,162)			(695)	(162.00)
CSL	Base Only Debt Service Adj	(1,262,826)	(1,262,826)					
Policy	PERS Rate Adjustments to Base Budget & Essential Packages	(4,477,482)	(4,477,485)	(49,997)				
Essential	PERS Rate Adjustments to Policy Packages (Pkg 80 and 117)	18,692	18,692					
40	Service Charge Adjustments	(982,924)	(982,924)					
90	October '12 Forecast Update	(19,555,563)	(19,540,343)	(15,218)			(20)	(54.70)
90	Capped Population Avoided Costs (Pkg 040)	(35,600,000)	(35,600,000)				(222)	(118.61)
90	Retiree Capped Population Avoided Costs	32,000,000	32,000,000					
90	Unspecified Vacancy Savings	(10,000,000)	(10,000,000)					
90	M73 Reduction (Agency 10% Plan)	(6,300,000)	(6,300,000)					
90	Deferred Maintenance & Cost of Issuance	5,050,000	5,050,000					
91	Admin Savings Placeholder	(2,751,788)	(2,751,788)					
97&93	PERS Policy Proposals	(19,574,005)	(19,355,432)	(218,573)				
	2013-15 Governor's Balanced Budget Total:	\$ 1,532,302,310	\$ 1,485,510,100	\$ 38,767,828	\$ -	\$ 8,024,382	4,534	4,471.38
	2013-15 Governor's Balanced Budget Net Increase/(Decrease) Compared to 2011-13 Legislatively Approved Budget:	-4%	9%	24%	-100%	-12%	1%	1%

Footnotes: The GBB Position Count is overstated by 41 positions that were inadvertently not removed as part of the Capped Population Avoided Cost strategy. Only the Operations Division positions were removed. The remaining positions are on a list of technical adjustments for worksession. With this correction, the position count becomes 4,493, which is 16 below the 2011-13 Legislatively Adopted Budget staffing level. A similar adjustment is also intended for the FTE count.

Oregon Department of Corrections
Budgeted Cost per Day (CPD) Rate Calculations
for 2011-13 and 2013-15 Biennium
2013-15 Governor's Balanced Budget

Cost Elements Included in CPD Rate	Governor's Balanced Budget		
	2011-13 Post Feb '12	2013-15	
	CPD Rate \$94.81	CPD Rate \$92.44	
	All Funds	All Funds	
Operations Division			
Medical Services	\$ 134,445,194	\$ 153,832,326	11-13 did not include \$4,324,643 related to Intake Medical (OMR), row 45.
Dental Services	12,522,737	14,609,322	11-13 did not include \$71,377 related to Intake Dentall (OMR), row 45.
Behavioral Health Services	28,721,122	34,568,323	11-13 did not include \$1,359,619 related to Intake BHS (OMR), row 45.
Pharmacy	27,639,844	30,928,941	
Administration	23,927,003	26,910,360	
Social Services	20,837,080	22,570,807	
Activities	3,338,140	3,753,393	
Library	1,849,844	2,032,284	
Food Services	50,180,348	52,889,846	
Physical Plant	77,122,531	81,795,393	
Inmate Work Programs	6,147,285	6,695,284	
Security	421,144,888	467,501,232	
Assistant Director	12,848,057	859,209	A (\$12,960,567) reconciliation is nested here for oneload position reductions attached to the prison capping strategy in CFO package 080; one package cannot adjust new positions requested in another package, thus the forced reconciliation here.
Inmate Welfare Fund	1,769,580	1,812,020	
Transport	12,799,827	14,138,509	
Operations Central Services	-	6,773,831	Included In Asst. Dir. For 2011-13; separated by 2011-13 reorg.
Central Administration Division			
Attorney General	1,763,857	2,060,852	
Special Investigations Unit	6,758,510	5,960,829	
Inmate Phone Security	501,602	542,256	
Hearings	4,398,464	4,628,879	
General Services Division			
CDC Commissary	4,890,483	5,618,351	
Wireless/Radio	2,721,034	6,894,794	Telephony program shifted from IT Services as part of 2012 Reorganization.
Offender Mgmt & Rehabilitation			
OMR Administration	-	(375,992)	Includes (\$751,632) full reduction from PERS policy packages #92 & #93
Population Management	1,269,374	1,878,258	
OISC	11,546,833	11,970,485	
Inmate Services	-	1,206,133	Previously part of Institutions Asst. Dir. Line; 2012 Reorganization
Religious Svcs	6,653,083	7,220,243	
Education	20,119,677	19,136,381	
Transition & Release	7,480,504	9,678,897	
Correctional Case Management	-	1,527,540	Previously part of Institutions Asst. Dir. Line; 2012 Reorganization
Intake	9,820,888	4,320,572	2011-13 Includes \$5,755,639 of Health Services Intake; included in HS directly for 2013-15
Alcohol & Drug	13,756,503	17,398,932	Includes \$3.6M of cognitive programs previously in Education
Subtotal: Elements Included in Rate:	\$ 930,041,812	\$ 1,023,365,359	1,023,365,359
Budgeted Average Daily Capacity:	15,001	15,145	

Oregon Department of Corrections
Budgeted Cost per Day (CPD) Rate Calculations
for 2011-13 and 2013-15 Biennia
2013-15 Governor's Balanced Budget

Governor's Balanced Budget	
2011-13 Post Feb'12	2013-15
CPD Rate \$84.81	CPD Rate \$92.44
All Funds	All Funds

Cost Elements NOT Included in CPD Rate

Operations Division			
Inst Warehouse Management	300,000	307,200	
Administration			
Director's Office	1,457,187	(631,315)	Pkg #091 - Administrative Savings, (\$2,203,978), 100% taken here.
Internal Audits	516,845	500,201	
Agencywide Overhead - excluding AG	40,938,729	43,259,994	\$37M to DAS, \$1.6M SCS, Other agencies - \$1.4M, \$1.6 rent & utilities, AG - \$2M
Capital Proj Loan Repayment	500,233	-	Capital loans paid off; Idaho Power/Ontario sewer issue to O/H
Research Office	1,590,949	2,007,579	
Planning & Budget	2,226,745	2,434,200	
Inspector General Admin	35,327	1,859,919	
Govt Efficiency & Communication	2,528,643	1,229,635	
General Services Division			
Fiscal Services	14,136,394	15,373,952	
Facility Services	3,488,768	3,830,240	
Distribution Services	9,100,057	9,924,024	
Information Technology Services	21,719,448	20,171,004	
General Svcs - Asst Director	372,072	(643,713)	(\$1,053,622) from PERS packages 062 & 093 all packed here temporarily.
Human Resources Division	14,891,834	13,519,920	
Community Corrections Division	214,754,855	255,076,405	
Debt Service	140,122,000	132,709,940	
Capital Improvement	3,048,874	2,698,675	
Capital Construction	-	4,961,000	Deferred maintenance proposal from CFO - Partial of Pkg 109 Def. Maint.
Subtotal: Elements Not Included in Rate:	\$ 471,717,760	\$ 508,179,890	
Total of all elements	\$ 1,401,769,572	\$ 1,531,545,249	
One-time start-up costs not included in CPD Calc	1,462,404	757,081	
Total DOC Budget	\$ 1,403,231,976	\$ 1,532,302,330	

Oregon Department of Corrections
Budgeted Cost per Day (CPD) Rate Calculations
for 2011-13 and 2013-15 Biennia
2013-15 Governor's Balanced Budget

Cost Elements Included in CPD Rate	P/S	S&S	CO	SP	DS	TTL	Start-up All Funds	Total
Operations Division								
Medical Services	80,537,693	73,748,769	-	-	-	154,286,462	(454,136)	153,832,326
Dental Services	14,428,740	314,652	-	-	-	14,743,392	(134,070)	14,609,322
Behavioral Health Services	24,223,055	10,393,068	-	-	-	34,616,123	(47,800)	34,568,323
Pharmacy	5,846,363	25,103,861	-	-	-	30,950,224	(21,283)	30,928,941
Administration	24,550,337	2,360,023	-	-	-	26,910,360	-	26,910,360
Social Services	22,270,384	300,423	-	-	-	22,570,807	-	22,570,807
Activities	3,735,597	17,796	-	-	-	3,753,393	-	3,753,393
Library	1,804,827	227,457	-	-	-	2,032,284	-	2,032,284
Food Services	24,899,262	27,978,296	12,286	-	-	52,889,846	-	52,889,846
Physical Plant	34,965,814	46,818,486	11,093	-	-	81,795,393	-	81,795,393
Inmate Work Programs	6,417,518	2,218,874	58,892	-	-	8,695,284	-	8,695,284
Security	448,758,572	18,731,039	11,621	-	-	467,501,232	-	467,501,232
Assistant Director	(1,375,630)	1,888,418	376,421	-	-	889,209	-	889,209
Inmate Welfare Fund	-	1,812,029	-	-	-	1,812,029	-	1,812,029
Transport	12,948,164	1,190,345	-	-	-	14,138,509	-	14,138,509
Operations Central Services	759,453	6,014,375	-	-	-	6,773,831	-	6,773,831
Central Administration Division								
Attorney General	-	2,060,882	-	-	-	2,060,882	-	2,060,882
Special Investigations Unit	5,406,797	553,832	-	-	-	5,960,629	-	5,960,629
Inmate Phone Security	515,138	27,148	-	-	-	542,286	-	542,286
Hearings	4,445,492	183,387	-	-	-	4,628,879	-	4,628,879
General Services Division								
CDC Commissary	5,374,227	246,691	-	-	-	5,620,918	(2,567)	5,618,351
Wireless/Radio	3,577,245	3,317,549	-	-	-	6,894,794	-	6,894,794
Offender Mgmt & Rehabilitation								
OMR Administration	953,531	(1,329,523)	-	-	-	(375,992)	-	(375,992)
Population Management	1,708,965	169,293	-	-	-	1,878,258	-	1,878,258
OISC	11,102,654	867,631	-	-	-	11,970,485	-	11,970,485
Inmate Services	382,213	823,920	-	-	-	1,206,133	-	1,206,133
Religious Svcs	5,772,462	1,436,668	28,756	-	-	7,237,886	(17,643)	7,220,243
Education	842,618	18,292,763	-	-	-	19,135,381	-	19,135,381
Transition & Release	7,850,941	1,833,089	-	-	-	9,684,030	(5,133)	9,678,897
Correctional Case Management	1,418,024	109,516	-	-	-	1,527,540	-	1,527,540
Intake	4,164,824	155,748	-	-	-	4,320,572	-	4,320,572
Alcohol & Drug	800,897	16,596,035	-	-	-	17,396,932	-	17,396,932
Subtotal: Elements Included in Rate:	\$ 759,086,377	\$ 284,462,543	\$ 499,071	\$ -	\$ -	\$ 1,024,047,991	\$ (682,632)	\$ 1,023,365,359

Oregon Department of Corrections
Institution Budgeted Population
2013-15 Governor's Balanced Budget

Month	Year	Days	MCCF	SFFC	PRCF	SCCI	CRCI	OSPM	WCCF	OSCI	TRCI	CCCF	EOCI	DRCI	SCI	SRCI	Total BI	Avg Rentals	Total	
																			Beds	Bed Days
Jul	13	31	290	204	316	302	593	2,308	436	972	1,802	1,777	1,767	787	440	3,142	-	15,136	469,216	
Aug	13	31	290	204	316	302	593	2,308	466	972	1,802	1,777	1,767	787	440	3,142	-	15,166	470,146	
Sep	13	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	455,430	
Oct	13	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,611	
Nov	13	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	455,430	
Dec	13	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,611	
Jan	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,611	
Feb	14	29	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	440,249	
Mar	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,611	
Apr	14	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	455,430	
May	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,611	
Jun	14	30	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	455,430	
Jul	14	31	290	204	316	302	593	2,308	466	972	1,802	1,792	1,767	787	440	3,142	-	15,181	470,611	
Aug	14	31	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	455,430	
Sep	14	30	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Oct	14	31	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	453,090	
Nov	14	30	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Dec	14	31	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Jan	15	31	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	422,884	
Feb	15	28	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Mar	15	31	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	453,090	
Apr	15	30	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
May	15	31	290	204	316	302	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,103	468,193	
Jun	15	30	290	204	316	352	593	2,308	466	894	1,802	1,792	1,767	787	440	3,142	-	15,153	454,590	
Total Bed Days		731																	11,070,899	

Biennial Average	290	204	316	304	593	304	593	2,308	465	936	1,802	1,791	1,767	787	440	3,142	15,145	-	15,145	15,145
% of Total Beds	1.91%	1.35%	2.09%	2.01%	3.92%	3.07%	6.18%	11.90%	11.82%	11.67%	5.20%	2.91%	20.76%							
Share of Rental Beds	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total # of Beds	290	204	316	304	593	304	593	2,308	465	936	1,802	1,791	1,767	787	440	3,142	15,145	3,142	15,145	15,145