

Joint Committee on Ways and Means

Carrier – House: Rep. Williamson
Carrier – Senate: Sen. Winters

Revenue: No revenue impact

Fiscal: Fiscal statement issued

Action: Do Pass the A-Engrossed Measure as Amended and as Printed B-Engrossed

Vote: 25 – 0 – 1

House

Yeas: Barker, Buckley, Frederick, Freeman, Huffman, Jenson, Komp, McLane, Nathanson, Read, Richardson, Smith, Tomei, Williamson

Nays:

Exc: Hanna,

Senate

Yeas: Bates, Devlin, Edwards, Girod, Hansell, Johnson, Monroe, Steiner Hayward, Thomsen, Whitsett, Winters

Nays:

Exc:

Prepared By: Kim To, Legislative Fiscal Office

Meeting Date: June 21, 2013

WHAT THE MEASURE DOES: Authorizes the Department of Corrections, the Oregon Youth Authority, and local correctional facilities to apply for medical assistance on behalf of inmates of the facilities, rather than requiring inmates to apply for themselves. The bill does not declare an emergency and would be assumed to be effective January 1, 2014.

ISSUES DISCUSSED:

- Fiscal impact

EFFECT OF COMMITTEE AMENDMENT: Allows local mental health authorities flexibility in developing Biennial Implementation Plans by removing specific requirements regarding the timing of the Biennial Implementation Plans. Requires the plans be coordinated with community health improvement plans developed by coordinate care organizations (CCOs). Resolves technical conflicts in the event that House Bill 2216, House Bill 2240, House Bill 2859, and House Bill 3458 become law.

BACKGROUND: Prison officials are obligated under the Eighth Amendment to provide prisoners with adequate medical care. According to *The Oregonian*, prison health services cost the state \$100 million per year and those costs are rising as the prison population gets older.

The Oregon Health Authority (OHA) reports that corrections officials estimate that as many as 75% of potentially eligible inmates refuse to apply for Medicaid benefits given the choice. HB 2087 allows a proxy or designated representative to complete and submit the application. With passage of this bill, it is anticipated that a larger number of inmates will be eligible for medical assistance coverage for hospital costs, and the state would be able to claim Medicaid matching funds for hospital inpatient care provided to incarcerated individuals through the Medical Assistance Programs (MAP), per federal law and regulation.