

Testimony to Legislature February 12, 2014 – HB 4110

Good afternoon. My name is Drew Brosh and I am a Chief Deputy with the Multnomah County Sheriff's Office. I am here today to speak in support of HB 4110, which if enacted would prohibit insurers from denying reimbursement under the health benefit plan for covered services provided to persons in the custody of a county Sheriff.

As a certified Corrections Officer and career Sheriff's Office member, I have a good deal of experience with persons receiving medical care while in the custody of the Sheriff. I have escorted inmates to scheduled appointments both at the jail and at local clinics for eye, dental, laboratory, orthoscopic and general medical procedures. I have responded to emergencies in the jail and transported inmates to emergency rooms for medical attention required as a result of assaults, required use of force, medical emergencies, self-harm and suicide attempts. I have personally intervened with inmates attempting suicide and have been a first responder to numerous medical emergencies both in the jail and during transport of in-custody inmates. I tell you this to illustrate the point that a person's need for (and access to) medical care doesn't diminish because of being in the custody of a Sheriff, in fact, it sometimes increases due to the constitutional requirements placed on a Sheriff to provide conditions of confinement that include access to medical care at the same level as the care covered persons would expect outside of custody.

It is also the case that the physical profile of persons held in custody puts extreme demands on the medical staff that provide care to inmates, in particular two areas – substance abuse and mental health. The Multnomah County jail system was one of 10 national testing areas for many years by the Office of the National Drug Control Policy. The data derived from this study demonstrated consistently that over 70% of those booked into custody of the Sheriff tested positive for some type of illegal drug or alcohol. Sheriff's deal with addiction and withdrawal issues in the jails every day, but more so the long-term health decline experienced by persons in-custody as a result of long-term drug abuse. As for mental health issues, approximately 20 percent of inmates held in our jail system have a diagnosed Axis 1 or 2 disorder, and another 20 percent have some type of mental health concern – that's four out of every ten inmates in the custody of the Sheriff.

While I have spent the majority of my career in law enforcement and corrections operations, my current job is Chief Deputy of the Business Services Division of our Office, so I spend a good deal of time looking at costs. I am told that yearly our Health Department spends \$3.1 million on medical care outside the jail, and \$1.6 million on pharmacy costs alone, and the Corrections Health function to provide medical care as required by law costs the county general fund right around \$14 million. Those expenses hinder the counties ability to fund and operate other vital

programs, and would be greatly benefitted from an ability to recover some of those costs from a system already designed to reimburse for out-of-network care.

In closing, I want to emphasize again the tremendous drain unreimbursed medical care puts on our county as a whole, and, I am confident that the financial burden of even a single inmate with high-cost medical issues is even more devastating to smaller counties – counties with the same constitutional requirements mandated to their Sheriff's for persons in-custody. Thank you.