



OREGON PSYCHIATRIC PHYSICIANS ASSOCIATION

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Written testimony for the Oregon Psychiatric Physicians Association (OPPA) in
relation to HB 3249

Presented by the OPPA Legislative Committee
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To: Chair Barker, House Judiciary Committee

The OPPA supports HB 3249 sponsored by Representative Wilson. Should it become law, it will enhance the effectiveness of Oregon's current Assisted Outpatient Treatment statute (AOT). It will give the judge the enhanced authority to establish an AOT agreement or to enforce a pre-established outpatient commitment order. This presents a number of positive options for promoting the efficacy, efficiency and purpose of Oregon's established outpatient commitment treatment efforts.

Fundamentally this bill will define a fourth method of civil commitment in Oregon. The important goal of this legislation is to support the maintenance and enforcement of treatment for the population of mentally ill patients who need our most robust support in the community: citizens who live with serious and persistent mental illness that are repeatedly subject to civil commitments. It also is a practical legislation designed to prevent relapse in patients who are at a high risk to present with continuous problems related to active symptoms of their mental illness without adequate treatment. Since these Oregonians will have already demonstrated behaviors that led them to receiving treatment in an outpatient treatment program, it will not create an unusual burden on the State of Oregon to support further treatment efforts. In fact, this bill would allow the assisted outpatient treatment programs to thrive and do what they are designed to do: treat and protect some of Oregon's most vulnerable citizens in the most cost-effective manner possible.

The benefits of this legislation include:

1. Improved efficacy of Oregon's current Assisted Outpatient treatment programs.
2. Utilization of a less-restrictive treatment environment – allowing for treatment in the patient's own community setting.
3. Continued promotion of less expensive but effective treatment options, than those related to individuals forced into treatment at the State Hospital level.
4. The promotion of fewer incidents of incarceration within a population that is extremely vulnerable to arrest due to behavioral problems associated with their mental illness.
5. With the provision of early and monitored outpatient treatment there will be fewer episodes of community disruption and aggressive behavior.
6. Continued work by the State of Oregon to promote an increased number of outpatient treatment programs available to patients per the Federal Department of Justice expectations related to the CRIPA settlement.

Evidence for these benefits can be found in review of the landmark legislation in New York State that promoted a more robust outpatient treatment program known as "Kendra's Law." This legislation showed a reduction in psychiatric hospital admissions, a decrease in the length of stay of inpatient hospitalizations and a decrease in arrests in this highly vulnerable patient population. The Treatment Advocacy Center has also completed studies that have demonstrated a decrease in violent behaviors and cost to taxpayers associated with use of a more robust assisted outpatient treatment program (Treatment Advocacy Center "Does Assisted Outpatient Treatment (AOT) Decrease Violence? (updated 3/2014) & Treatment Advocacy Center PRWEB "New Study: Assisted Outpatient Treatment Saves More Taxpayer Money Than It Costs." (February 18, 2015).

Timing is crucial when it comes to being able to help patients who are prone to decompensation without adequate treatment. The legislation will allow a judge real and potentially effective leverage when negotiating treatment options with patients already subject to an outpatient treatment order. This will save the patient from further traumatization associated with repeated hospitalizations, which are most likely to occur when they are the subject to the most extreme points of illness. Judges will be able to promote the intended efficacy of assisted outpatient treatment programs.

Concerned parties in opposition to this legislation will argue that this law will lead to increased hospitalization, reduction in individual civil rights and further impingement on the individual's freedom by forcing adherence to a treatment environment against their will. However, we propose that these concerns are unfounded and will in the long run, not prove to be born out if this legislation were to be enacted. We ask that the legislature consider the cost to the patient who suffers from the symptoms of severe and persistent mental illness when not adequately treated, the emotional cost to the patient and financial cost to the taxpayer associated with recurrent hospitalizations or entry into the criminal justice system.

The OPPA urges the judicial committee to support HB 3249. It will benefit all Oregonians, particularly those who are most vulnerable to physical and mental decompensation due to the effects of chronic and severe mental illness.