

Justin C. Ottman

March 17, 2017

By Electronic Mail:

Jeff Barker, Chair

House Committee on Judiciary

900 Court St. NE,

Salem Oregon 97301

hjud.exhibits@oregonlegislature.gov

Re: House Bill 2306

Chair Barker and Members of the House Committee on Judiciary,

Please accept this letter as my written testimony to your committee regarding House Bill 2306 ("HB 2306") on behalf of the Advisory Board of the Oregon State Hospital (OSH). The OSH board was established in 2009 with the passage of Senate Bill 25 ("SB 25") and Section 3 of that bill states that the board should "make recommendations directly...to committees of the Legislative Assembly concerning...potential legislative proposals or budget packages relating to the hospital." The OSH board asked me to represent the board during the current legislative session. As such, I ask that your committee consider the following regarding HB 2306:

1. The Advisory Board supports this bill.
2. The ORS 161.370 ("370" or "Aid & Assist") patient population at OSH has more than doubled from 2012 to 2016. As of December 2016, there were 231 Aid & Assist patients, with approximately 40 percent of those patients being charged with no higher than a Misdemeanor A crime.
3. The Aid & Assist patient population is overcrowding the OSH and has reduced the availability for civil¹ patients at the hospital. As of December 2016, there were 38 percent more Aid & Assist patients than civil patients. This lack of availability for civil patients will be made worse with the closure of the Junction City Campus, which currently has 174 patient beds.

¹ "Civil" patients include those who have been found by the court to be an imminent danger to themselves or others, or who are unable to provide for their own basic health and safety needs, due to their mental illness.

4. The OSH provides the highest level of psychiatric treatment in the State of Oregon, which costs approximately \$1,000 per day, per patient. As of December 2016, the median length of stay was 114 days. This substantial cost of \$114,000 per Aid & Assist patient is staggering.
5. There are many levels of psychiatric treatment. While OSH provides the state's highest level of psychiatric treatment, not all Aid & Assist patients require this level of care. For patients that need a lower level of care, they should be treated in their local community. The United States Supreme Court affirmed that position in Olmstead v. L.C. According to the Legal Information Institute at Cornell University Law School, "Justice Ginsburg...concluding that, under Title II of the ADA, **States are required to place persons with mental disabilities in community settings rather than in institutions when the State's treatment professionals have determined that community placement is appropriate**, the transfer from institutional care to a less restrictive setting is not opposed by the affected individual, and the placement can be reasonably accommodated, taking into account the resources available to the State and the needs of others with mental disabilities."² [emphasis added]. Consistent with HB 2306, the Oregon Health Authority (OHA) will be allowed to determine the appropriate placement for Aid & Assist patients.

I appreciate you taking the time to consider these facts as you review HB 2306. If I can be of more assistance to your committee, please contact me at my email address below.

Sincerely,

Justin C. Ottman, Advisory Board Member
Oregon State Hospital
Email: justinottman@gmail.com

² <https://www.law.cornell.edu/supct/html/98-536.ZS.html>