## B-Engrossed House Bill 3035

Ordered by the House June 18 Including House Amendments dated April 7 and June 18

Sponsored by Representative DEXTER; Representatives BYNUM, MARSH, MEEK, NERON, REYNOLDS, SANCHEZ, SOLLMAN, WILDE, Senators DEMBROW, GOLDEN

## **SUMMARY**

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

[Directs Department of Corrections and Oregon Health Authority to establish healthcare navigator pilot program within Coffee Creek Correctional Facility. Directs department, in consultation with authority, to develop health assessment for persons entering facility. Establishes standards for provision of health care to persons in custody. Requires that person in custody be offered copy of medical records upon release.]

[Establishes healthcare navigator positions for employment within Coffee Creek Correctional Facility. Specifies duties of healthcare navigators. Provides that healthcare navigator salaries are paid by Oregon Health Authority. Appropriates moneys to authority to fund positions.]

Establishes Task Force on Corrections Medical Care. Directs task force to conduct review of Department of Corrections medical care grievance process, medical care standards of care and adoption of electronic health records system. Directs task force to submit report and recommendation for prioritized list of medical care to Legislative Assembly no later than September 15, 2022.

Directs Department of Corrections to regularly report to Legislative Assembly concerning [health data] **medical care** and health outcomes of persons in custody [and results of survey of pilot program participants].

Sunsets [program] task force and reporting requirement on June 30, 2023.

Declares emergency, effective July 1, 2021.

## 1 A BILL FOR AN ACT

- 2 Relating to health care for adults in custody; and declaring an emergency.
- 3 Whereas adults in custody have a constitutional right to health care; and
- Whereas discontinuities of care result when people enter into custody; and
- Whereas adults in custody are reported to lack meaningful access to comprehensive reproduc-
- 6 tive health care, inclusive of abortion; peripartum health care, inclusive of prenatal care, postnatal
- 7 care and the ability to breast-feed their newborns; gender-affirming health care; mental health care,
- 8 inclusive of support for dealing with toxic stress and non-DSM diagnoses; and substance use disorder
- 9 care and support; now, therefore,
- 10 Be It Enacted by the People of the State of Oregon:
- 11 SECTION 1. (1) The Task Force on Corrections Medical Care is established.
- 12 (2)(a) The task force consists of 11 members appointed as follows:
- 13 (A) The Governor shall appoint five members with the following qualifications:
- 14 (i) At least one member must be a substance use disorder or mental health care clinician.
- 15 (ii) At least one member must be a primary care clinician who serves Medicaid patients.
- 16 (iii) At least two members must have been adults in custody, or family members of adults 17 in custody, who received medical care while in the custody of the Department of Corrections.
  - (B) The President of the Senate shall appoint two members from among members of the

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Senate.

- (C) The Speaker of the House of Representatives shall appoint two members from among members of the House of Representatives.
- (D) The Director of the Department of Corrections shall appoint two members representing the medical staff of the department.
- (b) The Corrections Ombudsman as described in ORS 423.400 shall serve as an ex officio nonvoting member of the task force and is not considered a member for the purposes of this subsection.
  - (3) The task force shall:
- (a) Conduct a review of the process by which adults in Department of Corrections custody file grievances concerning access to and the provision of medical care to determine the level of accountability and transparency the process provides to adults in custody and the interests of the state and whether the process conforms with the right of adults in custody to community-level medical care.
- (b) Conduct a review of the current medical care standards of care in the department to determine whether the standards align with the right of adults in custody to community-level medical care. The report resulting from the review must include a recommended prioritized list of medical care, including mental and oral health and similar to the Medicaid prioritization list, that meets community standards. The report must further include the recommendation of meaningful access timelines for each type of care that must be equitably available to all adults in custody in all department facilities.
- (c) Review timelines and goals for the adoption of an electronic health records system by the department. The task force shall review the current adoption timeline and process to ensure appropriate goals, timelines and outcomes are being achieved, with the priority being expedited adoption of the platform most able to improve continuity of care with community practitioners, the seamless sharing of records and the ability for outcomes and services to be reported to the public.
- (4) A majority of the voting members of the task force constitutes a quorum for the transaction of business.
- (5) Official action by the task force requires the approval of a majority of the voting members of the task force.
  - (6) The task force shall elect one of its members to serve as chairperson.
- (7) If there is a vacancy for any cause, the appointing authority shall make an appointment to become immediately effective.
- (8) The task force shall meet at times and places specified by the call of the chairperson or of a majority of the voting members of the task force.
  - (9) The task force may adopt rules necessary for the operation of the task force.
- (10)(a) The task force shall submit a report in the manner provided by ORS 192.245, and may include recommendations for legislation, to the interim committees of the Legislative Assembly related to health and the judiciary no later than September 15, 2022.
- (b) No later than September 15, 2022, the task force shall provide the recommendations described in subsection (3)(b) of this section to the Department of Corrections, and the department shall publish the recommendations on the website of the department.
- (11) The Legislative Policy and Research Director shall provide staff support to the task force.

- (12) Members of the Legislative Assembly appointed to the task force are nonvoting members of the task force and may act in an advisory capacity only.
- (13) Members of the task force who are not members of the Legislative Assembly are not entitled to compensation or reimbursement for expenses and serve as volunteers on the task force
- (14) All agencies of state government, as defined in ORS 174.111, are directed to assist the task force in the performance of the duties of the task force and, to the extent permitted by laws relating to confidentiality, to furnish information and advice the members of the task force consider necessary to perform their duties.
- SECTION 2. (1) Beginning no later than December 31, 2021, and every six months thereafter, the Department of Corrections shall report to the interim committees of the Legislative Assembly related to the judiciary and health care, in the manner provided under ORS 192.245, the following information:
  - (a) Progress on the adoption of an electronic health records system;
- (b) The number of grievances filed by adults in custody concerning the provision of medical care;
  - (c) The medical services available to adults in custody within department facilities; and
- (d) If applicable, the progress and impact of a department program that assigns health care navigators to adults in custody.
- (2) No later than December 31, 2022, the Department of Corrections, in consultation with the Oregon Health Authority, shall report to the interim committees of the Legislative Assembly related to the judiciary and health care, in the manner provided under ORS 192.245, health outcomes concerning all adults in the custody of the department, including health trends and any information the department determines relevant to the effectiveness of the work of the Task Force on Corrections Medical Care described in section 1 of this 2021 Act and, if applicable, any department program in which health care navigators are assigned to adults in custody.

SECTION 3. Sections 1 and 2 of this 2021 Act are repealed on June 30, 2023.

SECTION 4. This 2021 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2021 Act takes effect July 1, 2021.