

SB 529 STAFF MEASURE SUMMARY

Carrier: Rep. Morgan

House Committee On Judiciary**Action Date:** 04/25/23**Action:** Do Pass.**Vote:** 9-1-0-0**Yeas:** 9 - Andersen, Bynum, Chaichi, Conrad, Kropf, Morgan, Reynolds, Tran, Wallan**Nays:** 1 - Lewis**Fiscal:** No fiscal impact**Revenue:** No revenue impact**Prepared By:** Gillian Fischer, LPRO Analyst**Meeting Dates:** 3/27, 4/12, 4/24, 4/25**WHAT THE MEASURE DOES:**

Modifies legislative findings concerning alternative incarceration programs. Requires that intensive alternative incarceration addiction program address addiction as a chronic disease. Provides alternative incarceration addiction program should include range of treatment services. Modifies participant acceptance procedures and participation requirements for programs.

ISSUES DISCUSSED:

- Overlap with other introduced measures
- Custodial status of adults in custody when in treatment
- Doesn't expand eligibility; those who are ineligible based on sentence would remain ineligible
- Correlation with House Bill 2890 (2023)
- Supply of drugs into institutions and significance of demand within the institution

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

In 2017, Governor Brown created the Opioid Epidemic Task Force as a statewide effort to “combat opioid abuse and dependency.” In 2018, based on the initial work of the Task Force, Governor Brown proposed House Bill 4143 as a multi-pronged approach to address the epidemic of opioid use. After passage of House Bill 4143, the Task Force continued its work by defining substance use disorder (SUD) as a chronic disease rather than an acute illness, and addressing access, payment, and affordability of treatment services among commercial and public payers. According to the Oregon Department of Corrections (DOC), screening results of Adults In Custody (AICs) entering custody show that 63 percent of AICs report having an SUD; and 50 percent of all AICs are classified as having a “severe” need for treatment. The Alternative Incarceration Program (AIP) statute currently requires 14 hours of highly structured and regimented routine every day and requires that the program be at least 270 days in duration. According to DOC, this is a level of intensity that is not available.

Senate Bill 529 amends the AIP statutes to allow DOC to treat SUDs with a range of professional treatment services, recovery activities, engagement with peer mentors, educational and vocational services and self-help groups.