

# Brown creates council to address severe mental illness

By **CONNOR RADNOVICH**  
Statesman Journal

A new committee formed by Gov. Kate Brown is tackling the state's behavioral health care system with the goal of improving access and availability of services for Oregonians with serious mental illnesses.

The 35-member Behavioral Health Advisory Council will focus on the care of adolescents and adults with serious mental health concerns, including those who also have substance use disorders.

Brown said the state is currently working with a "failed system."

Recent surveys estimate that only 45% of Oregonians experiencing a mental illness and 11% of people with substance use disorders received treatment within the past year.

Around one in four adults with a serious mental illness also has a substance abuse disorder.

"Every person in Oregon grappling with a serious mental illness deserves access to the services they need, when they need them," Brown said.

Brown issued an executive order last week that established the council, and on Wednesday announced the members, which include lawmakers, health care professionals, government officials, business leaders and mental health advocates.

Salem's Republican Sen. Dency Boles is among the council's four legislators. She also serves as vice-chair on the new Senate Interim Committee On Mental Health.

Boles said she is pleased mental health care is becoming a top issue at the highest levels of state gov-



Anna Reed/Statesman Journal

Gov. Kate Brown has formed the Behavioral Health Advisory Council, which will focus on the care of adolescents and adults with serious mental health concerns.

*'THE BEHAVIORAL HEALTH CHALLENGES WE FACE TOUCH EVERY FAMILY, EVERY COMMUNITY AND EVERY SECTOR. NO ONE AGENCY CAN FIX THEM ALONE.'*

Steve Allen | behavioral health director for the Oregon Health Authority

ernment and she's hopeful the committee will dig into programs to find where people are falling through the cracks.

Through her personal experience, Boles said she is particularly interested in improving mental health care among youth in crisis,

veterans and the elderly. It's also important to have a system that can identify the unique characteristics of each group and treat them accordingly, she said.

"Our agencies and our systems should work together better," Boles said. According to the execu-

tive order, the council will be responsible for recommending an action plan that includes "concrete actions, policies and potential investments."

The council will meet once per month for the next year and will send a final plan to the governor's

office no later than Oct. 1, 2020.

Brown said on a call with reporters Wednesday that the council will dovetail with her focus on mental health care funding in the 2021-2023 biennium.

This past legislative session, the Legislature

committed \$50 million of general fund money to behavioral health care.

That money is earmarked to go toward suicide prevention and substance abuse programs, foster care behavioral health services and increasing the capacity of behavioral health homes.

"The behavioral health challenges we face touch every family, every community and every sector," said Steve Allen, behavioral health director for the Oregon Health Authority. "No one agency can fix them alone."

# Inmates could receive federal care under Merkley's proposal

By **CONRAD WILSON**  
Oregon Public Broadcasting

For more than 50 years, people booked into local jails have been stripped of their federal health care benefits, leaving an already vulnerable population with even less support.

At the same time, the U.S. Constitution requires jails to provide adequate medical care.

That lack of federal dollars coupled with the mandate saddles jails with what is often their single largest expense: medical care.

Lawmakers in Washington D.C. put forward legislation last week that would allow federal benefits to continue for people booked into jail, where the vast majority of inmates are awaiting trial.

Sens. Jeff Merkley, D-Oregon, and Ed Markey, D-Massachusetts, introduced two bills that would allow inmates to keep their federal benefits. It would allow them to access their Medicare, state Medicaid plans, veterans health benefits, or in the case of juvenile defendants, the Children's Health Insurance Program.

The legislation could improve health care — including mental health — for inmates while simultaneously reducing medical costs for counties. It would also apply to other public correctional facilities such as reentry centers.

Merkley said he was particularly concerned with healthcare benefits being cut off from people who had only been charged, but not convicted, of a crime. In some cases, he said the defendants are stuck in jail because they can't afford to pay their bail.

Inmates have their federal health benefits suspended when they enter jail. In some cases there can be delays in getting those benefits resorted, even after a person is released from custody.

"To strip someone's coherent healthcare away from them, something they've paid for, when

*SINCE 2008, AT LEAST 306 PEOPLE ACROSS THE NORTHWEST HAVE DIED AFTER BEING TAKEN TO A COUNTY JAIL*

they've haven't been convicted of anything, seems problematic, perhaps unconstitutional," Merkley said.

He said inmates have their health compromised while counties incur costs they can't afford.

And the lack of adequate mental and physical care in local jails has led to preventable deaths.

Since 2008, at least 306 people across the Northwest have died after being taken to a county jail, according to an investigation by Oregon Public Broadcasting, KUOW and the Northwest News Network. Of those, roughly 33% — or 100 people — died from some type of illness, while another 10% died from drug or alcohol related conditions. By far, the leading cause of death was suicide.

This year, Oregon's Criminal Justice Commission and the Council of State Governments put out a report that looked at 12 county jails across the state. It found in

2017, 65% of people who were booked into those jails four times or more were on Medicaid. That same study also found 29% had a mental illness and 45% had a substance use disorder.

The provision that stops inmates from accessing federal health care dates back to 1965. The intent was to prevent states from shifting health care costs of convicted inmates to the federal government. But it also impacted local jail inmates who are still awaiting trial.

"This is an issue that we've been struggling with for years," said Yamhill County Sheriff Tim Svenson. "Trying to provide a high level of medical service to individuals who come into our facility, who are very vulnerable at that time, have high behavioral health, high medical needs. But their benefits immediately get cut off when they walk in the door."

Svenson said inmates who are waiting for trial

shouldn't be losing a federally protected benefit just because they're in jail.

The bill has the backing of the National Sheriff's Association, Disability Rights Oregon and the National Association of Counties.

In Multnomah County, corrections health care tops \$24 million annually, which is paid for out of the county's general fund. It covers everything from x-rays to gynecological care.

Emily Abrams, eligibility specialist in the Corrections Health Division of the Multnomah County Health Department, spends much of her day signing up people in one of the county's jails for the Oregon Health Plan.

She estimated 95% of people who come through the jail are eligible.

"It's the majority of people who come through here," she said.

And those managing jail health care systems say because it's required, there should be more support.

"If that's a federal benefit and they're federal requirements for constitutional level of health care in a jail, then it makes sense that the federal government would pay for that," said Dr. Mike Seale, deputy director of Corrections Health in Multnomah County.

While the bills appear to have broad support outside of Congress, it's not clear whether they'll move

forward.

"This is the sort of bill we'll have to build a conversation around," Merkley said. "It's not something on the top five list of things people are talking about in America, but I think it's a very worthy effort to improve the continuity of care."

He said he would try to attach the legislation to larger health care bills.



**SUN OCT 27 3:00pm**  
Doors open at 2:15  
Pre-Show 2:30:  
Astoria Tuba Quartet

**Clatsop College Performing Arts Center**  
Admission \$15  
Students \$8

**Celebrate 40 years of the NCSB**

**North Coast Symphonic Band**  
Guest Conductor Michael McClure

**CHEERS TO 50 years**  
50th Wedding Anniversary Celebration  
Edwin & Judy Fisher  
Sunday • October 27, 2019  
1 to 4 p.m.  
Olney Grange Hall • Highway 202  
Luncheon served • No gifts please  
For questions call:  
503-325-1288

**THE AMERICAN LEGION**  
1919 100 Years 2019  
VETERANS STILL SERVING AMERICA

Seaside American Legion Post 99 • 100<sup>th</sup> Birthday of the American Legion  
Semi formal Celebration

**November 10th**  
No host Cocktail hour 5:30

**Dinner served 6:00pm**  
\$30.00 per ticket  
Prime Rib or Salmon

All Dinner Guests MUST RSVP before November 2<sup>nd</sup> so do it now!  
503-738-5111 • 1315 Broadway Seaside Oregon  
Public event Proceeds go toward helping our Veterans