

Legal / Contractual Obligation

From the US Supreme Court to the Oregon State Revised Statutes, necessary health care for incarcerated individuals is a right because they do not have the freedom to obtain care on their own. Access to care, an evaluation by a health professional, and the right to receive care that is mandated by the 4th, 8th and 14th amendments. When serious health needs are not addressed by professionals, deliberate indifference to medical needs bring harm to individuals entrusted to our care and increases liability for the County. Corrections Health is bound by ethical standards to provide unbiased care to all individuals based on community standards of care.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2016	2016	2017	2017
Personnel	\$569,134	\$71,639	\$778,333	\$0
Contractual Services	\$2,800	\$0	\$0	\$0
Materials & Supplies	\$27,365	\$2,893	\$31,234	\$0
Internal Services	\$81,529	\$6,917	\$106,021	\$0
Total GF/non-GF	\$680,828	\$81,449	\$915,588	\$0
Program Total:	\$762,277		\$915,588	
Program FTE	3.90	0.00	5.90	0.00

Program Revenues				
Indirect for Dept. Admin	\$4,897	\$0	\$0	\$0
Service Charges	\$0	\$81,449	\$125,000	\$0
Total Revenue	\$4,897	\$81,449	\$125,000	\$0

Explanation of Revenues

As a result of current laws that govern the responsibilities of governmental agencies in the care of detained individuals, Corrections Health is unable to bill for services from Medicare, Medicaid and OHP. These rules and laws are under review nationally to determine if additional revenue sources can be made available to jails. Youth in the Alcohol and Drug Treatment Program have Oregon Health Plan (OHP) coverage so some of their clinic appointments with a physician and medications are billed to the Oregon Health Plan.

Significant Program Changes

Last Year this program was: FY 2016: 40049-16 Corrections Health Juvenile Detention

This year the Department of Community Justice transferred 2.0 FTE Mental Health Consultants in JDH to Corrections Health. These positions had been with DCJ for several years and they felt that both clinically and administratively they fit better with Corrections Health. These two staff join a mental health team that was able to give them daily support for clinical issues and provides more timely supervision. They also join the other CH staff at JDH to be part of a larger clinical team.