Submitter:	Claire McKinley Yoder
On Behalf Of:	
Committee:	Senate Committee On Health Care
Measure, Appointment or Topic:	SB293

Dear Chair Patterson, Vice-Chair Hayden and Members of the Senate Committee on Health Care:

My name is Claire McKinley Yoder and I am a nurse who has worked with formerly incarcerated individuals. I am writing to encourage your support of Senate Bill 293 which asks the Department of Corrections to study health care for adults in custody. People who are incarcerated have no ability to manage their own health care needs and are at the mercy of the Department of Corrections who have a duty to provide a minimum level of health care to this vulnerable population. The provisions in this bill make sense from not only a respect for the inherent dignity of every human, but also from a societal perspective.

In the Oregon and the United States, health insurance allows people to manage conditions whether they have private or public health insurance. And even those who cannot access health insurance have safety net measures such as federally qualified health centers. When a person enters the Department of Corrections custody, the DOC becomes responsible to provide health care to the incarcerated person. It would be illegal for a health insurance company to consider how much longer a person would be on their plan before paying for a needed treatment, but that is what the DOC is allowed to do. A health insurance company is also required to provide reasons for denial – the DOC does not have to do this and there is no recourse. The DOC does not have accountability for their decisions which leaves room for decisions based only on cost and not for the welfare of the incarcerated person.

Almost all incarcerated persons will return to the community at some point and if the Department of Corrections denies treatment of pre-existing conditions (incidentally something that insurance companies are not legally able to do) these conditions worsen, limiting the individual's ability to work upon release and adjust to life on the outside. This also places the cost of missed health care management on the community health systems and costs the individual and community much more due to worsened health and co-morbidities than would have occurred had their pre-existing condition been managed. It makes sense for the people and communities of Oregon, as well as the incarcerated person for the DOC to provide these basic health services while they have custody. I urge you to support SB 293-1 for the benefit of all Oregonians.

Thank you for your consideration. Sincerely,

Claire McKinley Yoder, RN