

2018 POLICY BRIEF

SUPPORT COUNTIES IN IMPROVING HEALTH SERVICES FOR JUSTICE-INVOLVED INDIVIDUALS

QUICK FACTS

- Counties nationwide annually invest \$176 billion in community health systems and justice and public safety services, including the entire cost of medical care for all arrested and detained individuals
- Approximately 11.4 million individuals pass through 3,100 local jails each year with an average length of stay of only 23 days
- Approximately 2/3 of those detained in jails at any given time are pre-trial and presumed innocent. Nevertheless, current federal law prohibits Medicaid from paying for their medical care
- Prevalence rates of serious mental illnesses among inmates are 3 to 4 times higher than the general population
More than 95 percent of prisoners eventually return to the community, bringing their health conditions with them

ACTION NEEDED:

Urge your Members of Congress to pass legislation that supports counties' efforts to improve health services for justice-involved individuals and reduce the number of people with mental illness in jails. Specifically, urge your members on health authorizing committees to support bills that would allow individuals in custody to continue receiving Medicaid and other federal benefits until they are convicted, sentenced and incarcerated, require states to suspend instead of terminate Medicaid for individuals in jails and allow for comprehensive behavioral health services and the recruitment of health professionals in county jails.

BACKGROUND:

Counties nationwide annually invest \$176 billion in community health systems and justice and public safety services, including the entire cost of medical care for all arrested and detained individuals. Counties are required by federal law to provide adequate health care for approximately 11.4 million individuals who pass through 3,100 local jails each year with an average length of stay of only 23 days.

This population has a higher prevalence of chronic health conditions (e.g. cervical cancer, hepatitis, arthritis, asthma and hypertension) than the general population. Approximately 64 percent of jail inmates have a mental illness. Serious mental illnesses are three to four times more prevalent among inmates than the general population, and almost three quarters also have substance abuse disorders. Medicaid is the single largest source of funding for behavioral health services in the U.S., and the number of inmates who are eligible for health coverage has increased in states expanding Medicaid.

Approximately two-thirds of those detained in jails at any given time are pre-trial and presumed innocent until proven guilty. Nevertheless, Section 1905(a)(A) of the Social Security Act prohibits federal Medicaid matching funds from being used to pay for their medical care, even if they are eligible and enrolled. This results in counties covering the full cost of health care services that are unnecessarily disconnected.

More than 95 percent of prisoners eventually return to the community, bringing their health conditions with them. In many states, federal benefits are completely terminated instead of being suspended. It can take months for former inmates to reenroll and for benefits to be restored upon reentry into the community. This creates a break in access to needed medical, mental health and addiction treatments when an inmate reenters the community.

KEY TALKING POINTS

- **Increasing flexibility in Medicaid is crucial to helping counties fulfill their safety net obligations to justice-involved individuals and improve health outcomes.** Extending health benefit coverage to those in pre-trial custody would enable counties to better coordinate systems of care and treat previously undiagnosed individuals with higher incidences of chronic disease, mental illness and substance abuse.
- **Improving health services to justice-involved individuals decreases short-term costs to local taxpayers and long-term costs to the federal government.** When required jail health care is provided for and reimbursed, pressure on local taxpayers is reduced. In addition, increasing access to primary care and behavioral health and substance abuse treatment for justice-involved individuals has been shown to reduce “downstream” health care, disability and criminal justice costs over time.
- **Coordination between counties’ mental health and criminal justice systems improves public safety.** By treating these populations, jails can help break the cycle of recidivism caused or exacerbated by untreated mental illness, substance abuse and other co-occurring disorders. County law enforcement can also allocate more resources to keeping communities safer.

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