

HEALTH AND HUMAN SERVICES

Resolution HHS-16-03

ADDRESSING MENTAL HEALTH IN THE CRIMINAL JUSTICE SYSTEM TO REDUCE RECIDIVISM RATES AND IMPROVE PRISONER HEALTH AND TRANSITION BACK TO THE COMMUNITY

WHEREAS, the National Black Caucus of State Legislators (NBCSL) has been a strong proponent for necessary reforms to the criminal justice system and an advocate for successful re-entry of returning citizens to their communities;

WHEREAS, the prison population is disproportionately comprised of African American and Latino persons with one in every 13 African American males in the U.S. aged 30 to 34 incarcerated or imprisoned in 2011, one in 36 Latino males incarcerated and one in every 90 white males of the same age group incarcerated.

WHEREAS, African American and Latino women were 2.5 times more likely and 1.4 times more likely respectively, to be incarcerated than their white counterparts;

WHEREAS, the expenses on incarceration accounts for a substantial amount of almost every state's budget;

WHEREAS, the cost of incarceration is an expense borne by a state's taxpayers;

WHEREAS, according to the Bureau of Justice Statistics, more than half of those incarcerated in the United States have mental health issues;

WHEREAS, enhanced mental health training for law enforcement personnel and the use of diversion programs will reduce arrest rates by de-escalating mental health crisis situations;

WHEREAS, mentally-ill incarcerated or imprisoned adults are disproportionately abused, beaten and/or raped;

WHEREAS, effectively treating inmates' physical and mental health illnesses improves their well-being and can reduce the likelihood their condition will deteriorate, that they will commit new crimes, violate their parole and return to prison;

WHEREAS, the ability of offenders with serious mental illness (SMI) to obtain appropriate health care services upon release from prison is essential to reducing recidivism rates;

WHEREAS, prisoners with SMI who have their Medicaid coverage canceled rather than suspended upon incarceration, face delays in access to essential health benefits upon their release of two to three months; and

WHEREAS, the Centers for Medicare and Medicaid Services (CMS) encourages states to suspend rather than terminate Medicaid eligibility to limit long delays in accessing health care benefits and

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services upon release from prison.

THEREFORE BE IT RESOLVED, that the National Black Caucus of State Legislators (NBCSL) urges federal, state and county legislators and officials to consider and enact policies to enhance access to mental health services at multiple states in the criminal justice system which will create better results for both the individual and the system;

BE IT FURTHER RESOLVED, that the NBCSL supports a wide range of programs to improve mental health treatment for individuals involved in the criminal justice system aimed to aid communities to end recidivism;

BE IT FURTHER RESOLVED, that the NBCSL urges states that the law enforcement community to consider holistically integrating mental health treatment & services such as crisis intervention teams (CITs) into the criminal justice system spectrum, in an effort to address mental health crisis situations and to reduce arrest rates;

BE IT FURTHER RESOLVED, that the NBCSL calls on state to examine the costs and benefits of suspending Medicaid coverage instead of termination of coverage for individuals in the criminal justice system;

BE IT FURTHER RESOLVED, that the NBCSL calls on all states to allow Medicaid coverage to be suspended for incarcerated persons instead of terminating Medicaid eligibility;

BE IF FURTHER RESOLVED, that the NBCSL call on states and federal government to consider promising criminal justice interventions and policies for mentally-ill offenders such as diversion programs and mental health courts to rout SMI offenders to community based mental health treatment programs instead of prison or jail; and

BE IF FINALLY RESOLVED, that a copy of this resolution be transmitted to the President of the United States, the Vice President of the Unites States, members of the United States House of Representatives and the United States Senate, and other federal and state government officials and agencies as appropriate.

SPONSOR: Representative Gregory W. Porter (IN)

Committee of Jurisdiction: Health and Human Services Policy Committee

Certified by Committee Co-Chairs: Representative Mia Jones (FL) and Senator Shirley Nathan Pulliam (MD)

Ratified in Plenary Session: Ratification Date is December 4, 2015

Ratification is certified by: Senator Catherine Pugh (MD), President