

Jail Transition Services

Engrossed Substitute House Bill 1109; Section 215(11); Chapter 415;
Laws of 2019

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Jail Transition Services

Washington State
Health Care Authority

Medicaid Program Operations and Integrity

P.O. 45530

Olympia, WA 98504

Phone: (360) 725-1487

Fax: (360) 725-9951

hca.wa.gov



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Executive Summary

The Health Care Authority (HCA) is submitting this legislative report in response to Engrossed Substitute Senate Bill 6032 (2018), which funds jail-based mental health services for mentally ill offenders confined in a county or city jail and assistance in accessing services upon release. The proviso provides for:

“\$2,291,000 of the general fund—state appropriation for fiscal year 2019 is provided solely for mental health services for mentally ill offenders while confined in a county or city jail and for facilitating access to programs that offer mental health services upon release from confinement. The authority must collect information from the behavioral health organizations on their plan for using these funds, the numbers of individuals served, and the types of services provided and submit a report to the office of financial management and the appropriate fiscal committees of the legislature by December 1st of each year of the biennium.”

The remaining Behavioral Health Organizations (BHO), along with the Integrated Managed Care (IMC) regions, contract for jail-based services with their provider networks. From July 1, 2018 through June 30, 2019, over 12,435 individuals received over 46,654 of these services.

The BHOs and IMC regions provide incarcerated individuals with mental health evaluations, treatment, and intake services (substance use disorder assessments and pre-release services), including help applying for Washington Apple Health (Medicaid) and other benefits. After release, the BHOs and IMC regions help people transition back into the community by working to ensure their basic needs are met, providing job support, housing support, and coordinating primary care access.

While all are committed to serving the incarcerated and post-release populations, the BHOs and IMC regions reported common barriers. At an organizational level, these include insufficient funding and difficulty finding qualified mental health professionals to hire. At a service level, these barriers include lack of affordable and appropriate housing, available jail space that can be used for treatment services, and health care access — including prescription drugs — when Apple Health coverage is suspended while people are in jail.

HCA will continue collecting data and report back to the Office of Financial Management (OFM) and the Legislature by December 1, 2020.



Background

Individuals experiencing incarceration often have multiple immediate needs, including behavioral and physical health issues, which require ongoing care. Upon release these individuals continue to need support, including continued behavioral and physical health services, medication, housing, income support, employment, and education. Accessing services to address these needs is key for individuals to successfully transition back into their communities. Many individuals experiencing serious mental illness end up incarcerated due to behavior associated with the symptoms of their illness. Jail-based services staff help link incarcerated individuals experiencing a serious mental illness with appropriate community services. This increases the likelihood of successful community reintegration.

Services provided as part of this program are intended to facilitate safe transition into community services.

Numbers Served

For the July 1, 2018 through June 30, 2019 reporting period, the BHOs, including the IMC regions, reported that a total of 12,435 individuals were served through jail services. These individuals received a total of 46,654 service encounters.¹

HCA recently implemented a database tracking system for this population. Substitute Senate Bill 6430 directs the HCA to suspend — rather than terminate — medical assistance benefits for persons incarcerated or committed to a state hospital. The intent is to provide continuity of care for individuals upon re-entry into the community. With this system, we will be able to determine how many individuals had their Apple Health coverage suspended while incarcerated and when their coverage was reinstated.

Services Provided

The BHOs and IMC regions indicated that they provided (and will continue to provide) the following types of services to individuals in county and city jails:

During confinement:

- Mental health evaluation/screening
- Mental health treatment (primarily outpatient)
- Mental health intake
- Substance use disorder assessment/screening
- Assistance applying for Apple Health and other publically-funded benefits
- Integrated dual disorder treatment

¹ For reference, throughout a one-year period of any given time, an average of 14,000 people are incarcerated in Washington State county or city jails.



- Pre-release services and case management

At release and post-release:

- Providing intensive post-release outreach
- Facilitating post-incarceration access to basic needs (e.g. clothing, food, hygiene)
- Obtaining new identification upon release from custody (e.g. state identification)
- Facilitating transportation at time of release
- Coordinating access to primary health care (including dental care) upon release
- Providing post-release housing support (linking to emergency shelters, transitional housing, and giving assessments for low-income public housing)
- Providing post-release employment support
- Facilitating access to education and other job training

As of July 1, 2018, HCA contracts with all BHOs and IMC regions. The BHOs and IMC regions then contract with regional providers to develop their networks, to purchase services, and hire mental health care professionals. The majority of services provide access to intensive, short-term case management to individuals with mental health disorders who need assistance reintegrating into the community. Case management provides individuals with assistance on how to access publically funded benefits (if eligible); housing assistance; outpatient treatment; and other services including education, training, and employment in the community.

Mental health professionals licensed through the Department of Health (DOH) provide on-site mental health evaluations. The courts may receive evaluation summaries to ensure mental health professional and justice system collaboration on comprehensive discharge planning for participants being released into community care.

How Funding Will Be Used

HCA requested from each BHO and IMC region their plans for how they will use FY 2019 funding to implement jail services. See Appendix A for 2019 funding allocations by BHO and IMC.

Barriers to Services

The most common barriers for all regions are:

- Insufficient funding
- Lack of qualified workforce
- Lack of access to affordable and appropriate housing
- Lack of access to medications and medical services because a person's Apple Health enrollment is suspended while they are in jail
- Lack of specialized training for the behavioral health workforce on how to serve this population
- Insufficient jail space to provide treatment services



BHO/IMC region updates

The following is a description of jail services provided by each BHO/IMC region. Each includes the following underlying themes:

- Workforce issues; there are not enough licensed or skilled professionals to work with this population.
- Access to affordable housing; finding affordable housing in Washington is difficult.
- Lack of funding; there is not enough funding to support the needs of this population.

See Appendix B for a map detailing each region.

Great Rivers Behavioral Health Organization

Great Rivers BHO includes Cowlitz, Grays Harbor, Lewis, Pacific, and Wahkiakum counties.

Great Rivers BHO reports they provide services in Lewis, Grays Harbor, Pacific, and Wahkiakum jails and have Court Coordinator positions in Grays Harbor, Cowlitz, and Pacific County. Great Rivers BHO also added behavioral health supplemental medication in the Lewis County Jail, which is managed by the Lewis County Sheriff Office. The BHO will continue working to provide intake assessments and case management to individuals who are incarcerated, and to ensure there is a link to community services upon release.

A jail services position develops the initial recovery/diversion plan for all assigned clients. This position also works to provide transition services between the clients and assigned case managers to ensure continuity of services for individuals in the jail.

These proviso-funded positions will continue to:

- Serve as liaisons between jails, courts, and crisis offices within the community
- Provide written reports and testimony to the courts, as required
- Assist inmates with Apple Health applications to ensure benefits are activated on release
- Provide consultation, education, and act as liaisons with law enforcement, health personnel, and other agencies and groups

Greater Columbia Behavioral Health-Administrative Services Organization

Greater Columbia BHO includes Asotin, Benton, Columbia, Franklin, Garfield, Kittitas, Klickitat, Walla Walla, Whitman, and Yakima counties.

The jails in Yakima and Benton County have been able to offer contract services to other jurisdictions, however many inmates are incarcerated for longer periods of time with ongoing



behavioral health needs. In at least one location, Disability Rights Washington has demanded an increase in available routine services (individual and group therapies).

Greater Columbia Behavioral Health-Administrative Services Organization (BH-ASO) contracted for jail services in five agencies within their provider network. However, there is not sufficient funding to support a full range of program services. Funding is only available for discharge and transition services. Greater Columbia BH-ASO reports this does not meet the needs of the incarcerated individuals. Without this funding they report an inability to provide ongoing service aids in stabilizing the incarcerated individuals and reducing the likelihood of recidivism.

The number of candidates willing to work in a corrections setting is low. With a workforce shortage across behavioral health, jail based services are in competition with outpatient care. There are no other Proviso activities available. However, local government contributions are assisting in providing access to services. No new services were provided in FY2019 with Jail Proviso funding.

King County Behavioral Health-Administrative Services Organization

Within King County BH-ASO, the Diversion and Reentry Services (DRS) section administers a continuum of reentry planning, bridge supports and intensive services and support (often with housing) for individuals who come into contact with the local criminal legal system. Across the jurisdictions in King County there are over 2,000 individuals that are released from seven jails many of whom need mental health services. King County BH-ASO supports all contracted providers to navigate this local criminal legal system, and does so through subject matter expertise and system coordination provided by King County DRS section.

King County has also been working to expand their prosecutorial diversion efforts related to the Trueblood class providing harm reduction and trauma informed care models with individualized approaches that can more proactively engage individuals in SUD treatment.

- The King County BH-ASO has several jail services programs including:
 - Integrated dual disorders treatment serving adults with co-occurring behavioral health conditions
 - Vital (Familiar Faces Intensive Care Management) and Law Enforcement Assisted Diversion (LEAD) program expansion
 - Behavioral Health Treatment on Demand, to include Medication Assisted Therapy (MAT) expansion and access programs
 - Creation of system-connected housing to support the housing needs of individuals connected to the criminal legal system
 - Prosecutorial Diversion Programs (diversion at Intercept 2) via work with the King County Prosecuting Attorney's Office and Seattle City Attorney's office Mental health evaluations and services, serving adult drug diversion court participants
 - Benefits application assistance, serving adults with behavioral health conditions who are transitioning to a day-reporting alternative



King County BH-ASO reports experiencing many system level barriers, including capacity constraints, there is a limited ability to provide needed services to the population including:

- Lack of intensive care teams,
- Lack of coordinated outreach and engagement to assist people in navigating the systems,
- Lack of immediate and greater access to Medication Assisted Treatment in jail facilities
- Need for treatment interventions for methamphetamines use.

In addition, there are significant workforce shortages as the community-based provider network continues to struggle to hire and retain qualified staff.

Despite these challenges, the BH-ASO's jail services programs will continue to provide transitional and support services including mental health evaluations, case management, discharge planning, and assistance applying for Apple Health and other publically funded benefits.

Beacon North Central Behavioral Health-Administrative Services Organization

Beacon North Central Integrated Managed Care includes Grant, Douglas and Chelan counties.

The North Central IMC Region currently contracts with Catholic Charities and Grant Integrated Services to provide jail services.

Last fall regional stakeholders including MCOs, ASO, corrections facilities, and providers met and identified a plan to pool regional jail services dollars from Grant, Chelan, and Douglas counties to develop a team that would provide services across the region. This plan was further supplemented by available SB6032 funds. Catholic Charities agreed to provide the service and developed a two person team that responds to facilities across the region. The team responds two days per week to the Chelan County Jail and two days per week to the Grant County Jail. They also split time between other facilities including Martin Hall, Douglas County Jail, and Okanogan County Jail. The program has developed good pathways for referrals and is increasing over time in volume of services.

This region continues to report difficulty with accessing and locating affordable housing for the individuals coming out of a jail setting. Additionally, there is limited space in the jail to provide mental health services, assessments, and intake to individuals. North Central is also experiencing workforce challenges, including difficulty finding skilled and experienced licensed mental health staff.

There is also a challenge with the requirement of providing services no earlier than 30 days prior to release because court dates are subject to change and it is not always possible to predict if or when a person will be released from jail.



North Sound Behavioral Health-Administrative Services Organization

North Sound BHO-ASO transitioned to a Fully Integrated Region on July 1, 2019. The region still serves Island, San Juan, Snohomish, Skagit and Whatcom counties.

North Sound BH-ASO reports they were able to provide:

- Transportation and housing coordination in some parts of the region upon release
- Assistance with re-establishing health insurance
- Assistance in establishing care with a medical provider
- Coordination for inpatient SUD treatment, coordination for outpatient MH treatment
- Coordination for domestic violence treatment
- Employment and education planning
- General support and planning prior to release.

North Sound BH-ASO identified that there is a general busyness in the jail environment which makes seeing clients at scheduled times difficult. There continues to be a need for affordable housing, additional funds to enhance and support the current programs, and there continues to be a struggle to hire a trained workforce to conduct mental health and substance use disorder assessments in the jail setting. The individuals in the jail require multiple services including prescriptions which are frequently not available. North Sound lacks access to immediate and robust community based mental health and SUD services. In some parts of the region, appointments are booked up to six weeks out.

North Sound BH-ASO plans to continue purchasing services that include initial eligibility screening, mental health assessment, enrollment into ongoing post-release services, coordination with contracted agencies, provision of resources related to homelessness, behavioral health treatment, employment assistance, and follow-up interviews with incarcerated individuals who reoffend without completing services.

Optum/Pierce Behavioral Health Organization

Optum/Pierce BHO closed as of January 1, 2019 and did not provide a jail services report.

Pierce Beacon-Behavioral Health-Administrative Services Organization

Beginning January 1, 2019 Beacon began contracting in Pierce County.

Beacon contracts with Greater Lakes Mental Health who provides the majority of the Jail Services/Forensic contracts including Jail Transitions (JTS), Flexible Assertive Community Treatment (FACT), Community Re-entry Program (CRP), and a Mental Health Professional (MHP)

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who works with the Lakewood Police Department (not funded through Beacon). All programs are running smoothly.

During the initial transition from Optum to Beacon, there was an obstacle with JTS and CRP in getting referrals and the daily list of individuals in jail as they had been getting from Optum-Pierce. Beacon has since worked to resolve this issue and daily logs are being provided. They continue working to raise awareness of available services to increase referrals.

Greater Lakes Mental Health has worked to collaborate with other providers in the community, specifically around Trueblood, that has been a struggle although efforts continue. Greater Lakes Mental Health has struggled to keep positions filled in CRP, currently all roles are filled.

Beacon Pierce noted that although not currently funded, they believe JTS and CRP would benefit from the addition of a Substance Use Disorder Professional to the teams.

Salish Behavioral Health Organization

The Salish BHO region includes Clallam, Jefferson, and Kitsap counties

Jail service funding from July 2018-June 2019 was primarily used to fund jail screening and limited assessments. Kitsap County has greater funding and therefore a more diverse range of jail services. Clallam and Jefferson County primarily focus this funding on screening of individuals in jail for services post-incarceration. The funding allows for limited services to individuals. Salish BHO has been working with providers and jails to update MOU's.

The Salish BHO continues to report difficulty in finding qualified mental health staff to provide services to the jail population. Providers continue to express the need for additional funding to enhance and support current programs. Additional funding would help support a plan for pre-diversion and post-diversion options. The mental health staff will continue to provide screenings, intakes, rehabilitation case management, and case planning as funds allow.

The providers would also like to increase substance use disorder treatment provisions under the jails services programs to provide screening, assessments, and residential treatment pre- and post-incarceration.

Spokane County-Behavioral Health-Administrative Services Organization

Spokane BHO counties include Adams, Ferry, Lincoln, Pend Oreille, Spokane, and Stevens.

The Spokane Regional Service Area has historically supported Jail Services and recognized the importance of ensuring these services are available to incarcerated individuals to ensure a smooth transition back into the community. Spokane has consistently advocated for additional funds to ensure each county in the region has the opportunity to provide jail transition services. Each county in the region identifies that there is a significant need for more funding.



The transition to Integrated Managed Care (IMC) for the Spokane Regional Service Area (RSA) occurred during State Fiscal Year (SFY) 2019. As a result of IMC effective January 1, 2019, Okanogan County was reassigned to the North Central Washington region. Therefore, the behavioral health agencies (BHAs) who received contracted funding for Jail Services from the Spokane County Regional Behavioral Health Organization (SCRBHO) and then the Spokane County Regional Behavioral Health (Administrative Services Organization), SCRBH (ASO), changed during this time.

The SCRBHO and SCRBH (ASO) provided a total of an additional \$264,606 in state Non-Apple Health funds to the Jail Proviso funds allocated by the Health Care Authority for jail services in the region.

Additionally, Spokane County contributed \$385,574 in local sales tax funds during SFY 2019 to Spokane County Detention Services for behavioral health services.

Northeast Washington Alliance Counseling Services often receives requests for psychotropic “medication only”. This request is typically to reduce symptoms of anxiety or depression related to being incarcerated, although there are many individuals who need medication for other persistent, chronic mental illness, such as schizophrenia. There is a local physician who is contracted with the jails in each community. However, they often do not want to prescribe and/or the cost of the medication is prohibitive within the local jail budget.

Pend Oreille County Counseling Services is unable to respond to requests for non-crisis evaluations, counseling, or care coordination supports, due to inadequate jail proviso funding to cover services. This results in missed opportunities for engagement and outreach services due to staffing capacity limitations.

Additionally, in rural county jails, there is limited space to meet with individuals in the jails. The schedule and limited space for other appointments, such as meeting with attorneys, visitation with family members or other supports, etc., which impacts the ability of behavioral health staff to consistently meet with individuals.

Northeast Washington Alliance Counseling Services reported they have been turned away from the jail setting at times due to internal incidents or events that have impacted jail staff ability to facilitate assisting an individual to meet with behavioral healthcare staff.

Northeast Washington Alliance Counseling Services does not provide comprehensive services to individuals, such as psychoeducational groups due to space and time constraints. This forum would be very beneficial to this population. Solutions would require coordination with jail staff and specific funding to increase space and staffing. There is insufficient funding for Adams County Integrated Health Care Services and Pend Oreille County Counseling Services to provide this service modality even if there was space available.

Funding for Adams County Integrated Health Care Services, Northeast Washington Alliance Counseling Services, and Pend Oreille County Counseling Services does not cover the need to provide the amount of assessments requested at the jail.



Northeast Washington Alliance Counseling Services attempts to provide assessments within the state guidelines and provide care coordination to assure ongoing individual needs are met. To provide this within three counties, the current funding does not cover the costs. It would be worth considering funding a FTE that is primarily assigned and ideally, located at the jail, particularly for Stevens County. However, space is limited for this solution, as discussed above.

Pend Oreille County Counseling Services' current level of funding essentially creates a random draw effect of who or how many could be served, in any given month. It is challenging to carve out a set time considering the staffing capacity needs and the administrative tracking and potential for frustration by criminal justice partners.

The rural counties would appreciate sufficient Jail Proviso funds that could cover a dedicated FTE - or at the very least, a part-time, behavioral health professional, in the amount of \$6,000 per month for a full-time employee or \$3,000 per month for a part-time employee.

As reported during the previous state fiscal year 2018 Jail Service Report, the biggest barrier to service within rural jails continues to be lack of adequate funding to provide needed services, particularly the limited access to medication management.

Workforce shortage is an ongoing issue in the Spokane Region.

Thurston/Mason Behavioral Health Organization

Thurston/Mason BHO includes Thurston and Mason counties.

For the SFY 7/1/2018- 6/30/19, Thurston/MasonBHO providers served 1,010 clients with state only funds through their contract with HCA. Individual assessments, crisis intervention, rehab case management, and SUD assessments were provided.

Barriers to the ongoing delivery of these services include funding shifts in 2020 that will occur based on moving to the IMC model. Currently, Thurston/MasonBHO invests over \$600,000 of state funds, in addition to \$125,000 in jail proviso funds. With the shift of some of the state dollars to the MCOs to cover non-Apple Health service costs associated with Apple Health enrollees, along with an emphasis on prioritizing funds for crisis services and ITA costs, it is unlikely the Thurston/MasonBH-ASO alone will be able to continue to maintain jail services without other funds sources. The MCOs, however, have contract requirements and state dollars to support jail transition services.

In June 2018, the main provider in Thurston County Corrections Facility (TCCF) terminated their program contract with TMBHO, citing workforce shortage and unknown funding allocation in 2020. TMBHO worked with TCCF to transition services to Olympic Health & Recovery Services (OHRS) for the remainder of the year, pending funding discussions with Thurston County Treatment Sales Tax team and TMBH-ASO.



Beacon Southwest Behavioral Health-Administrative Services Organization

Southwest Region includes Clark and Skamania counties.

Southwest Region reports they will continue to contract for jail services to Lifeline Connections, which is part of their provider network. Lifeline plans to increase their master's level clinicians' time to provide more assessments in the jail setting.

The Southwest region is experiencing difficulty recruiting and retaining mental health professionals. Beacon has struggled with finding affordable housing for individuals. The region is currently working with a jail diversion workgroup, convened by the local court system, on developing services to increase diversion options for individuals with behavioral health needs.

Conclusion

HCA will continue collecting data and will report to OFM and the Legislature by December 1, 2020 on the number of individuals served and types of services provided. HCA will also measure outcomes to determine if recidivism rates are affected for individuals benefiting from this funding.

Individuals coming out of the jail system that are enrolled in Apple Health services will have an option to access supportive housing with the creation of the Foundational Community Supports (FCS) part of Washington's 5-year Apple Health transformation project providing targeted services for people in need. Supported housing services are available for Apple Health beneficiaries that meet the program criteria.

Supported employment services may be another option for Apple Health enrolled individuals that have a physical, behavioral, or long-term service need. These services include individual job coaching and training, help with employer relations and assistance with job placement.

This funding has allowed the regions to make improvements for those who are incarcerated or are transitioning back into the community. Although limitations continue to exist, each region is committed to providing the necessary services to promote the continuity of care that these individuals so desperately need. Finally, with additional financial support, the regions could build a larger skilled workforce with behavioral health training, create additional methods to help this population access medical services, and work with local housing agents on access to affordable housing once released.



Appendix A: 2018 Jail Services Funding Allocations

2018 Jail Services Funding Allocations, by Behavioral Health Organization and Integrated Managed Care Region

	BHOs	BH-ASO	
	Per Month	Per Month	FY18 Total
Great Rivers	8,629		103,548
Greater Columbia		22,787	273,444
King		52,524	630,288
North Central		6,879	82,548
North Sound		29,992	359,904
Beacon Pierce		21,604	259,248
Salish	9,564		114,768
Southwest		12,822	153,864
Spokane		16,960	203,520
Thurston Mason	9,156		109,872

Note: The funding distribution model is based on 70 percent of the general population (based on 2010 Office of Financial Management population data) and 30 percent of the Washington prisons, average daily population (ADP).



Appendix B: Regional Map, Behavioral Health Organization and Integrated Managed Care

Current BHO/IMC Regional Map

