

# SENATE BILL REPORT

## SB 5912

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As of January 16, 2024

**Title:** An act relating to reentry services and supports.

**Brief Description:** Concerning reentry services and supports.

**Sponsors:** Senators Wilson, C., Dhingra, Frame, Hasegawa, Nguyen, Nobles and Trudeau.

**Brief History:**

**Committee Activity:** Human Services: 1/16/24.

**Brief Summary of Bill**

- Requires the Department of Corrections to develop an individual discharge plan and provide specified reentry services within one year prior to the discharge or release of an incarcerated individual.

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### SENATE COMMITTEE ON HUMAN SERVICES

**Staff:** Kelsey-anne Fung (786-7479)

**Background:** Individual Reentry Plan. The Washington State Department of Corrections (DOC) must develop an individual reentry plan for every incarcerated individual under DOC jurisdiction, except for individuals sentenced to life without the possibility of release, sentenced to death, or subject to deportation. When developing the reentry plan, DOC must use standardized and comprehensive tools to assess and identify any criminogenic risks, programmatic needs, and educational and vocational skill levels. The assessment tool should consider demographic biases, such as culture, age, and gender, as well as the needs of the incarcerated individual, including any learning disabilities, substance abuse or mental health issues, and social or behavior challenges. The plan must be developed within certain timelines, and must be periodically reviewed and updated as appropriate.

The individual reentry plan must include, at a minimum:

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- a plan to maintain contact with the incarcerated individual's children and family if appropriate;
- a portfolio of the incarcerated individual's education achievements, work experience and skills, and training received prior to and during incarceration; and
- a plan to facilitate reentry into the community that addresses education, employment, substance abuse treatment, mental health treatment, family reunification, and other needs.

Prior to discharge, DOC must evaluate the incarcerated individual's needs and, to the extent possible, connect the individual with existing services and resources that meet those needs. DOC must also connect the incarcerated individual with a community justice center or community transition coordination network in the release area if one exists.

Identification. Per DOC policy, DOC assists individuals in obtaining a Washington State identification card from the Department of Licensing or a replacement social security card from the Social Security Administration, or both. A prison case manager initiates applications for individuals who need state identification up to one year before the earliest transfer date to partial confinement, the release date, or any known court date for individuals impacted by sentence reform. For a replacement social security card, an individual may submit a request within 180 days to the earliest transfer date to partial confinement, the release date, or any known court date for individuals impacted by sentence reform.

Medications. Per DOC policy, health services staff have at least 14 days to prepare medications in advance of a patient release or transfer. DOC staff will provide release medication orders to the DOC pharmacy at least seven days before release or transfer. Patients releasing or transferring to a reentry center will be provided up to a 90 day supply of medication, subject to the discretion of the DOC practitioner. A combination of at least a 30 day supply of DOC provided medication and written prescriptions may be used to meet the 90 day requirement.

Assistance with Applying for Benefits. Per DOC policy, before transition, incarcerated individuals may receive assistance with applying for health insurance, veteran's benefits or community resources, and food and cash assistance through the Department of Social and Health Services.

Legislation from 2021 requires Medicaid coverage to be fully reinstated at the moment of a person's release if the person was enrolled in Medicaid prior to confinement or the person was enrolled in suspense status during confinement. It also required the Health Care Authority (HCA) to apply for a federal Medicaid waiver allowing coverage for confined individuals at prisons, jails, juvenile detention facilities, and other total confinement institutions at least 30 days prior to release. In June 2023 the Centers for Medicare and Medicaid Services approved HCA's waiver request, allowing coverage of targeted services up to 90 days prior to release of confined individuals who are eligible for Medicaid.

King County Diversion and Reentry Services. The Jail Release Planning Program in King County provides clinical continuity of care by connecting incarcerated individuals with various community-based services. Once a release date is established, the release planner and inmate-patient collaborate on a plan for successful discharge. This can include setting up benefits, medical appointments, nursing care, crisis respite, coordinating mental health and substance use treatment, and referring the individual to other social services.

**Summary of Bill:** Within one year prior to the release or discharge of an incarcerated individual, DOC must develop an individual discharge plan and provide reentry linkage case management services as follows:

- evaluate the incarcerated individual's behavioral health and physical health needs and, to the extent possible, connect the incarcerated individual with relevant services, treatment programs, medication-assisted treatment, tribal and urban health clinics, and behavioral health services, and other resources based on the individual's evaluated needs;
- assist the incarcerated individual with obtaining identification upon release;
- assist the incarcerated individual with submitting applications for state and federal government assistance and benefits programs on behalf of the individual; and
- prepare a 90 day supply of any necessary prescribed medications to be provided upon release, through a combination of a 30 day supply of in-hand medications and a 60 day supply of prescriptions, to ensure continuity of care and that medications are readily available for the incarcerated individual upon release.

If DOC has made arrangements with a partnering nonprofit organization that will support the individual's reentry into the community, DOC must make every effort to coordinate the timing of the individual's release from custody.

**Appropriation:** None.

**Fiscal Note:** Requested on January 2, 2024.

**Creates Committee/Commission/Task Force that includes Legislative members:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony:** PRO: It is vital to set up and give incarcerated individuals the best chance for successful reintegration. They need hope and every incarcerated individual will leave institutions and return home someday. Many leave institutions without any reentry plan and are set up for failure. Especially when an individual is incarcerated for a long period of time, the community looks very different now than when the person entered the institution.

This bill requires DOC to make every effort to coordinate the timing of the individual's

release from custody because often individuals from partnering nonprofit organizations are left waiting at the bus stop for a released individual to arrive, and the individual is not on the bus. This is one way to make sure communities are safe.

OTHER: Reentry plans are developed for certain populations, and this bill would expand it to all individuals transitioning back into the community. The initial 72 hours following release are critical and it is imperative to have access to food, transportation, clothing, and shelter to facilitate transition. Due to limited resources for release transition planning, the focus is on individuals with the greatest need, and reentry plans are only completed for individuals transitioning from prison to partial confinement. Additional resources are needed to effectively implement this bill and for planning, coordination, and case management.

This wholistic approach to supporting individuals and ensuring continuity of care improves outcomes, reduces recidivism, and reduces the need for emergency medical services. A comprehensive, compassionate, and proactive approach to supporting individual's transition home will help address immediate needs and set up the person for long-term success. DOC currently lacks funding to provide comprehensive transition planning for every release.

**Persons Testifying:** PRO: Senator Claire Wilson, Prime Sponsor.

OTHER: Janel McFeat, Executive Director of Washington Statewide Reentry Council; Danielle Armbruster, Washington State Department of Corrections; Brooke Amyx, Washington State Department of Corrections.

**Persons Signed In To Testify But Not Testifying:** No one.