

March 4, 2024

Members of the House Health and Social Services Committee,

The U.S. Department of Health and Human Services (HHS), through the Centers for Medicare & Medicaid Services (CMS), had **announced a new opportunity for states to help increase care for individuals who are incarcerated in the period immediately prior to their release to help them succeed and thrive during reentry.** The new Medicaid Reentry Section 1115 Demonstration Opportunity would allow state Medicaid programs to cover services that address various health concerns, including substance use disorders and other chronic health conditions.¹

According to the U.S. Department of Justice, from 2011 to 2012, approximately 37 percent of people in state/federal prisons and 44 percent of people who were incarcerated overall had a history of mental illness. The National Institute on Drug Abuse (NIDA) estimates that the rate of substance use disorders for people who are incarcerated may be as high as 65 percent. **In Alaska, DOC reports that, of those currently incarcerated, 65 percent have a mental health challenge and 80 percent have a substance use disorder.**² Our rates are higher than the national average which are concerning since Alaska holds the highest incarceration rate per capita internationally.³ The NIDA report also says that, **without treatment, individuals formerly incarcerated are at increased risk of overdose within the first few weeks of reentry.**

The Medicaid Reentry Section 1115 Demonstration Opportunity focuses on covering high-quality services for individuals who are incarcerated, eligible for Medicaid, and returning home to their communities – a group of individuals who have been historically underserved and adversely affected by persistent poverty and inequality. **Improving health care transitions and addressing social determinants of health** – from case management to medication-assisted treatment – for individuals after they have been released from carceral settings **increases the likelihood that they may continue to receive crucial substance use disorder, mental health, and other health care treatment during this vital period.** It also holds promise for reducing emergency department visits, inpatient hospital admissions, overdose, and overdose-related issues, including death, and improving health outcomes overall. Moreover, **addressing people's underlying health needs enhances their ability to succeed and thrive during reentry, thereby lowering the risk of recidivism, helping make our communities healthier and safer.**

If HB 344 is inclusive of the Reentry 1115 Medicaid Waiver, then I fully support this bill.



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¹ CMS announcement: [SMD 23-003 - Opportunities to Test Transition-Related Strategies to Support Community Reentry and Improve Care Transitions for Individuals Who Are Incarcerated \(medicaid.gov\)](https://www.medicaid.gov/smd-23-003-opportunities-to-test-transition-related-strategies-to-support-community-reentry-and-improve-care-transitions-for-individuals-who-are-incarcerated)

² DOC report: [Microsoft PowerPoint - FY2024 DOC HFIN Subcommittee February 14, 2023.pptx \(akleg.gov\)](https://akleg.gov/legislation/2023/02/14/MSPP/FY2024%20DOC%20HFIN%20Subcommittee%20February%2014,%202023.pptx)

³ Prison Policy Initiative data for Alaska: [Alaska profile | Prison Policy Initiative](https://prisonpolicy.org/en/country-profiles/Alaska/)