



California Pan-Ethnic Health Network

Repealing the Affordable Care Act & CA's Criminal Justice Reforms Impact of the "American Health Care Act"

House Republicans are fast-tracking a bill to repeal the Affordable Care Act (called the American Health Care Act), which would eliminate access to health care for millions of Californians. Prison and jail inmates experience a higher rate of chronic disease than the general population.ⁱ Additionally, over half of prison and jail inmates reported symptoms of a mental health problem.ⁱⁱ Despite their significant need for medical care, these individuals had limited to no access to treatment. The ACA was a turning point in health care for the justice-involved population. **Repealing the ACA would jeopardize our progress and threaten health care for millions!**

Over the last seven years, California has taken steps to stem the mass incarceration of people of color, following a 2009 US Supreme Court ruling that California's prison population must be reduced in order to ensure that inmates are provided with appropriate medical and mental health care. This is particularly important for communities of color, who are overrepresented in California's prison and jail populations.ⁱⁱⁱ

Access to Coverage: The ACA expanded eligibility for Medicaid to most adults with incomes under 138% of the federal poverty line (FPL). This enabled 3.7 million Californians to enroll in Medi-Cal, including tens of thousands of justice-involved individuals. States like California that expanded Medicaid eligibility saw a 30% greater likelihood of mental health treatment among low income individuals with a serious mental illness than states that did not expand Medicaid eligibility.^{iv}

- Prior to the ACA approximately 90% individuals who spent time in county jails were uninsured.^v
- 25-30% of people released from jail are eligible to enroll in Medicaid due to the expanded eligibility.
- 20% of people released from jail are eligible to purchase coverage with subsidies through the Exchange.^{vi}

The American Health Care Act (AHCA) repeals the current Medicaid expansion and income-based tax credit subsidies, threatening health coverage for 1/2 of all justice-involved individuals.

Treatment for Mental Illness and Substance Use Disorders: Individuals who are incarcerated report symptoms of mental health problems and previous abuse of drugs or alcohol at higher rates than the general population.^{vii} Treating mental health and substance use disorders upon release is critical to reducing the rate of recidivism and promoting rehabilitation.

The ACA enabled California to expand mental health and substance use disorder benefits for all Medi-Cal beneficiaries. In 2014, California added a new outpatient mental health benefit that includes psychotherapy, medication management, and other associated services. In 2015, the state received approval to begin implementation of additional substance use disorder services through the Drug Medi-Cal Organized Delivery System.

The AHCA eliminates Essential Health Benefits in Medi-Cal, including mental health and substance use disorder treatment. It also institutes a "per-capita cap" or limit on federal funding for each Medi-Cal beneficiary. This will be a drastic cut to California's Medi-Cal program, and will particularly impact justice-involved individuals who often have high health and mental health care costs.

Integration of Health Care: Upon returning to the community, justice-involved individuals face a host of challenges, including housing, employment, and health care. Care coordination is increasingly recognized as crucial to preventing recidivism and promoting successful reintegration.

The ACA has enabled prisons and jails to ensure that inmates are enrolled in coverage before returning to the community. This is an important piece of linking justice-involved individuals to health, mental health, and substance use disorder services. In 2014, California allocated \$25M in grant funding for outreach to newly eligible target populations, largely including the justice-involved population and those with mental illness and substance use disorders.^{viii} Select data shows that significant enrollment has happened. For example, state prisons enrolled 19,000 individuals in FY 15-16.^{ix} And San Diego County alone has enrolled 6,200 justice-involved individuals since 2014.^x

In addition to enrollment, care coordination is critical. Section 2703 of the ACA is the Health Homes Option, which allows states to obtain an enhanced federal match to provide coordinated services to Medicaid beneficiaries with complex medical conditions. California is in the process of implementing this program, which may cease to exist if the ACA is repealed. Various grant programs that operate under the Board of State and Community Corrections (BSCC) to provide funds to local jurisdictions to provide services to the re-entry population encourage the leveraging of Medicaid programs and funds. These may be impacted under ACA repeal proposals.

The AHCA will reduce federal funding for California’s Medi-Cal program by at least \$20 billion, or one-third. This will likely impact the ability of the state to continue critical integration and care coordination programs for justice-involved individuals.

Make your voice heard to stop the ACA repeal! Join us in advocating to your Representative and share your story! <http://cpehn.org/page/having-our-say-resources>. Contact ksavage@cpehn.org for info.

ⁱ Maruschak, L., Berzofsky, M. “Medical Problems of State and Federal Prisoners and Jail Inmates, 2011-12”. US Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. (2015).

ⁱⁱ James, D., Glaze, L. “Mental Health Problems of Prison and Jail Inmates”. US Department of Justice, Office of Justice Programs. (2006).

ⁱⁱⁱ California Department of Corrections and Rehabilitation, 2013. Cited in California’s Changing Prison Population. Public Policy Institute of California. 2013.

^{iv} Cited in <https://aspe.hhs.gov/sites/default/files/pdf/190506/BHMedicaidExpansion.pdf>

^v Wang EA, White MC, Jamison R, Goldenson J, Estes M, Tulsy JP. Discharge planning and continuity of health care: findings from the San Francisco County Jail. *Am J Public Health*. 2008;98(12):2182-4.

^{vi} Ibid.

^{vii} James, D., Glaze, L. “Mental Health Problems of Prison and Jail Inmates”. US Department of Justice, Office of Justice Programs. (2006).

^{viii} AB 82, Sec 71 (2014)

^{ix} California Rehabilitation Oversight Board: http://www.oig.ca.gov/media/crob/reports/C-ROB_Annual_Report_September_15_2016.pdf

^x County of San Diego Health and Human Services Agency. October 31, 2016 Report.