

The Affordable Care Act & the Pennsylvania Criminal Justice System



Background

The Affordable Care Act (ACA) will extend health care coverage to many previously uninsured Pennsylvanians, including some segments of the incarcerated and formerly incarcerated populations, beginning on January 1, 2014. Combined with a proposed Pennsylvania plan to enlarge Medicaid eligibility beginning in 2015, the ACA has the potential to make health care accessible to most people leaving incarceration. This will improve their health, reduce the likelihood that they will re-offend, and decrease jail and prison costs.

Under the ACA, people earning between 100 % and 400% of the federal poverty level¹ will be eligible for federal subsidies to receive health insurance through a federally-run marketplace. People earning between 100% and 250% of poverty² will also be eligible for cost sharing subsidies for deductibles and co-pays. Enrollment through the marketplace began on October 1, 2013 for coverage effective on January 1, 2014.

Single adults ages 18 to 65 earning less than \$11,490 will have no increased access to health care coverage on January 1, 2014. However, the Commonwealth has put forth a plan, Healthy Pennsylvania, which would give these adults access to coverage beginning in approximately 2015. Most incarcerated Pennsylvanians would fall under the proposed new plan.

Access to decent health care will benefit both the incarcerated population and Pennsylvania communities. Many people entering the correctional system are less healthy than the population at large. The health care they receive in jail or prison is often the best care they have had. People leaving custody have high rates of chronic health conditions (e.g., diabetes, HIV, Hepatitis C) and serious mental illness. Often they are stable when they leave custody, but without access to good care and necessary medications, they quickly deteriorate. A recent study found that about 1 in 70 formerly incarcerated people is hospitalized for an acute condition within seven days of release, and 1 in 12 by 90 days, a rate much higher than the general population. People without access to behavioral health medications often return to jail for violating the terms of their release or for committing new crimes.

¹ \$11,490 to \$45,690 for an individual; \$23,550 to \$94,200 for a family of four

² \$11,490 to \$28,725 for an individual; \$23,550 to \$58,884 for a family of four

Health care reform's potential impact on local jails

When fully implemented, the ACA and Healthy PA will give every almost Pennsylvanian access to health care. This should result in a healthier population overall and should also reduce jail costs, in a number of ways. First, if people have access to health care immediately upon release, they are less likely to recidivate. (Programs in Florida, Washington State, Rhode Island and Michigan have shown this.) Second, if people are in better health when they enter custody, jail health care costs will decline. Third, if people with serious mental illness are being treated adequately in the community, they are less likely to end up in jail. Fourth, if a pretrial detainee has insurance purchased through the marketplace, that insurance will cover the detainee's in-prison health care costs.

The effect of these developments will be to shift costs away from local communities primarily onto the federal government, which is paying most of the costs of expanding Medicaid.

Nuts and bolts

To take full advantage of the ACA and Healthy PA, criminal justice systems need to start planning now. PHLP can help. A PHLP fellow has investigated best practices in affording seamless access to health care for people leaving custody and can assist interested counties.

Since under current rules a significant percentage of the Pennsylvania jail population qualifies for Medical Assistance, counties should establish policies and procedures now to link these individuals to coverage immediately upon release from custody. By 2015, when the larger expansion under Healthy PA is forecast to occur, counties whose systems already provide for seamless access will be ready to take immediate advantage of the benefits to themselves and their communities.

Next Steps

Counties interested in more information or assistance should contact Maureen Barden, Project Fellow, maureenbarden@gmail.com, 215 287 4238.

About PHLP

PHLP is a non-profit law firm exclusively focused on access to health care for vulnerable Pennsylvanians. Since the mid-1980s, PHLP has worked to eliminate barriers to healthcare that stand in the way of those most in need. The backbone of our work is helping individuals turned away or cut off from public or private health coverage OR who have had health services denied, reduced or terminated by an insurer. PHLP supplements individual representation with community outreach and education. Through our in-person trainings and webinars we teach how to navigate new programs and rules and what it means for low-income populations. Our consumer materials are written for low-literacy readers in linguistically and culturally competent formats.