

2024 Session Outcomes

07/2024

Addressing substance use disorder and other health needs for Minnesotans leaving prisons and jails

Overview

Transformative strategies will support people to reenter the community successfully after incarceration and help ensure public safety, racial justice and equitable behavioral health outcomes. Improving health care transitions and addressing the social determinants of health for people leaving prisons and jails will support their treatment for behavioral health conditions and other needs, while reducing disruptions in their health care. Screening for health needs and connecting to care is important for incarcerated youth who have experienced trauma and adverse childhood experiences. Addressing underlying health needs for people reentering the community will improve their chances of success, lower their risk of recidivism and make communities safer.

2024 legislation

Medicaid demonstration project

A new Medicaid demonstration project will allow the state to cover physical and behavioral health services in prisons and jails in the critical 90 days before a person reenters the community. The first phase of the demonstration will take place in three state correctional facilities and seven local facilities. Services will include care coordination, prescription drug coverage, substance use disorder assessments and treatment, mental health assessments and treatment, family planning, and physical health care. The demonstration will start in January 2026, or upon federal approval. Funding to increase capacity in local correctional facilities was authorized and a working group will support the state to develop the waiver application and assess ongoing implementation needs.

Bridging Benefits

Ongoing funding will build on the success of the Bridging Benefits project. The program links people at high risk of recidivism with cash, emergency aid, food and housing as they reenter the community. Care coordination through the project can help people establish parenting supports, family psychotherapy, housing and other

supportive services. The program also connects them to resources to help apply for federal disability benefits. In three years, Bridging Benefits reduced recidivism by 49% and homelessness by 26%.

Background and rationale

Minnesota has some of the nation's largest racial disparities in criminal justice, particularly in juvenile detention. People who have recently been released from correctional settings are up to 40 times more likely to die of an opioid overdose than other Minnesotans. Many people also are at risk of becoming homeless when they leave correctional facilities.

Under federal policy, Minnesota is required to suspend Medicaid coverage for eligible people who are incarcerated, and their health care becomes the responsibility of correctional facilities or jails. When they are released, people who are eligible for Medicaid may experience gaps in their coverage. Inconsistent access to health care can have grave consequences, particularly for people with mental health conditions and substance use disorders.

Better transitions for youth experiencing trauma

Incarcerated youth have a high incidence of adverse childhood experiences and trauma. Black and Native American youth experience a disproportionate rate of incarceration. And as many as half the youth in the juvenile justice system are also involved with the child protection system. Screening incarcerated youth for physical and behavioral health needs and connecting them to care in the community will support better transitions when they leave correctional settings.

For More Information

DHS 2024 session fact sheets: <https://mn.gov/dhs/media/fact-sheets/2024-session-fact-sheets.jsp>