

# HOUSE BILL REPORT

## HB 2545

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**As Reported by House Committee On:**  
Public Safety

**Title:** An act relating to making jail records available to managed health care systems.

**Brief Description:** Making jail records available to managed health care systems.

**Sponsors:** Representatives Davis, Klippert, Goodman, Robinson, Macri, Griffey, Cody, Sutherland, Graham, Pellicciotti, Leavitt and Ormsby.

**Brief History:**

**Committee Activity:**

Public Safety: 1/27/20, 1/30/20 [DP].

**Brief Summary of Bill**

- Authorizes managed health care systems to access jail records to determine eligibility for certain services and to allow for the provision of treatment to inmates during confinement or after release.

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### HOUSE COMMITTEE ON PUBLIC SAFETY

**Majority Report:** Do pass. Signed by 10 members: Representatives Goodman, Chair; Davis, Vice Chair; Klippert, Ranking Minority Member; Sutherland, Assistant Ranking Minority Member; Graham, Griffey, Lovick, Orwall, Pellicciotti and Pettigrew.

**Minority Report:** Without recommendation. Signed by 1 member: Representative Appleton, 2nd Vice Chair.

**Staff:** Omeara Harrington (786-7136).

**Background:**

Jail Records.

The records of a person confined in jail are generally held in confidence. However, records may be released to criminal justice agencies, in jail inspections or jail certification proceedings, in court proceedings upon written order of the court, to the Washington

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Association of Sheriffs and Police Chiefs, to named agencies for the purpose of research in the public interest, or with the permission of the person.

In addition, jail records may be released to government agencies to determine eligibility for services, including medical, mental health, chemical dependency treatment, and veterans' services. Records may also be released to government agencies to allow for the provision of treatment to inmates during their confinement or after release. Government agencies that receive jail records must treat the records as confidential. Jails that provide inmate records under appropriate authority are not responsible for unlawful secondary disclosures of the records.

#### Managed Care.

The Health Care Authority provides medical care services to eligible low-income state residents and their families, primarily through the Medicaid program. Coverage for medical services is primarily provided through managed care systems. Managed care is a prepaid, comprehensive system for delivering a complete medical benefits package that is available for eligible families, children under age 19, low-income adults, certain disabled individuals, and pregnant women. Since January 1, 2020, all behavioral health services and medical care services have been fully integrated in a managed care health system for most Medicaid clients.

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#### **Summary of Bill:**

Managed health care systems are added to the entities that may access jail records to determine eligibility for certain services and to allow for the provision of treatment to inmates during their confinement or after release.

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**Appropriation:** None.

**Fiscal Note:** Requested on January 24, 2020.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.

#### **Staff Summary of Public Testimony:**

(In support) Over the last four years, Medicaid services for the behavioral health population have transitioned to managed care organizations (MCOs). Many people in this population are familiar faces in county jails. Most inmates are Medicaid eligible and are enrolled in one of the five MCOs. Medicaid is suspended while a person is in jail, yet the MCOs have agreed to coordinate with members who are inmates in order to provide discharge planning. This bill will help remedy the barriers to breaking the cycle of behavioral health issues in the criminal justice system.

The MCOs are dealing with a time consuming and inefficient process of manually cross referencing jail rosters to determine which of their clients are in jail. Recently, an inmate died in jail after being transferred from another facility, and the death was partially because the inmate's health information did not follow the inmate. Currently, plans only have access to the jail registry, and they do not have access to the personal identifiers needed for a conclusive match. This bill will allow data to transfer electronically and will facilitate care coordination and in-reach so that the MCOs can provide care to people in custody or after release. A very important part of behavioral health integration is the continuum of care. It is essential for providers to be able to access information about their clients while they are incarcerated. The bill will not only help people coming out of custody and reintegrating, but it will also will also help jails obtain important information about diagnoses, providers, and care of those in custody. It was originally thought this channel was opened in 2016 when the Health Care Authority was given authority to access jail records. The thought was that the information would make it to the MCOs, which has not happened. The information being transferred is not Health Insurance Portability and Accountability Act-protected information.

(Opposed) None.

**Persons Testifying:** Representative Davis, prime sponsor; James McMahan, Washington Association of Sheriffs and Police Chiefs; Juliana Roe, Washington State Association of Counties; Marissa Ingalls, Coordinated Care of Washington; Cammy Hart-Anderson, Snohomish County; and Helen Price Johnson, Island County.

**Persons Signed In To Testify But Not Testifying:** None.