Washington State House of Representatives Office of Program Research

BILL ANALYSIS

Community Safety, Justice, & Reentry Committee

2SSB 5134

Brief Description: Concerning reentry services and supports.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Wilson, C., Dhingra, Frame, Hasegawa, Kuderer, Nguyen, Nobles, Randall, Saldaña and Wellman).

Brief Summary of Second Substitute Bill

- Requires that the money provided for subsistence to an individual upon the individual's release from confinement be no less than \$40.
- Requires the Department of Corrections to develop an individual discharge plan and provide reentry services within one year prior to an incarcerated individual's release or discharge.

Hearing Date: 3/21/23

Staff: Lena Langer (786-7192).

Background:

Gate Money.

Generally, persons releasing or discharging from DOC custody must be supplied with suitable and presentable clothing, the sum of \$40 for subsistence, and transportation by the least expensive method of public transportation not to exceed \$100. The \$40 for subsistence is commonly referred to as "gate money." The amount was established in statute in 1971 and has remained unchanged. Based on DOC policy, a case manager will submit a request for gate money, transportation funds, and 300 minutes in prepaid phone calls at least 30 days before the person's earned release date.

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This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

Individual Reentry Plans.

The Department of Corrections (DOC) is required to develop individual reentry plans for each incarcerated individual under its jurisdiction except for those individuals sentenced to life without the possibility of release, sentenced to death, and those subject to deportation. When developing the reentry plan, the DOC must use standardized and comprehensive tools to assess and identify any criminogenic risks, programmatic needs, and educational and vocational skill levels. The assessment tool should consider demographic biases, such as culture, age, and gender, as well as the needs of the incarcerated individual, including any learning disabilities, substance abuse or mental health issues, and social or behavior challenges. The plan must be developed within certain timelines, and must be periodically reviewed and updated as appropriate.

Individual reentry plans must include:

- plans to maintain contact with family;
- a portfolio of the person's educational achievements, previous employment and work experience, and any training received; and
- a plan to facilitate reentry into the community that addresses education, employment, substance abuse treatment, mental health treatment, family reunification, and other needs.

Prior to discharge of any incarcerated individual, the DOC must:

- evaluate the individual's needs and, to the extent possible, connect the incarcerated individual with existing services and resources that meet those needs; and
- connect the individual with a community justice center and/or community transition coordination network in the area in which the incarcerated individual will be residing once released from the correctional system if one exists.

Community Justice Centers.

The DOC has six community justice centers throughout the state to provide comprehensive services and monitoring for incarcerated individuals who are reentering the community. A community justice center is a nonresidential facility staffed primarily by the DOC in which recently released individuals may access services necessary to improve their successful reentry into the community. Such services may include, but are not limited to: those listed in the individual reentry plan, mental health, chemical dependency, sex offender treatment, anger management, parenting education, financial literacy, housing assistance, and employment assistance.

Identification Cards.

Per DOC policy, to facilitate transition to the community, the DOC assists individuals in obtaining a Washington identification card from the Department of Licensing or a replacement social security card from the Social Security Administration, or both. A case manager initiates applications for individuals who need state identification up to one year before the earliest transfer date to partial confinement, the release date, or any known court date for individuals impacted by sentence reform. For a replacement social security card, an individual may submit a

request within 180 days to the earliest transfer date to partial confinement, the release date, or any known court date for individuals impacted by sentence reform.

Medications.

Per DOC policy, health services have at least 14 days to prepare medications in advance of an individual's release. Individuals being released or transferring to a reentry center will be provided up to a 90-day supply of medication, subject to the discretion of the DOC practitioner. A combination of at least a 30-day supply of DOC provided medication and written prescriptions may be used to meet the 90-day requirement. If necessary, an additional prescription for no more than a 90-day supply of medication may be telephoned to a community pharmacy within 90 days after the transfer.

Applying for Benefits.

Per DOC policy, before transition, incarcerated individuals may receive assistance with applying for health insurance, veteran's benefits or community resources, and food and cash assistance through the Department of Social and Health Services.

Summary of Bill:

Gate Money.

The amount of money provided for subsistence must be "no less than" \$40, instead of "the sum of" \$40.

<u>Individual Discharge Plans and Reentry Services</u>.

In addition to the individual reentry plan, within one year prior to the release or discharge of any incarcerated individual, the DOC must develop an individual discharge plan and provide the following reentry linkage case management services:

- evaluate the incarcerated individual's behavioral health and physical health needs and, to
 the extent possible, connect the individual with relevant services, treatment programs,
 medication assisted treatment, tribal and urban health clinics, and behavioral health
 services, and other resources based on the individual's evaluated needs;
- assist the incarcerated individual with obtaining identification upon release;
- assist the incarcerated individual with submitting applications for applicable state and federal government assistance and benefits programs on behalf of the individual;
- prepare a 90-day supply of any necessary prescribed medications to be provided upon release, through a combination of a 30-day supply of in-hand medications and 60-day supply of prescriptions; and
- connect the incarcerated individual with a community justice center and/or community transition coordination network in the area in which the incarcerated individual will be residing once released.

Appropriation: None.

Fiscal Note: Available.

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