



THE UNITED STATES  
CONFERENCE OF MAYORS



September 26, 2023

The Honorable Ron Wyden  
Chair  
Senate Committee on Finance  
219 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Mike Crapo  
Ranking Member  
Senate Committee on Finance  
219 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Cathy McMorris Rodgers  
Chair  
House Committee on Energy and Commerce  
2188 Rayburn House Office Building  
Washington, DC 20515

The Honorable Frank Pallone  
Ranking Member  
House Committee on Energy and  
Commerce  
2107 Rayburn House Office Building  
Washington, DC 20515

Dear Chair Wyden, Ranking Member Crapo, Chair Rodgers and Ranking Member Pallone,

On behalf of the nation's state and local government elected and appointed officials we respectfully urge your support for bipartisan legislation that amends the Medicaid Inmate Exclusion Policy (MIEP) of the Social Security Act §1905(a)(A) which revokes federal health benefits for adults and juveniles both during and prior to conviction. By amending this policy, the Reentry Act (H.R. 2400/S.1165) and the Due Process Continuity of Care Act (H.R.3074/S.971) will facilitate a crucial path forward for programs that improve health outcomes and reduce rates of recidivism.

Justice-involved people are disproportionately low-income and often have complex and/or chronic medical and behavioral health challenges. The American Psychological Association

[reported](#) that in 2014, 64% of jail inmates, 54% of state prisoners and 45% of federal prisoners reported mental health concerns. In a 2020 report, the National Institute on Drug Abuse (NIDA) [estimated](#) that 85% of incarcerated people in the US have an active substance use disorder or were incarcerated for a crime involving drugs or drug use. In its January 2023 [report](#) to congress, the Medicaid Reentry Stakeholder Group concluded that roughly “80% of returning community members have chronic medical, psychiatric, or substance use disorders.”

The costs to individuals and to society are enormous. Without treatment, these individuals are at increased risk of overdose within the first few weeks of reentry. In 2007, before the significant increases in prescription drug misuse of recent years, the National Drug Intelligence Center [estimated](#) that \$113 billion was associated with drug related crime while the cost of *treating* drug use was a fraction of the cost to society at \$14.6 billion.

The Reentry Act will help pave the way towards improved public health outcomes and public safety. Promising practices in the pre-release population include substance use disorder screening and treatment, post-release medication supply, discharge planning, data sharing between correctional systems and Medicaid agencies, collaboration between correctional systems and community providers and more.


Secondly, the pervasiveness of our nation’s mental health and substance use disorder crisis is highly concentrated in our local jails. Across our nation, approximately 11 million people cycle in and out of local jails each year, 60% of whom are pre-trial detainees. The number of individuals being detained pre-adjudication has grown tremendously in the past several decades and paralleled the number of individuals in local jails that are experiencing mental illness and serious mental illness, often with co-occurring substance use disorders. According to the Council of State Governments, approximately 17% of people entering jails pretrial meet criteria for serious mental illness, and three quarters of people with serious mental illnesses in jails have co-occurring substance use disorder. This population is also by and large eligible, and in many cases, already receiving publicly funded health care.

The Due Process Continuity of Care Act would allow pretrial detainees, who have unfairly been stripped of their federal health benefits prior to due process, to receive Medicaid benefits at the option of the state to facilitate the continuation of necessary treatment for chronic, mental health and substance use disorder conditions.

These are complex issues requiring the efforts of federal, state and local leaders and our organizations stand ready to partner work with you to achieve these important outcomes for communities across the country.

Should you have questions or need further information, please contact Lauren Kallins at [Lauren.Kallins@ncsl.org](mailto:Lauren.Kallins@ncsl.org).

Respectfully,



Clarence E. Anthony  
CEO & Executive Director  
National League of Cities



David Adkins  
Executive Director/CEO  
The Council of State Governments



Tom Cochran  
CEO & Executive Director  
United States Conference of Mayors



Tim Storey  
Chief Executive Officer  
National Conference of State Legislatures



Matthew D. Chase  
CEO/Executive Director  
National Association of Counties

Cc:

Senator John Barrasso  
Senator Michael Bennet  
Senator Marsha Blackburn  
Senator Sherrod Brown  
Senator Maria Cantwell  
Senator Benjamin Cardin  
Senator Thomas Carper  
Senator Robert Casey  
Senator William Cassidy  
Senator John Cornyn  
Senator Catherine Cortez Masto  
Senator Steven Daines  
Senator Chuck Grassley  
Senator Margaret Hassan  
Senator Ronald Johnson  
Senator James Lankford  
Senator Robert Menendez

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Senator Todd Young

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Representative Gary Palmer  
Representative Gregory Pence  
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Representative John Sarbanes  
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Representative Paul Tonko  
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