

Pew: Prison Health Care Spending Up Sharply in States

Written by Australian Business

WASHINGTON, Oct. 29, 2013 /PRNewswire-USNewswire/ -- State spending on prisoner health care soared as the U.S. prison population approached its peak in 2008, according to a new report from the State Health Care Spending Project, an initiative of The Pew Charitable Trusts and the John D. and Catherine T. MacArthur Foundation. In 42 states, correctional health care spending rose, with median growth of 52 percent from 2001 to 2008, the latest year for which data is available. The study reviews four strategies that some states have used to rein in health care expenses while maintaining or improving the quality of care that inmates receive and protecting public safety.

The report, "Managing Prison Health Care Spending," analyzed inflation-adjusted correctional health care expenditures from 44 states, finding that they spent a total \$6.5 billion on inmate health care in 2008, up from

\$4.2 billion

in 2001 (amounts in 2008 dollars

). Per-inmate health care spending grew in 35 states, with a median growth rate of 32 percent. And in 39 states, prison health care costs claimed a larger share of the total budget for correctional institutions, on average increasing from 10 percent in fiscal 2001 to 15 percent in fiscal 2008.

"Health care is consuming a growing share of state budgets, and corrections departments are not immune to this trend," said Maria Schiff, director of the State Health Care Spending Project. "Prison populations got larger and older during the past decade, and these factors helped drive up correctional health care spending."

From 2001 to 2008, the number of sentenced state and federal inmates age 55 and older grew from 40,200 to 77,800—a 94 percent increase—while the overall U.S. prison population increased by about 200,000 prisoners, or 15 percent. The 55-and-over age group has continued to grow, reaching 121,800 in 2011. Elderly offenders, like their counterparts outside prison walls, are more likely to have chronic medical and mental conditions, which can require expensive treatment, special correctional housing, and additional training for prison staff. The annual cost of incarcerating an inmate age 55 or older with a chronic or terminal illness is, on average, two to three times that of the cost for other inmates.

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Other factors pushing up prison health care spending are high rates of infectious disease, substance abuse, mental illness and other chronic diseases. Further, the remote locations of some correctional facilities can increase costs for on-site health personnel and for transporting and guarding inmates when services off prison grounds are needed.

Prisoners have a constitutional right to adequate medical attention, and states are legally required to ensure that cost-containment strategies preserve health care quality for incarcerated offenders. The Pew report examines four approaches that some states are using to control spending:

- Employing telehealth technologies—video conferencing and digitally transmitted diagnostic data, for example—to facilitate prisoners' access to care and reduce guarding and transportation costs.
- Implementing outsourcing agreements that ensure the quality of care and control costs.
- Enrolling eligible prisoners in Medicaid and billing the program for qualifying services.
- Using medical or geriatric parole policies to release offenders who are deemed too sick or frail to pose a public safety risk.

"There is no single solution to all of the health care challenges facing prisons, but several states have achieved savings in ways that protect, or even enhance, inmate health and public safety," Schiff said. "These thoughtful innovations reveal lessons that can be applied by other states seeking the best ways to make their correctional health care systems effective and affordable."

Access the full report at: www.pewstates.org/prison-health

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