The Reentry Health Policy Project is working to (1) identify state and county-level policies and practices that impede the delivery of effective health and behavioral health care services for formerly incarcerated individuals who are medically fragile (MF) and living with serious mental illness (SMI), as they return to the community; (2) find best practices that can replicated at the state and local level; and (3) offer actionable recommendations for policy-makers and stakeholders to consider.

The Project is managed by California Health Policy Strategies LLC (CalHPS) with funding provided by the California Health Care Foundation and L.A. Care.

The first phase of the project focused on the California Department of Corrections and Rehabilitation (CDCR), and three counties: San Diego, Los Angeles, and Santa Clara. This research led to the publication of a report in January 2018. The findings and recommendations were based on input from policy-makers, practitioners, and stakeholders.

- **Full Report:** Meeting the Health and Behavioral Health Needs of Prison and Jail Inmates Returning from Custody to their Community.

- **Overview of Key Findings:** Presentation

Policy Briefs

The following policy briefs present specific findings or recommendations that were addressed in the full report.

- **The Evolving Landscape of Criminal Justice and Health Policies** for Medically Fragile and Seriously Mentally Ill Inmates Reentering the Community.

- **How Many Jail Inmates Received Psychotropic Medication 2012-2017.**

- **Eligibility Establishment** to help reduce the structural barriers that hinder an individual’s ability to receive care based on insurance status at the time of their release.
• **Care Coordination and Service Delivery** to reduce barriers to a smooth transition into county level care post-incarceration.

• **Maximizing Federal Financial Participation (FFP)** to open up funding opportunities available primarily due to the Affordable Care Act.

• **Release of Information (ROI)** to facilitate client data sharing across agency to promote communication and collaboration from the state to the county levels.

• **Residential and Outpatient Treatment Capacity for Individuals with Co-Occurring Disorders (CODs)** to ensure an adequate supply of qualified service providers, licensing, and certifications.

• **Housing** for SMI and MF reentry populations.

• **Evaluation** of programs and services for people in reentry.