



OHIO COMMUNITY CORRECTIONS ASSOCIATION
TESTIMONY

HB 49

SUBMITTED TO THE
OHIO HOUSE FINANCE SUBCOMMITTEE
ON
TRANSPORTATION

By: Jennifer Turnes
March 21, 2017

Chairman McColley, Ranking Member Reece and members of the House Finance Subcommittee on Transportation:

I am Jennifer Turnes, president of the Ohio Community Corrections Association (OCCA). OCCA represents 39 nonprofit residential reentry treatment facilities, also called halfway houses, and community based correctional facilities (CBCFs). There are 18 CBCFs in Ohio, OCCA represents 5.

I am also a Program Manager for Oriana House, a Chemical Dependency and Community Corrections Agency with over 35 years of experience in this area. Oriana House currently operates programs in Akron, Cleveland, Fremont, Marietta, Sandusky and Tiffin.

As you can see by the enclosed fact sheet, Ohio Community Correctional Programs; including Halfway Houses, CBCFs, and Community Corrections Act Programs provide effective treatment sanctions while assuring for accountability and public safety. Through an efficient allocation of taxpayer resources based on sound evidence-based practices, Ohio has made significant steps forward to reduce costs and improve public safety.

Our member agencies provide residential and non-residential services to criminal justice involved individuals. This includes persons reentering local communities from incarcerated settings or sanctioned in the community in lieu of prison. Our clients are much more likely to have mental illness or substance use disorders than the general population. In fact, according to the Brennan Report (widely cited by Director Gary Mohr) "...79% of today's prisoners suffer from either drug addiction or mental illness, and 40% suffer from both¹." In Ohio, the result is a prison system with ten times as many mentally ill inmates as there are patients in the six psychiatric hospitals in our state.

Our research-based programs address behavioral health issues and are **proven** to reduce recidivism. Clients are able to work and/or attend school while participating in treatment, gathering resources and learning skills for successful reentry.

This budget expands Ohio's capacity to provide services to individuals statewide, including rural areas struggling with the opiate addiction epidemic. I hope that my testimony today on House Bill 49: budget provisions from the Ohio Department of Rehabilitation and Correction (ODRC), Medicaid, and the High School Equivalence Diploma provide some insight on how we can make improvements in our state.

TARGETED COMMUNITY ALTERNATIVES TO PRISON (TCAP)

- OCCA enthusiastically supports the approach DRC suggests in keeping the lowest level felons in their communities - allowing local jurisdictions the ability to choose approaches that work best for them. DRC has a long history of ensuring that the community corrections programs that it funds are evidence based, that they follow the risk/need responsivity principles and the various treatment programs that it funds are OMAS certified. **As practitioners, we know that this is directly related to Ohio being among the lowest**

recidivism rates in the nation (27.5%). In order to ensure the desired result of this initiative is achieved, we believe that the expenditure of T-CAP funds should have the following broad parameters in law:

- T-CAP should support a continuum of non-residential and residential sanctions and services. The use of Halfway Houses, CBCFs and local jails as a sanction should be available.
- The Majority of T-CAP funds should be spent on services, not personnel costs. A majority of T-CAP funds allocated to a single entity should be utilized for Rehabilitative and Recovery services provided by a Certified Provider for recovery supports.
- T-CAP funded services should maintain use of an ORAS risk/need assessment for this population.
- T-CAP funds should not be used to replace or supplant current funded programs.
- This new framework may address the myriad (treatment) needs that prison does not provide. We (at OCCA) see families with mothers who are both mentally ill and addicted get treatment and return to our communities better than they were before. Sadly, this is after being arrested, convicted, sometimes losing custody of their children, and being imprisoned in order to access those services. “Unfortunately, we know that drug addicted Ohioans trapped by the opioid epidemic do not think rationally, and their addictions are not adequately addressed by sending them to prison.¹”

MEDICAID

- Medicaid expansion has provided coverage for an additional 702,000 Ohioans as of May 2016, and was delivered with overall spending, last year, under budget. **Medicaid expansion is especially critical now. We are making progress in turning the tide on the opiate crisis that has ravaged our local communities with 3,050 deaths in 2015 and a record peak expected in 2019.** This is a chronic condition that requires diligence and tenacity as we know that addiction can be a long road without quick fixes. It requires noting that there is now an infrastructure to address the prevention of deaths and making people whole. Any reductions could impact our clients’ ability to access health care and chemical dependency treatment services.
- Additional benefits for this newly insured population included: detection of previously unknown, unaddressed chronic health needs, a dramatic drop in the percentage of enrollees with medical debt, and many enrollees who reported that it was now easier to keep or find work and pay for food and rent.

HIGH SCHOOL EQUIVALENCE DIPLOMA VOUCHERS

- In keeping with the programs that yield the most benefit, Director Gary Mohr has testified that one of the single most important factors in reduction of prison returns is a General Equivalency Diploma (GED).

¹ ODRC memo of February 28, 2017 from Gary Mohr to Paul Pfeifer, Executive Director Ohio Judicial Conference

- **Previous budget HB64** made GED reimbursements mandatory if income were available: “Any remaining funds in each fiscal year shall be reimbursed to the Department of Youth Services and the Department of Rehabilitation and Correction for individuals in these facilities who have taken the GED for the first time.

Currently Introduced budget HB49 reads: A portion of the appropriation item may be reimbursed to the Department of Youth Services and the Department of Rehabilitation and Correction for individuals in these facilities who have taken an approved examination for the first time."

Please restore the mandatory language in HB 49 by changing “may” to “shall” in line 98166.

Investing in pro-social programming like education, job skills and family reunification leads to a more effective allocation of resources. We urge passage of the TCAP language, continued investment in Medicaid and continuation of mandatory funding for high school equivalency diplomas for those who are criminal justice involved.

The Brennan Center for Justice, the Ohio Chamber, the Right on Crime conservative think tank, the Council of State Governments and the Buckeye Institute have all asserted in separate reports that prison costs are not worth the outcomes. And Ohio’s progressive approach is supported nationwide: A Pew Research Poll shows that voters across the U.S. are overwhelmingly in favor of strengthening community corrections programs (attached).

Thank you for your time I am happy to answer questions. Additional questions may be directed to:

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Endnotes/References

ⁱ <http://www.brennancenter.org/publication/how-many-americans-are-unnecessarily-incarcerated> page 8