



P I O N E E R
HUMAN SERVICES
A CHANCE FOR CHANGE

Intersections in Criminal Justice and Public Health Reform

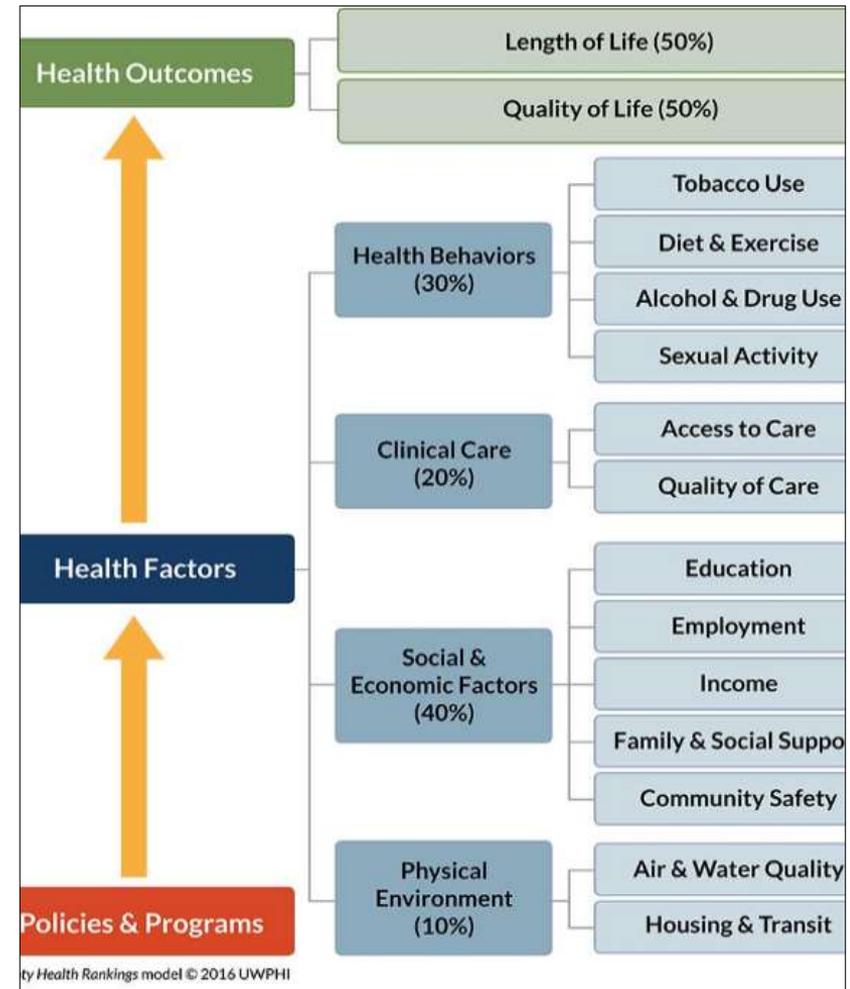
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Population Health

What do we know?

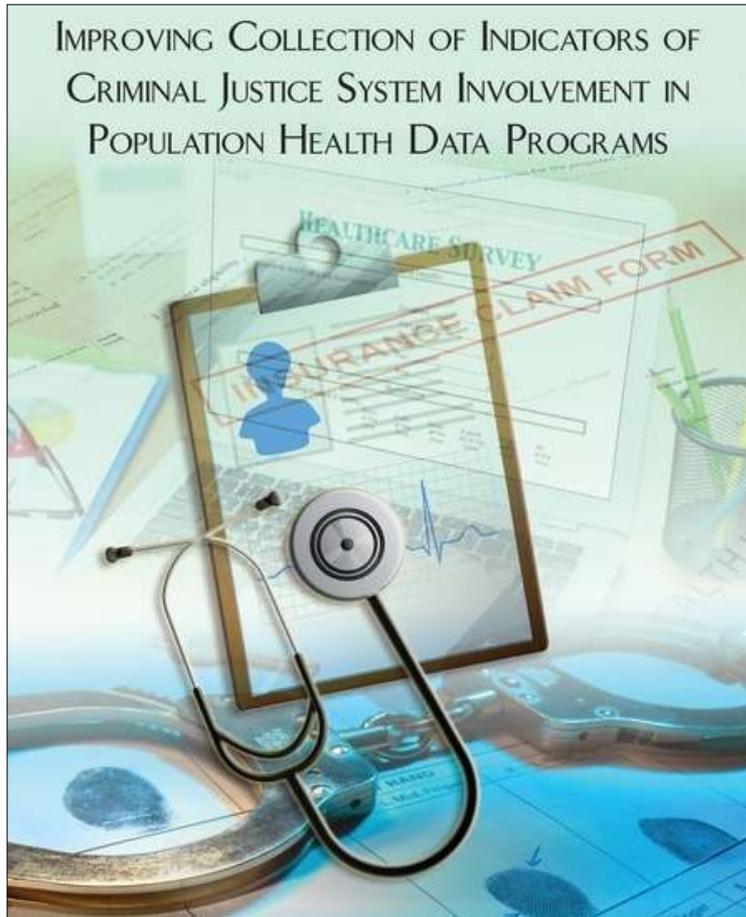
We pay more for worse outcomes

- In 2016 U.S spent 17.8% of GDP on health care (25% higher than next closest “high income” nation)
- Rate of spending is higher than other 36 OECD nations
- Lower life expectancy than other “high-income” nations (3 years of decline)
- Disparity in health outcomes between and among states
- Estimates suggests health care only accounts for 10-20% of healthy outcomes



Population Health and the Criminal Justice System

Social Determinants of Health & Criminal Justice Populations



Health Disparities

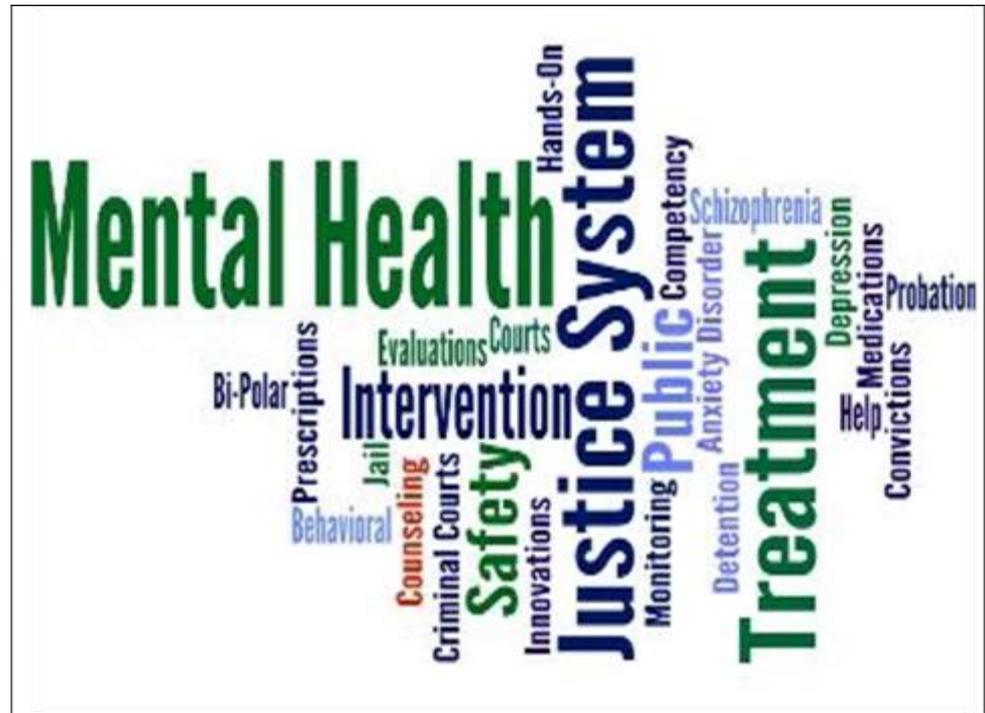
- Significantly higher rates of health problems than general population
- More likely to come from medically underserved communities
- More likely to be impacted by the social determinants of health (housing, employment, safety, etc.)
- Health care and criminal justice have long functioned as disparate systems

The Shifting Landscape

The Intersection of Public Health & Criminal Justice

Key Drivers of Change

- Medicaid Expansion
- 1115 Medicaid Waivers
- Alternative Payment Models
- Integrated Managed Care



Significance of Changes

Same individuals different systems



Rethinking Services & Outcomes

- Broadening definition of risk
- Broadening definitions of diversion and recidivism
- Addressing social determinants of health and delivering whole person care requires new cross-sector investments and partnerships
- Managed care organizations (MCOs) are new players in criminal justice reform
- MCOs and care providers are risk bearing entities in new payment models

Implications for CJ Service Providers

Pivoting Toward the Future

Key Issues

- Integration of behavioral and primary health care
- New payers and their funding will be tied to value not volume
- Providers need to understand their value (no more one size fits all services)
- Need to have top tier technology platforms to be viable
- Develop new practice models and service frameworks that integrate SDOH with criminogenic factors

