

Reentry Housing Work Group 2018 Report and Recommendations to Criminal Justice Reform Council

The Reentry Housing Work Group reconvened in the fall of 2017 to review the progress made on recommendations submitted to Governor Deal’s Criminal Justice Reform Council (CJRC) in 2016 and address the need for new and revised recommendations. The focus remained on addressing the critical need for housing to support successful reentry for returning citizens that will enable them to be restored to their communities, reduce recidivism, promote public safety, and conserve limited public resources.

The reconvened group benefitted from participation from the public sector, including the Georgia Department of Corrections (GDC)¹, Georgia Department of Community Supervision (DCS), Georgia Department of Community Affairs (DCA)², Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD), and the Rockdale County Sheriff’s Department, as well as representatives from the private sector, including the Georgia Supportive Housing Association (GSHA), Georgia Justice Project (GJP), Atlanta Legal Aid Society (ALAS), Georgia Legal Services Program (GLSP), and Advantage Behavioral Health.³

Access to permanent housing and supports are proven to be key components for successful reentry. Retaining people in prison beyond the date when they might safely be released, and failing to provide housing to those who would otherwise be homeless or inadequately housed or supported upon release, is expensive and ineffective and does not serve the interest in public safety. Georgia has continued to make progress in addressing these challenges.

Progress on Last Year’s Recommendations:

The Work Group offers its thanks and commendations to Governor Nathan Deal, to the Criminal Justice Reform Council (CJRC) and particularly the Co-Chairs, Supreme Court Justice Michael P. Boggs and Governor Deal’s Executive Counsel Carey Miller, as well as the leaders of the key Departments doing the hard work to implement reentry housing reforms, including GDC, DCS, DCA, DCH and DBHDD. Recommendations of this Work Group adopted by the CJRC and implemented in the past year include:

- Enactment of [SB 174](#) as part of the Governor’s criminal justice reform package that extended to the Department of Community Supervision the authority to issue a Program and Treatment Completion Certificate to probationers to signify achievements toward successful reentry into society. OCGA §42-3-2. Issuance of such certificate creates a rebuttable “presumption of due care in hiring ... leasing to ... or otherwise engaging in activity with the individual to whom the ... Certificate was issued.” OCGA §50-1-54 (b).

¹ While the Department of Corrections (GDC) participated in the Work Group, the GDC abstained from a final vote on any items that directly impact the GDC or funding to the GDC.

² The Department of Community Affairs (DCA) participated in the Work Group, but DCA abstained from a final vote on any items that directly impact DCA or funding to DCA.

³ A list of the conveners and participants in the Work Group is attached to this report.

- DCS commenced issuing Certificates of Completion to qualified persons under their supervision.
- DCS is beginning to assess what is needed to increase public awareness of the Certificates of Completion and whether they are achieving their intended purpose in the community.
- DCA included language about compliance with Housing and Urban Development (HUD) Guidance against blanket bans on rental to persons with a record of arrest or conviction in its Qualified Allocation Plan (QAP).
- The Georgia Department of Community Health (DCH) is taking steps to address the goal of suspending rather than terminating Medicaid upon incarceration for persons in prisons and jails.
- GDC has implemented new processes to achieve greater efficiency when requesting and securing state issued IDs or driver's licenses for persons leaving prison. GDC and DDS have established electronic data transfer capabilities in order to access and share existing license holder information. However, some difficulties remain which are inhibiting the goal of providing ID for all persons leaving prison. These agencies are working to assist persons leaving prison to secure Federal Real ID compliant photos, birth certificates (proof of citizenship and age), and SSN verification in order to enable DDS to issue persons either an ID or driver's license. Once received by GDC these reentry pertinent documents are secured at a central location, pending the release of the person.
- DBHDD and DCA have begun to use a new unified referral process for the target population of people with severe and persistent mental illness (SPMI) under the Settlement Agreement between DBHDD and the Department of Justice (DOJ) and have increased efforts to maximize federal funds by referring eligible Georgia Housing Voucher Program (GHVP) persons to federally funded Sec. 8 and 811 programs.
- DBHDD has increased the number of Forensic Peer Mentor work sites to include five prisons, eight Day Reporting Centers, three Mental Health Courts, and two state psychiatric hospitals. More funding is needed to expand the program to all identified locations. Participants receiving Forensic Peer Mentor services have zero recidivism thus far.
- GDC, DCA, GACJA, and DCS have finalized a Memorandum of Understanding (MOU) to expand housing supports to Accountability Courts by referring eligible persons to Reentry Partnership Housing Program (RPH), but participation is not funded.
- DCS expanded the Reentry Partnership Housing program from three months to up to six months for most participants, and new provider training and recruitment is occurring to expand the number of providers in unserved/underserved areas of the state.
- DCS has created the online THOR Directory (Transitional Housing for Offender Reentry) of community based housing options for persons under community supervision, including structured housing and recovery residences.
- Eleven new Housing Outreach Coordinator (HOC) positions are being funded by DBHDD that will be hired and managed by the local Community Service Boards (CSBs). These are case-management level staff whose primary role will be to 1) provide on-site connection to jails/prisons/hospital emergency rooms for access to the supported housing survey; 2) provide survey facilitation and referral through the unified referral process; 3) engage in community advocacy, marketing and education about supported housing resources; and 4) coordinate between several stakeholders including DCS, DBHDD and DCA for people eligible for

permanent supported housing under the DOJ DBHDD Settlement Agreement, with eligible people leaving prisons, jails and hospital ERs expressly part of the target population.

RECOMMENDATIONS

HOUSING MARKET ACCESS: Lift Unlawful Barriers to Reentry Housing

Barrier: Persons who have been arrested or have a record of conviction face enormous obstacles in accessing housing. The majority of states allow a variety of convictions to be expunged/sealed from people's records after a period of time, but in Georgia nearly all convictions stay on a person's record for life. At the same time, studies show that 66% of landlords and property managers will not accept an applicant with any criminal history,⁴ regardless of how long ago the conviction occurred or whether the individual has demonstrated rehabilitation. This makes it very difficult for Georgians with criminal records to find housing.

Recommendations:

1. Enact legislation that would expand eligibility for record restriction and sealing to expand opportunities for housing.
 - Georgia law currently only allows certain misdemeanor convictions that occurred before the age of 21 to be restricted and sealed; all other convictions appear on a person's criminal history for life.
 - Georgia should join the majority of states and permit individuals with certain misdemeanor and felony convictions to petition a court to restrict and seal the record of the conviction after they have been crime-free for a period of time so that housing providers will not see and will not have to consider the information. Law enforcement would maintain full access to the records.
2. Enact legislation to ensure compliance with the Housing and Urban Development's Office of General Counsel Guidance issued to private and public housing providers on April 4, 2016.⁵ The Guidance makes clear that the Fair Housing Act prohibits blanket rental bans based on arrest or conviction; any policy on renting to people with a criminal history must include an individualized assessment of the potential tenant and his or her specific criminal history.⁶

As an extension of the Criminal Justice Reform Council's ban-the-box principle applied to occupational licensure, amend the Georgia Fair Housing Law (OCGA §8-3-201 *et seq.*) to prohibit

⁴ Lahny R. Silva, *Clean Slate: Expanding Expungements and Pardons for Non-Violent Federal Offenders*, 79 U. Cin. L. Rev., p. 16 (2011). *See also*, Legal Action Center, [Helping Moms, Dads & Kids to Come Home: Eliminating Barriers to Housing for People with Criminal Records](#) (December 2016), pp. 14-15.

⁵ [U.S. Department of Housing and Urban Development Office of General Counsel Guidance on Application of Fair Housing Act Standards to the use of Criminal Records by Providers of Housing and Real Estate-Related Transactions \(April 4, 2016\)](#).

⁶ The problem is very severe. It is reported that even people holding Georgia Housing Vouchers under the Settlement Agreement between DOJ and DBHDD cannot find housing to use their vouchers due to the barriers created by a criminal record.

blanket bans on rental to persons based on arrest or conviction and require housing providers to determine the relevancy of a person's criminal history prior to excluding an applicant on that basis, as follows:

- a. *It shall be an unlawful practice to refuse to rent to any person based on a record of arrest or conviction. A particularized decision to exclude a tenant shall only be based on a determination that a record of conviction directly relates to the tenancy.*
- b. *In determining if a conviction record directly relates to the tenancy sought or held, a housing provider must consider and document:*
 - *The nature and seriousness of the offense and the relationship of the offense to the safety and security of other residents;*
 - *The age of the person at the time of the offense;*
 - *The length of time elapsed since the offense;*
 - *All circumstances relative to the offense, including, but not limited to, mitigating circumstances or social conditions surrounding the commission of the offense; and*
 - *Evidence of rehabilitation.*

3. Recommend the Department of Community Affairs continue strengthening and expanding efforts to enforce compliance with the [Housing and Urban Development's \(HUD\) Guidance issued to Public Housing Agencies and Owners of Federally Assisted Housing on November 2, 2015](#) by including a fuller set of requirements for public housing providers in the Qualified Allocation Plan (QAP), State Plan, and contractual agreements with public housing providers, including the language suggested in Item 2, above.⁷

4. Under the Governor's leadership, recommend the promotion of statewide education directed at consumers and landlords to promote lawful and consistent application of policies relative to reentry housing, including compliance with the [Housing and Urban Development's Office of General Counsel 2016 Guidance](#)⁸.

- We recommend that a Task Force be convened by the Criminal Justice Reform Council with the Atlanta/Georgia Apartment Owners and Managers Association and similar organizations across the state to determine how best to achieve lawful and consistent application of policies relative to reentry housing.
- Develop and promote model rules for the use of Association members in implementing reentry policies and provide education sessions for their members to assist with compliance.⁹

⁷ The Work Group recognizes and commends the Department for inclusion of language in the Qualified Allocation Plan requiring a screening policy that complies with the Fair Housing Act which prohibits denial to an applicant based on an arrest record, requires a link between a conviction and the safety of residents and/or property to deny an applicant based on a conviction, and prohibits blanket terms in screening criteria against leasing based on a conviction.

⁸ [HUD Office of General Counsel Guidance, supra.](#)

⁹ In response to the Supreme Court's ruling on disparate impact cases under the Fair Housing Act, an Atlanta law firm with a national reach for representation of housing trade organizations, Williams & Edelstein, P.C., and a commercial provider of resident screening services, AmRent,

5. Recommend that the Department of Community Supervision (DCS) and Department of Corrections (GDC) include language (similar to that suggested below) and revise formatting for all Program and Treatment Completion Certificates to reflect that they “symbolize the offender’s achievements toward successful reentry into society” (OCGA §42-2-5.2(c) and §42-3-2(h)(2)) and create a rebuttable “presumption of due care in hiring ... leasing to ... or otherwise engaging in activity with the individual to whom the ... Certificate was issued” (OCGA §50-1-54 (b)). The purpose of this recommendation is to make clear the benefits of this limitation on liability to landlords, employers and others.

This Certificate symbolizes the holder’s achievements towards successful reentry into society and creates a rebuttable presumption that any person who hires, employs, leases to, licenses, admits to any school or program, or otherwise engages in activity with the holder has acted with due care, notwithstanding the individual’s criminal history.

6. Recommend exploration of Ready to Rent training programs by DCS and GDC (as part of Program Completion Certificate curricula), by DCA, and by non-profit organizations serving the reentry population to provide the skills and case management services to support a successful tenancy. Such programs recognize barriers to housing beyond affordability that impact the reentry population that can be ameliorated by a combination of enhanced skills, ongoing support and a safety net for losses which can be provided by a loss mitigation fund, discussed below.

7. Recommend the state take the lead to create a Landlord Risk Mitigation Fund with private funding to provide limited recourse to landlords to recover losses resulting from a failed tenancy for an individual released from prison or jail within the past 18 months, allowing for limited recovery of the cost of eviction and serious damages for up to a specified period. Funding could be provided through an increased appropriation to the State Housing Trust Fund for the Homeless administered by DCA, as recommended in Item 19, below.

LONG TERM HOUSING SUPPORTS: People with Significant Permanent Disabilities

Barrier: Returning citizens with significant disabilities often face severe housing challenges, and are at risk of continuing to cycle through homelessness, hospital emergency rooms, arrests, and incarceration. They are unlikely to obtain employment or income benefits sufficient to enable them to obtain market rate housing without the benefit of assistance. Housing assistance needs to include linkage to supports. At present, long term housing and supports for people with disabilities are limited to those persons with severe and persistent mental illness (SPMI) eligible for services under the DOJ Settlement Agreement with DBHDD. Many of these eligible persons are not being reached as they exit prisons and jails, and many with other kinds of significant disabilities need but are not eligible for supportive housing under the Settlement Agreement.

created a webinar aimed at educating housing providers about how to implement the HUD Guidance in their screening, application and appeal processes. *See, Applicant Screening and Criminal Histories: Addressing Disparate Impact Liability Under the Fair Housing Act* (June 21, 2016).

Recommendations:

8. The DOJ DBHDD Settlement Agreement Extension provides: “The state shall implement procedures that enable individuals with SPMI in the Target population to be referred to supported housing if the need is identified at the time of discharge from ...jail, prison.” It is critically important that DBHDD comply with this mandate by implementing an effective referral system.

In addition, in order to increase access to supported housing for DOJ Settlement eligible persons with SPMI being released from prisons and jails increased funding is needed to expand the Forensic Peer Mentor programs for persons leaving prison, expand Community Transition Planning resources for Community Service Boards (CSBs) and other community mental health providers serving persons leaving jails, and support earlier in-reach that continues beyond release.

- More than 4,000 people in the target population with SPMI under the Settlement Agreement have been housed during the first six years of the Agreement, but as of last year only 218 of these individuals had been referred to housing from prison or jail.¹⁰
- Problems exist with the processes for identification, assessment and linkages for eligible persons to supportive housing according to the most recent report of the Special Monitor which cast doubt on the state’s ability to meet the June 2018 deadline under the extension of the Settlement Agreement.¹¹
- Increased funding is needed so that in-reach to prisons and jails exists in all locations, begins sooner, and includes a *warm handoff* to community partners providing housing and support services.
- Increased funding is needed to connect all prisons and jails with DBHDD and CSBs and other community mental health providers.
 - The Forensic Peer Mentor program available in a number of State Prisons and DCS Day Reporting Centers (DRC) provides for persons with a documented history of behavioral health or addiction disorders (who have also previously been under corrections supervision) to become employed through DBHDD for the purpose of mentoring persons who are currently under correctional supervision and experiencing behavioral health and/or addiction disorders. This initiative is funded by DBHDD and GDC with state dollars, without a specific appropriation. Additional funding is needed to expand this successful initiative to all prisons and DRCs. In the near term the program should be expanded beyond the current five prisons, eight Day Reporting Centers, and three Mental Health Courts to include the eight prisons with the highest percentage of persons with Level 3 or 4 Mental Illness, at least half of the Day Reporting Centers, and three more Mental Health Courts, preferably in more southern regions of the state.

¹⁰ *U.S. v. Georgia*, Report of Martha B. Knisley, Consultant, [Supported Housing: Report to the Independent Reviewer](#), p. 6 (Feb. 23, 2017).

¹¹ *U.S. v. Georgia*, [Report of the Independent Reviewer, Elizabeth Jones](#), pp. 65-66, 68, 70-71, (Sept. 25, 2017).

- A structure needs to be created to affiliate Forensic Peer Mentors (Georgia Mental Health Consumer Network Employees employees funded by DBHDD) with the CSBs and other mental health providers so they can bill for community based supports following release and access Medicaid funding.
- For persons in jail with a history of behavioral health issues or addiction, Community Transition Planning (CTP) services are billable by CSBs and other mental health providers prior to release to assist with planning for discharge, whether or not the person is Medicaid eligible. The services continue after discharge. However, the CSBs must first be called by the jails and this is happening in very few locations in the state. This too is funded with all state money. Additional funding is needed to reach all jails.
- Further, the State is required under the DOJ DBHDD Settlement Agreement to implement procedures that enable individuals with SPMI being released from jails and prisons to be referred to supported housing if they need it. Additional funding is needed to ensure that all individuals with SPMI being released from all of the jails and prisons in the state are referred to supported housing and actually provided with supported housing upon release.

9. A long term rent subsidy program should be created for returning citizens with permanent physical, developmental, intellectual or brain trauma disabilities to complement the current Georgia Housing Voucher Program (GHVP) serving people with SPMI.

- Use the experience of the GHVP that serves returning citizens with SPMI to develop a pilot program for a housing voucher for 200 returning citizens with a physical, developmental or intellectual disability, or brain injury who will need long term housing support.
- Define the population as those who are likely to qualify for a disability under the federal Social Security Act for whom the Department is unable to identify appropriate long term housing and who otherwise would be eligible for release or probation. The Department may want to prioritize those who are beyond their projected date of parole due to their lack of housing. Use the DBHDD administrative structure of the GHVP, the CSBs, DCH and state sponsored Americans with Disability Act (ADA) partners to implement. Identify a source of funding, accessing private and federal resources wherever possible. Based on the approximate GHVP program cost of \$600 per month, the cost of a pilot program is estimated to be \$1.44 million per year.

10. Expand the Forensic Community Integration Program, a supervised housing program administered by DBHDD, which serves individuals discharging from state psychiatric hospitals and are under criminal court jurisdiction. These are individuals who have been adjudicated incompetent to stand trial or not guilty by reason of insanity. This housing model allows individuals who no longer require hospital level care to move to the community with supervision, generally under a court order with conditions. The program currently has the capacity to serve 61 individuals in nine locations throughout the state.

- Develop a similar model program for inmates releasing into the community, specifically for inmates classified as Level 4 Mental Health as *there is currently no identified housing placement in the community for a person with a Level 4 assessment other than in a full institutional setting.*
- This housing model will protect public safety while conserving limited tax dollars.

TRANSITION SUPPORT SERVICES

Barrier: The most difficult reentry task is the transition from incarceration to community based systems of support. At the moment of release from the Department of Corrections to the Department of Community Supervision, the responsibility for supporting the returning citizen shifts from one state administrative structure to another and community based organizations must take responsibility for the support. The expanding reach of the State's Community Coordinator program is dependent upon expanding the availability of community providers. But the transition from prison to community needs additional support in order to secure success.

Recommendations:

11. Expand the resources to fund in-reach programs to each of the state prisons to work closely with GDC and DCS counselors, to begin no later than six months prior to release.

- The In-Reach staff is charged with making a firm connection to available community supports. While in-reach has been expanded to include more in-reach specialists and reentry counselors who are working hard to strengthen capacity, the program is still unable to reach all forty (40) prisons and thirteen (13) Transition Centers and make adequate community connections.
- Connections must be strengthened to community supports and transitions for services and supports as well as housing.
- ACT Teams provide services but barriers make connecting to persons in prison difficult. Linking CSBs to reentry requires that reimbursement for Community Transition Planning be increased to better cover the provision of services to individuals before they become clients of the CSBs.
- Suggest that GDC engage DCH and DBHDD to identify persons with intellectual disabilities, developmental disabilities and others with permanent supportive housing needs, and begin process of securing Medicaid NOW/COMP waivers prior to discharge.

SHORT TERM HOUSING

Barrier: The lack of short term housing options often prevents a person from accessing community based systems of support and results in longer term incarceration in jail or prison or increased homelessness. The Georgia Reentry Partnership Housing (RPH) program has enabled prisoners who lack an appropriate residential plan to obtain the short term housing that facilitates parole or probation. The expansion of Accountability Courts has provided an alternative to incarceration which has lowered the need and cost of jails and prisons. Community based short term housing has played an important role in the success of these alternatives but the housing options need to be further expanded.

Recommendations:

12. Continue to build on efforts to expand the Reentry Partnership Housing (RPH) program by recruiting new providers in the parts of the state that currently do not have housing facilities and where the demand for such housing is greater than the available providers.

- Suggest increased involvement with CSBs. Need to address provider reluctance to participate based on absence of guarantee that beds will be filled.
- Increase the number of providers that serve people with mental illness.
- At present RPH only serves people with mental health Level 3 and below. Seek to expand access to RPH services for people with Level 4 needs.

13. Encourage creation of residential substance abuse treatment programs (RSATs) lasting six to nine months to support recovery and reduce recidivism in all prisons and jails.¹² Fund grants to counties seeking to demonstrate the value of a jail-based RSAT.

DISCHARGE PLANNING IMPROVEMENTS

Barrier: While there is growing community support for returning citizens, the time and obstacles to connect persons to supports present significant barriers.

Recommendations: Increase the availability of supports that can be incorporated in the discharge plan as people leave jail and prison.

14. Support DCH in implementing a process (that was anticipated to be in place by year end 2017) that will suspend Medicaid enrollment for 18 months upon incarceration in jail, rather than terminating it, in order to provide access to Medicaid for inmates upon release and provide those with a disability access to the behavioral health services and medications they will need in the community. *Care must be taken to address coverage for those persons whose incarceration in jail may exceed 18 months.*

DCH is also implementing changes (anticipated by the end of the first quarter 2018) for persons in prison in order to provide access to Medicaid reimbursement for the limited services allowed during incarceration and for skilled nursing home services. Reinstatement of Medicaid eligibility is tied to restoration of SSI benefits for these individuals, so support is needed prior to and upon release to ensure there is no gap in coverage.

¹² Georgia's Criminal Justice Coordinating Council administers a federal grant to provide seed money for jails to create, expand, and/or enhance RSAT program such as the model created in Rockdale County. With this grant of approximately \$75,000 for up to two years Rockdale County Jail secured matching funds and has demonstrated a dramatic decrease in recidivism. With more than 340 participants (57% group recidivism rate) since the program started in 2014, only 22 (7.2%) of those released from Rockdale County Jail have returned on new charges. Rockdale County Jail has seen a sharp reduction in their jail population with an average population of 529 in 2010 to an average of 392 in 2017.

*The Final Report of the House Study Committee on Georgians' Barriers to Adequate Access to Health Care recommended suspension rather than termination of Medicaid benefits upon incarceration in order to provide a framework for continuity of care and improve transitional plans.*¹³

15. Recommend that the state require that returning citizens leave prison or jail with state issued identification that can be used to secure employment, housing and benefits. This ID to be designed in a manner that will not indicate former or present correctional/jail supervision.

The Council has recognized that without state issued ID a returning citizen cannot access housing, employment, or benefits, and that the process of securing such ID after release may be difficult for the released person, is expensive and time consuming, and is a significant barrier to successful reentry. Further action must be taken to achieve the goal of all persons leaving prison and jail with ID.

GDC has made progress in working with DDS to establish computerized systems and electronic data transfer between the two agencies to secure state issued ID or driver's licenses for persons leaving prison who have had a valid Georgia driver's license and have met all requirements of the Federal Real ID law. However, the majority of individuals still leave prison without a state issued ID.¹⁴

GDC is to be commended for working to secure birth certificates and SS verification and for retaining these records in a central location rather than following prisoners as they are relocated.

However, DDS has imposed a requirement that an individual with a DCS photo, birth certificate and social security verification who is in state custody must present in person at a DDS location to have DDS take a federal Real ID compliant photo and receive a driver's license or ID. It is beyond the capacity of GDC to meet the requirement for an in person visit at a DDS location. Research indicates that in-person verification is not required by the federal Real ID law, nor corresponding state law or regulations. State law expressly provides for online issuance of a temporary license (OCGA §40-5-31), renewal license (OCGA §40-5-32), and for ID cards for persons without drivers' licenses (OCGA §40-5-100). The waiving of the in-person requirement is also available for persons who are out-of-state by choice or incapacitated and unable to visit a DDS Customer Service Center. Further, many states (including Florida) have addressed the issue of having DDS take a real ID compliant photo and issue drivers' licenses or ID through the use of mobile vans that travel to prison locations on a monthly basis. Such vans could be staffed by DDS with necessary photo equipment, etc. with GDC providing the van and security staff.

¹³ [*The Final Report of the Georgia House Study Committee on Georgians' Barriers to Access to Adequate Health Care* \(December 2017\), pp. 13, 17.](#)

¹⁴ DCS is also to be commended for working with people in Transition Centers to ensure they get state issued ID before they leave the Centers. The Senate Study Committee on Homelessness recommended "allocating funding to DBHDD for PATH, ACT, CST, and ICM services to support the provision of replacement state-issued identification for enrolled individuals transitioning from correctional facilities." *Final Report of the Senate Study Committee on Homelessness, supra*, p. 10.

- a. Recommend enactment of a state statute such as that adopted by other states requiring persons receive state issued ID upon leaving prison or jail, requiring GDC issued ID be exchanged by DDS for a state issued ID, or providing GDC documentation of identity as proof of identity to receive state issued ID.¹⁵
- b. Recommend DDS reinterpret its policies to eliminate requirement of in-person appearance where GDC provides Real ID compliant photo, birth certificate, proof of SSN, etc. by electronic means, or to use mobile vans to travel to prisons with DDS personnel.
- c. Recommend that challenges to accessing ID faced by persons in jail be addressed to ensure they leave jail with ID, including mandating change in handling of ID as personal property, to instead retain ID in central location and return to individual in hand upon release.
- d. Recommend that funds be allocated to DDS to cover all expenses resulting from the production of identification cards and driver's licenses for persons released from State, County, Private Prison incarceration, or jail confinement. Currently GDC is directly billed for DDS identification cards and driver's licenses issued to returning citizens.

16. Identify persons with disabilities who were receiving or who are likely to be eligible for Medicaid, Medicaid waivers, SSI or SSDI benefits of Social Security, etc. that support the provision of long term housing and support services and begin the restoration or application process during incarceration to facilitate prompt receipt of benefits upon release.

17. Create a statewide public-private partnership to serve as a clearinghouse for best practices, information, and resources that support developing and sustaining local community based reentry collaboratives in every county. Such reentry collaboratives should be designed to bring together law enforcement, Community Service Boards, non-profit organizations, faith based community service providers, legal services, corrections, and behavioral health providers in every county to provide case planning and connection to services to facilitate reentry for all persons leaving prison or jail. Look to the GRIP program in Gwinnett, Newton, and Rockdale, the Nick Program in DeKalb, and the Macon Reentry Coalition as programs that can assist in development of a model that builds on their work. Use the Family Connections Partnership paradigm of a public-private partnership with state level expertise and continuing responsibility to support the creation of local collaboratives statewide. *The December 2017 Report of the Senate Study Committee on Homelessness incorporated this recommendation from the Work Group in their recommendations to the Georgia General Assembly.*¹⁶

COMMUNITY SUPPORTS

18. Recommend DCH act to access additional federal funding for tenancy support services needed by Medicaid eligible persons leaving prisons and jails, following the lead of North Carolina, Texas,

¹⁵ Such a provision should strengthen the measures in place to have ID for people upon discharge but is not intended to delay release.

¹⁶ [Final Report of the Senate Study Committee on Homelessness](#), *supra*, at p. 10.

Wisconsin, Washington, and many other states accessing federal dollars to support successful tenancies for people with disabilities, seniors and chronically homeless persons.¹⁷ At present, Georgia is funding some of these tenancy support services with Medicaid services and some with state dollars.

*The Senate Study Committee on Homelessness recommended that "the Department of Community Health explore opportunities to leverage state funds by accessing federal Medicaid funds to support individuals who are currently or at risk of homelessness."*¹⁸

19. Increase appropriations to the DCA administered State Housing Trust Fund for the Homeless by \$5 Million (for a total of \$8 Million per year) in order to provide funding that will invest in housing for people leaving prisons and jails. This will save many more millions in state funding for incarceration, court services, unreimbursed hospital costs, etc., and maximize federal funding to support these and other initiatives. The Trust Fund survives on annual appropriations from the General Assembly. In 1987, the original recommendation was for a legislative appropriation to the Trust Fund of \$5 Million.¹⁹ The Trust Fund is currently funded at \$3 Million, while the challenges of homelessness and the reentry population have grown tremendously.

Such funding would be used to provide:

- Funding focused on reentry housing populations not otherwise served;
- Funding for a Landlord Risk Mitigation Fund (see Item 7, above);
- Funding necessary to supplement where federal funds are unavailable, especially supportive services necessary for successful reentry housing such as intensive case management services and transportation;
- Assistance to agencies in rural communities to meet federal matching requirements, especially for Emergency Solutions Grants (ESG) to expand rural services;
- Additional supplements for Shelter Plus Care to fund services for people with addictive disease and other disabilities; and
- Funding for services including harm reduction for people with addictive diseases.

*The Senate Committee on Homelessness recommended an increase in appropriations to the State Housing Trust Fund for the Homeless in their recommendations to the Georgia General Assembly.*²⁰

¹⁷ [Department of Health and Human Services Center for Medicaid & CHIP Services, CMCS Informational Bulletin, Coverage of Housing-Related Activities and Services for Individuals with Disabilities \(June 26, 2015\)](#). This Informational Bulletin is intended to assist states in designing Medicaid benefits, and to clarify the circumstances under which Medicaid reimburses for certain housing-related activities, with the goal of promoting community integration for individuals with disabilities, older adults needing long term services and supports (LTSS), and those experiencing chronic homelessness.

¹⁸ [Final Report of the Senate Study Committee on Homelessness](#), *supra*, at p. 10.

¹⁹ Adjusting for inflation, \$5 Million in 1987 would equal over \$10 Million today.

²⁰ [Report of the Senate Study Committee on Homelessness](#), *supra*, p. 10.

20. Measure the cost of the homeless reentry population. The Atlanta Regional Commission recently included in its recommendations to the Senate Study Committee on Homelessness that the General Assembly invest in research to assess the true cost of homelessness to the State of Georgia. Such an analysis could be performed by DCA, UGA Carl Vinson Institute or GSU Andrew Young School of Public Policy, or others. The research should evaluate the cost to state agencies of the homeless population, including DCA, DCH, DBHDD, GDC, DCS, DVS and DOE, etc. compared to the cost of providing housing and related supports to prevent and respond to the needs of homeless individuals. Such analysis should also endeavor to evaluate the cost of homeless persons cycling through law enforcement, the jail and prison system, the courts, ER visits and admissions to hospitals, etc. The study could also evaluate the cost and the effectiveness of programs Georgia has initiated to support permanent housing for persons otherwise at risk of homelessness.