[SAMPLE LETTER IN SUPPORT OF SB 1010 ON YOUR LETTERHEAD]

February 9, 2018

Senator Jim Beall

State Capitol Room 2082

Sacramento, CA 95814

Tania.Dikho@sen.ca.gov

Re: Support for Senate Bill 1010

Dear Senator Beall—

I am writing in support of Senate Bill 1010. [TWO TO THREE SENTENCES ABOUT YOUR ORGANIZATION]

Homelessness and incarceration are inherently linked. Parolees who are homeless are seven times more likely to recidivate than those who are housed and about half of all homeless people report a history of incarceration. As a result, parolees have great difficulties accessing housing, perpetuating a cycle of incarceration and homelessness.

We know that providing homeless parolees a stable, affordable home that does not limit length of stay along with services that promote housing stability—known as “supportive housing”—is an evidence-based intervention proven to reduce recidivism. California data reveals supportive housing residents decrease their days incarcerated by over 60%. State programs designed to address the needs of parolees reentering communities could be using funds more effectively to address the needs of parolees experiencing homelessness. The Integrated Services for Mentally Ill Parolees Program (ISMIP), established in 2007-08, and now funded at $13 million per year, was intended to support case management and housing for homeless mentally ill parolees. Yet, ISMIP is used to provide the entire costs of mental health treatment to a small number of parolees, even though these parolees are eligible for Medi-Cal, and eligible for 50-90% of federal reimbursement for costs of care.

This bill would require the California Department of Corrections and Rehabilitation (CDCR) to use an existing program, such as ISMIP, to pilot providing supportive housing to parolees experiencing homelessness or homeless on arrest and have no place to go upon discharge. Under the pilot, current participants in ISMIP (or other program CDCR identifies) would be able to continue to receive Medi-Cal-funded treatment. As program participants transition off parole, new participants would transition into the pilot program. CDCR would enter into a Memorandum of Understanding with one or two counties and agree to pay for the non-federal share of the costs of mental health treatment while the participant is on parole. CDCR would use remaining resources the State would have spent on mental health treatment if not for federal reimbursement through Medi-Cal, to pay for rental assistance and services during the participant’s term of parole. The participating county would agree to provide community-based mental health treatment. The county would fund rental assistance and services under Proposition 63/Mental Health Services Act or some other local source of funding, once the parolee transitions off parole.

We strongly support this innovative legislation. Thank you for your leadership in authoring legislation that tackles such a critical issue to our state.

Sincerely,

[YOUR NAME]

[YOUR TITLE]

cc: Tania Dikho, Senator Jim Beall, [Tania.Dikho@sen.ca.gov](mailto:Tania.Dikho@sen.ca.gov)

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