Aging Prison Populations in Southern Legislative Conference States: Trends and Policy Implications

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William J. Sabol
Professor, Criminal Justice & Criminology
Andrew Young School of Policy Studies
Georgia State University
Aging inmates in SLC States: Outline of issues

1. **Motivation:** SLC history; policy advocacy; causes of growth.

2. **National-level trends in older inmate populations:**
   - a) Increase in number;
   - b) Concentration of violent offenses;
   - c) Enforcement—arrests and commitments per arrest;
   - d) Length of stay.

3. **Health conditions of older inmates and health care costs:**
   - a) Medical conditions;
   - b) Functional impairment;
   - c) Correctional costs.

4. **SLC state level trends in older inmate populations:** a) – d) above, and
   - e) Future older inmate population size;
   - f) Expected correctional cost increase.

5. **Policy issues and recommendations.**
Aging inmates in SLC States: Story line

Over the past decade, the number of older (aged 55 plus) inmates in prisons in SLC states has increased at 3-to-5 times the rate of increase of the older resident population, comprising an average of 12% of the prison population. The majority of older inmates are held in prison for violent offenses (primarily homicide and rape/sexual assault) and spend longer than average time in prison; 40% spent more than 10 years since admission. Admissions rates are increasing for this population; release rates are flat or slightly trending upward until recently. If trends continue, the size of the older inmate population will increase by 75% over the next 10 years.

Older inmates disproportionately suffer from health problems and functional impairments that affect their activities of daily living. Facility design can present challenges for these inmates. Because of the concentration of infirmities among this group, the costs to incarcerate them is much higher than the costs for younger, healthier inmates; the cost differential has been estimated to range from two to nine times the cost for younger, healthier inmates.

With the length of time spent in prison, the connections that older inmates have with families, friends and community members diminish, and their time spent in prison also diminishes their human capital. These factors exacerbate their challenges for reentry, including obtaining housing, medical care, and employment.

Underlying the growth of the older inmate population are sentencing and enforcement practices that focus on violent offenders and the reduction or elimination of parole and other early release mechanisms. Enforcement of violent crimes of older offenders has led to increases in their arrest rates and commitments into prison, and the sentencing of violent offenses leads to long stays.

Medical professionals and corrections practitioners who focus on older inmate populations advocate for medical care that meets national standards for older prisoners, geriatric-specific design of facilities, staff training in geriatrics, enhanced discharge planning, expanding specific release mechanisms, and improving reentry experiences for older inmates. To reduce the future number of older inmates prisons, sentence length and punishments for violent crimes need to be addressed. Doing so requires assessing elements of risk—offense and criminal history against age—and addressing the needs of victims of violent crime.
Considerable policy-related interest in aging prison populations

• Important issue for southern states:
  • SLC has issued two aging inmate population reports (in 1998 and 2006).

• Broad policy and advocate interest in the issue:
Factors contributing to the increase in older inmates

• Worldwide aging of populations (Bedard et al. 2016; Lorito et al. 2018; Combalert et al. 2018).

• Sentencing reforms in the 1990s and 2000s (Williams 2006):
  • Mandatory sentences;
  • Truth in sentencing;
  • Reduction/elimination of parole;
  • “Strikes” (two- and three-) laws.

• Repeat offenders (Nowotny et al. 2016).

• Enforcement of violent crimes (BJS).

• Comparatively low use of medical parole/compassionate release mechanisms.
National trends (BJS) in older inmate populations (55 plus) show growth and concentration in violent offenses

• Fastest growing age group among prisoners, nationwide (BJS):
  • Rate of increase has increased;
    • ~ doubled between 1993-2003 and increased 2 and ½ times between 2003-2013.
• Increasing while overall prison population and other age group sizes decrease.
• Increasing at a faster rate than increase in older residents (in the general population).
• Account for more than 10% of state prisoners nationwide.
Aging of the State Prison Population, 1993–2013

E. Ann Carson, Ph.D., BJS Statistician, and William J. Sabol, Ph.D., former BJS Director

FIGURE 1
Sentenced state prisoners, by age, December 31, 1993, 2003, and 2013

Imprisonment rate of sentenced state prisoners per 100,000 U.S. adult residents, by age, December 31, 1993, 2003, and 2013

<table>
<thead>
<tr>
<th>Age</th>
<th>1993</th>
<th>2003</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>55 or older</td>
<td>49</td>
<td>90</td>
<td>154</td>
</tr>
</tbody>
</table>

*Source: U.S. Bureau of Justice Statistics*
National trends (BJS) in older inmate populations (55 plus) show growth and concentration in violent offenses

• Concentration of violent offenses (homicide and sex offenses):
  • Two-thirds of state prisoners 55 or older held for violent offenses;
  • 41% of the violent offenses were rape/sexual assault (27% of all aged 55 or older);
  • 31% of the violent offenses were homicide (20% of all inmates 55 or older).

• Longer than average stays in prison
  • > 40% of inmates 55 or older currently in prison have served 10+ years; up from 9% in 1993.
  • 16% of inmates 55 or older released from prison served more than 10 years; more than twice the percent of the next younger age group
Sentenced state prisoners held for violent offenses, by age, December 31, 1993, 2003, and 2013

Percent of sentenced state prisoners held for murder or nonnegligent manslaughter, by age, December 31, 1993, 2003, and 2013

Percent of sentenced state prisoners held for rape or sexual assault, by age, December 31, 1993, 2003, and 2013

BJS (2016): Aging of the State Prison Population
Nationally, enforcement of crimes of older persons has increased (BJS)

• Arrest rates have increased:
  • Since the early 2000s, total and violent arrest rates of older persons are 5 to 10 times lower than the rates for younger age groups, but their rates have increased by 15% while the rates for other age groups remained relatively constant or declined.
  • Drug arrest rates are up by 50% since the early 2000s, while drug arrest rates for other age groups are down.

• Prison commitments per arrest for violence have increased and are comparable to those of younger persons.
**FIGURE 14a**
New court commitment rates for state prisoners ages 18 to 39 per 1,000 arrests, by offense, 1993, 2003, and 2013

**FIGURE 14b**
New court commitment rates for state prisoners ages 40 to 54 per 1,000 arrests, by offense, 1993, 2003, and 2013

**FIGURE 14c**
New court commitment rates for state prisoners age 55 or older per 1,000 arrests, by offense, 1993, 2003, and 2013
<table>
<thead>
<tr>
<th>Age at arrest or admission</th>
<th>All violent offenses&lt;sup&gt;a,b&lt;/sup&gt;</th>
<th>Murder&lt;sup&gt;c,d&lt;/sup&gt;</th>
<th>Rape or sexual assault&lt;sup&gt;e&lt;/sup&gt;</th>
<th>Robbery</th>
<th>Aggravated assault&lt;sup&gt;f&lt;/sup&gt;</th>
<th>Property offenses&lt;sup&gt;g&lt;/sup&gt;</th>
<th>Drug offenses</th>
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<tbody>
<tr>
<td>18–39</td>
<td></td>
<td></td>
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<td>154</td>
<td>240</td>
<td>51</td>
<td>48</td>
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<tr>
<td>2013&lt;sup&gt;h&lt;/sup&gt;</td>
<td>64</td>
<td>848</td>
<td>308</td>
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<td>91</td>
<td>67</td>
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<td>40–54</td>
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<td>1993</td>
<td>36</td>
<td>480</td>
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<tr>
<td>2003</td>
<td>41</td>
<td>826</td>
<td>238</td>
<td>278</td>
<td>54</td>
<td>65</td>
<td>103</td>
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<tr>
<td>2013&lt;sup&gt;h&lt;/sup&gt;</td>
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<td>1,058</td>
<td>319</td>
<td>340</td>
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<tr>
<td>55 or older</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1993</td>
<td>38</td>
<td>365</td>
<td>158</td>
<td>108</td>
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<td>14</td>
<td>102</td>
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<td>2003</td>
<td>46</td>
<td>764</td>
<td>228</td>
<td>230</td>
<td>34</td>
<td>30</td>
<td>96</td>
</tr>
<tr>
<td>2013&lt;sup&gt;h&lt;/sup&gt;</td>
<td>54</td>
<td>1,070</td>
<td>310</td>
<td>354</td>
<td>60</td>
<td>50</td>
<td>88</td>
</tr>
</tbody>
</table>

BJS (2016): Aging of the State Prison Population
Nationally, average sentence lengths imposed on older persons admitted into prison are longer than those imposed on younger persons

- Sentence lengths imposed on older persons committed into prison have not changed the mid-2000s but are about 15% to 20% longer than those imposed on younger persons:
  - Mean sentence imposed for all offenses: ~ 82 months vs. ~70 months;
  - Mean sentence imposed for violent offenses: ~ 128 vs. 100-112 months.
- Larger proportion of older persons are committed with a life or death sentence:
  - 9.5% vs. 3%-5%.
  - Use of life/death for older persons has increased over time (7% to 9.5%)
Nationally, expected time to be served until release by older persons committed into prison is longer and has increased

- Expected time to be served (ETS) accounts for parole and other releases.
- Overall ETS for older persons committed into prison ~ 82 months:
  - 50% longer than next younger age group (40-54 year olds)
  - Twice that for the youngest age group (18-39 year olds)
- ETS for violent for older commits ~ 182 months:
  - 60% longer than that for 40-54 year olds;
  - Thrice that for the 18-39 year olds.
“Aging In” or time served since commitment accounts for more than half of the aging prison population (BJS)

• Most older prisoners were admitted into prison at a younger age:
  • 60% of prisoners aged 55 or older were admitted when they were younger than 55;
  • This percentage has doubled since 1993
• ~40% of inmates 55 or older have served 10 or more years; increase from 9% in 1993.
• Longer sentences, increase in time to be served, and increase in enforcement have led to growth in older inmates.
Health issues more prevalent among older prison inmates (BJS)

• Older inmates present with an array of serious medical issues:
  • ~75% have a chronic medical condition (40% of younger inmates)
    • High blood pressure/hypertension, asthma, arthritis, heart-related problems are most prevalent;
  • >35% have an infectious disease (~20% of younger inmates)
    • Hepatitis and STDs are most prevalent; TB also prevalent.

• Mental health problems prevalent:
  • ~13% suffer from severe psychological distress;
  • ~35% have a history of a mental health problem;
  • 40% suffer from cognitive impairments (Nowotny et al. 2016).

• Drug dependence/abuse less prevalent among older inmates.
High prevalence of functional impairment among older inmates

- Americans with Disabilities Act (ADA) requires that inmates with disabilities be given equal access to facilities, equal participation in programs, and appropriate accommodation within facilities.
- Age-related decline in functioning—loss or limitation in ability to independently carry out daily tasks (grooming, bathing, eating)—activities of daily living (ADLs).
- Prevalence of functional impairments (ADLs) among older prisoners:
  - 10%-16% overall (Trotter & Baldwai 2015);
  - Prison-specific ADLs as high as 66% (Williams et al. 2006).
- Prison environments can be problematic for older inmates with physical impairments:
  - Top bunks, staircases, inadequate number of disability compliant cells and bathroom facilities, long walking distances between facilities and programs.
Most older inmates report difficulties with ADLs

- Majority of older prisons (62.4%) report at least one area of difficulty with ADLs:
  - Bunks (37%), temperature & ventilation (24%), difficulty with stairs (17%), and bathroom facilities (13%);
  - Older female prisoners:
    - Higher proportion report physical difficulties with the prison environment than older males (83% vs 59%);
    - Older female prisoners more likely than older males to require assistance with ADLs (39% vs. 19%).

- Fewer older than younger prisoners report working while in prison, primarily due to mobility issues (77% vs 87%).
Aging accelerated by life in prison

• Inmates described as 5 to 10 years older physiologically than persons of the same chronological age who are not incarcerated (Ruggiano et al. 2016).

• Accelerated aging from life inside of prison:
  • Chronic conditions (arthritis, heart disease, emphysema, diabetes);
  • Stress of prison life;
  • Transmission of disease within prison;
  • Quality of health care in prison and quantity of trips outside of prison to receive health care.

• Pre-prison conditions for most inmates—low rates of preventative care; high rates of substance abuse, victimization, crime.
Health and functional impairments lead to higher prison expenditures for older inmates

• Costs for elderly inmates generally estimated at twice the costs of the average inmate (Scaggs & Bales 2015).

• Health care costs for older inmates can exceed those of the modal inmate by a factor of 9 to 1, due largely to medical care costs:

<table>
<thead>
<tr>
<th>State</th>
<th>Aging inmate medical cost</th>
<th>Younger/healthier inmate medical cost</th>
<th>Ratio: Aging to younger inmate cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Georgia</td>
<td>$8,500</td>
<td>$950</td>
<td>8.9</td>
</tr>
<tr>
<td>North Carolina</td>
<td>$5,970</td>
<td>$1,000</td>
<td>5.9</td>
</tr>
<tr>
<td>Oklahoma</td>
<td>$6,231</td>
<td>$4,911</td>
<td>1.3</td>
</tr>
<tr>
<td>Texas</td>
<td>$4,853</td>
<td>$795</td>
<td>6.1</td>
</tr>
<tr>
<td>Virginia</td>
<td>$5,400</td>
<td>$800</td>
<td>6.7</td>
</tr>
</tbody>
</table>

Health and functional impairments lead to higher prison expenditures for older inmates

• Special facilities for inmates with cognitive impairments cost more:
  • New York’s Fishkill Correctional Facility: $93,000 per inmate per year compared to $41,000 for the general population.

• Offsite medical expenditures for older inmates account for disproportionately large share of expenditures:
  • Virginia: Inmates aged 50 or older account for 39% of offsite medical expenditures while accounting for 20% of all inmates.
  • California: Inmates aged 55 and older represent approximately 5% of the inmate population, but account for 22% of the off-site hospital costs.
Conditions in SLC states

• SLC report The Aging Inmate Population (Jeremy L. Williams, SLC policy analyst, 2006)
  • SLC surveyed the SLC states to obtain data on populations, challenges, and programs:
  • States differ in their definitions of “elderly”:
    • 7 states used 50 plus; 9 states differed, using 55, 60, or 65;
    • Report results based on the 50 years or older definition of elderly.

• Elderly (50 plus) inmate population increased between 1997 and 2006:
  • 145% increase;
  • 10.5% of SLC inmate population.

• State-specific policies for elderly prisoners.

• Challenges confronting corrections.
Trends in inmates aged 55 or older in SLC states 2000-2015 generally follow national trends

• Statistics that follow use 55 or older to define elderly or older inmates.
• Statistics based upon BJS’s National Corrections Reporting Program (NCRP) data:
  • Coverage differs slightly from the data in 2006 SLC report;
  • Trends are consistent with 2006 SLC report data;
  • Some SLC states did not report to the NCRP in all years.
• Trends in SLC states compared to identify similarities and differences in:
  • Resident and inmate populations changes;
  • Offenses of older inmates;
  • Admissions and expected time served;
  • Future older inmate population size;
  • Anticipated additional costs.
Older inmate populations have increased at 3-to-4 times the rate of increase of the resident populations in SLC states

• FL and TX have the largest elderly (aged 55 or older) resident populations.
  • FL: ~6.5 mn; TX: ~6.1 mn.
• FL and WV have the highest proportions of elderly residents.
• GA and TX have the youngest resident populations.
• Elderly residents and inmates:
  • Resident populations by 2% to 3+% annually among SLC states;
  • Inmate populations increased by 6% to 9.5% annually among SLC states;
  • Inmate population annual growth was 3-to-4 times that of residents.
Number of residents aged 55 or older (in thousands), by state, 2000-2015

Source: U.S. Census Bureau population estimates
Growth in inmate population aged 55 or older has been faster than growth in resident population aged 55 or older (three-to-four times as fast).

### Average annual rate of change (percentage) in resident and inmate populations by state, 2005-2015

<table>
<thead>
<tr>
<th>State</th>
<th>Resident population</th>
<th>Inmate population</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>Aged 55 plus</td>
</tr>
<tr>
<td>Alabama\1</td>
<td>0.43</td>
<td>2.19</td>
</tr>
<tr>
<td>Arkansas</td>
<td>0.61</td>
<td>1.90</td>
</tr>
<tr>
<td>Florida</td>
<td>1.51</td>
<td>2.75</td>
</tr>
<tr>
<td>Georgia</td>
<td>1.29</td>
<td>3.46</td>
</tr>
<tr>
<td>Kentucky</td>
<td>0.52</td>
<td>2.29</td>
</tr>
<tr>
<td>Louisiana</td>
<td>0.36</td>
<td>2.27</td>
</tr>
<tr>
<td>Maryland</td>
<td>0.87</td>
<td>3.05</td>
</tr>
<tr>
<td>Mississippi</td>
<td>0.26</td>
<td>2.10</td>
</tr>
<tr>
<td>Missouri</td>
<td>0.46</td>
<td>2.17</td>
</tr>
<tr>
<td>North Carolina</td>
<td>1.30</td>
<td>3.13</td>
</tr>
<tr>
<td>Oklahoma</td>
<td>0.80</td>
<td>2.03</td>
</tr>
<tr>
<td>South Carolina</td>
<td>1.23</td>
<td>3.25</td>
</tr>
<tr>
<td>Tennessee</td>
<td>0.89</td>
<td>2.59</td>
</tr>
<tr>
<td>Texas</td>
<td>1.75</td>
<td>3.42</td>
</tr>
<tr>
<td>Virginia\2</td>
<td>0.89</td>
<td>2.92</td>
</tr>
<tr>
<td>West Virginia\3</td>
<td>0.03</td>
<td>1.62</td>
</tr>
</tbody>
</table>

Notes:
1\2007-15
2\2009-15
3\2006-15

Source: Author's analysis of BJS's NCRP and U.S. Census Bureau population data.
Average annual rates (percent) of growth (change) in resident and inmate populations aged 55 or older, by state, 2005 to 2015

Notes: 1\2007-15; 2\2009-15; 3\2006-15
Source: Author's analysis of BJS and Census data.
Older inmate populations have increased in all SLC states

- All SLC states have seen increases in the number of elderly inmates, even as the total number of inmates has decreased in some states.
- FL and TX have had the largest absolute increases; more than 10,000 increase in elderly inmates in each state.
- Concentration of elderly inmates (proportion of total inmate population) has increased in all SLC states:
  - Elderly inmate population has increased at a faster rate than the overall inmate population.
- Incarceration rates of elderly inmates increased in all SLC states:
  - Some SLC states have observed overall (all inmate) decreases.
Violent offenses predominate sentences of older inmates in SLC states

• Majority older inmates held for violent offenses:
  • Just shy of 2/3rds of older inmates were held for violent offenses;
  • About half (49%) of all other prisoners held for violent offenses.
  • Consistent trend over time in violent offenses of older inmates.

• Homicide and rape/sexual assault offenses predominate among older prisoners:
  • More than a quarter of older inmates were held for rape/sexual assault (26%):
    • About 12% of all other prisoners held for rape/sexual assault.
  • Just shy of a quarter of older inmates held for homicide (23%):
    • About 12% of all other prisoners held for homicide.

• Aggravated assault and robbery less prevalent among older inmates as compared to inmates younger than 55 years of age.

• Percent of older offenders held for drug offenses declined over time.
Number of prison inmates and inmates aged 55 or older, by state, 2005-2015

Source: Author's analysis of BJS's NCRP data.
Number of inmates aged 55 or older, by state, 2000-2015

Source: Author’s analysis of BJS’s NCRP data
Fraction of yearend prison population aged 55 or older, by state, 2000-2015

Source: Author's analysis of BJS's NCRP data
Total and aged 55 or older incarceration rates per 100,000 resident population, by state, 2005-2015

Source: Author's analysis of BJS's NCRP and U.S. Census Bureau population data
Offense distribution of prisoners aged 55 or older by state, 2011 through 2015

- **Public order**
- **Drugs**
- **Property**
- **Violent**
Prison inmates aged 55 or older in SLC states, by type of offense, 2005-2015

- All violent
- Homicide
- Rape/sexual assault
- Robbery
Admissions of older inmates has increased

- Upward trend among states, some recent decreases.
- Faster increase among older offenders than total admissions.
- Admissions for violent and drug offenses increased and account for more than half of all admissions.
  - Concentration of admissions of older persons for drugs and violence varied among SLC states.
All admissions and admissions of inmates aged 55 or older, by state, 2005-2015

Year of admission

Source: Author's analysis of BJS's NCRP data
Number of admissions (all) and proportion of admits of persons aged 55 or older, by state, 2005-2015

- Alabama
- Arkansas
- Florida
- Georgia
- Kentucky
- Louisiana
- Maryland
- Mississippi
- Missouri
- North Carolina
- Oklahoma
- South Carolina
- Tennessee
- Texas
- Virginia
- West Virginia

Year of admission

Source: Author's analysis of BJS's NCRP data.
Number of admissions for violent and drug offenses, persons aged 55 or older, by state, 2000-2015

Alabama
Arkansas
Florida
Georgia
Kentucky
Louisiana
Maryland
Mississippi
Missouri
North Carolina
Oklahoma
South Carolina
Tennessee
Texas
Virginia
West Virginia

Year of admission

Violent
Drug
Proportion of admits of persons aged 55 or older for violent or drug offenses, by state, 2000-2015

Source: Author's analysis of BJS's NCRP data.
Time served contributes to aging of prison populations

- Mean expected time served (estimated) general trended upward with recent decrease:
  - All older inmates—6 month increase (from 3.1 to 3.7 years);
  - Violent offenders—1 year increase (from 6.7 to 7.7 years).
- Older inmates serving >= 10 years has increased since 2007
  - Inmates 55 plus: 41% served >= 10 years; five percentage point increase.
  - Inmates 44-55: 28% served > 10 years; five percentage point increase.
- Increase in percent of inmates transitioning into age 55 or older group since admission:
  - 10 percentage point increase in inmates 45-44 at admission who were 55 or older at yearend.
- Across SLC states, expected time to be served at admission increases with age:
  - Oldest inmates can expect to serve 1.5 to 2 times longer than younger inmates.
Expected time served (estimated), prison inmates aged 55 or older in SLC states, by type of offense, 2005-2015
Time served by yearend stock prison population:
All SLC states, 2006 and 2015.

<table>
<thead>
<tr>
<th>Age group</th>
<th>2006</th>
<th>2015</th>
<th>Percentage point change</th>
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<td>0.0%</td>
<td>0.0%</td>
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<td>25-34</td>
<td>6.2%</td>
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<td>-1.5%</td>
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<td>35-44</td>
<td>16.0%</td>
<td>20.0%</td>
<td>3.9%</td>
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<td>45-54</td>
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<tr>
<td>55 plus</td>
<td>36.0%</td>
<td>40.9%</td>
<td>4.8%</td>
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</tbody>
</table>

Source: Author's analysis of BJS's NCRP data.
Transition between age group at admission and 55 plus age group at yearend: All SLC states 2006 and 2015.

<table>
<thead>
<tr>
<th>Age group at admit</th>
<th>Percent in 55 plus age group at yearend: 2006</th>
<th>Percent in 55 plus age group at yearend: 2015</th>
<th>Percentage point change</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-24</td>
<td>0.6%</td>
<td>1.8%</td>
<td>1.2%</td>
</tr>
<tr>
<td>25-34</td>
<td>1.3%</td>
<td>3.0%</td>
<td>1.7%</td>
</tr>
<tr>
<td>35-44</td>
<td>3.6%</td>
<td>7.5%</td>
<td>3.9%</td>
</tr>
<tr>
<td>45-54</td>
<td>17.7%</td>
<td>27.5%</td>
<td>9.8%</td>
</tr>
<tr>
<td>55 plus</td>
<td>100.0%</td>
<td>100.0%</td>
<td>0.0%</td>
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</tbody>
</table>

Source: Author's analysis of BJS's NCRP data.
Expected time to be served upon admission in years (estimated), by state, 2005-2010

Source: Author's analysis of BJS data
Future number of elderly inmates will increase if patterns and trends do not change

- **Number of older inmates in 2025 in SLC states would be 75% higher than in 2015** if trends in elderly incarceration persisted; trends:
  - Admissions rates of older offenders have increased.
  - Release rates (number released divided by the population) have trended downward (as expected time served has trended slightly upward).
  - Release rates for next younger age group (45-54) have slowed:
    - Implies that a large number of inmates aged 45-54 will “age into” the 55 plus age group.
- **Proportion of inmates aged 55 plus in SLC states would increase to 19% in 2025** (from 12% in 2015):
  - Assume the number of inmates younger than 55 remained at their 2015 level.
- **Increase among states in older inmates ranges from ~50% (GA, KY, MO) to > 125% (FL).**

Projections are not official but are generally consistent with state published estimates.
Inmates aged 55 or older: Number in prison in 2015 and predicted number in 2025, by state: Predictions based upon constant linear trend in imprisonment rate for inmates 55 or older

Sources: Author's analysis of BJS's NCRP (prison) and CDC Wonder (population) data.
Percent change in actual (2015) and predicted (2025) number of inmates aged 55 or older, by state: Predictions based upon constant linear trend in imprisonment rate

Sources: Author's analysis of BJS's NCRP (prison) and CDC Wonder (population) data.
Future increases in the size of the older inmate population will put upward pressure on health care costs

• Total health care expenditures in SLC states range from $24MN to $608MN:
  • Median state health care expenditures ~$100MN per year.

• Total health care expenditures related to the number of inmates.
  • Per inmate health care expenditures range from $2,100 per annum to $7,200 per annum;
  • Median state health care expenditures ~$4,000 per annum

• Average health care expenditures vary with the type of health care delivery system:
  • Contracted systems have the highest average cost; hybrid systems the lowest.
Future increases in the size of the older inmate population likely to put upward pressure on health care costs

• Total estimated health care costs in 2025 would increase by 16% in SLC states (to $3BN from $2.6BN in constant dollars) due to expected increase in older inmates, assuming:
  • Average health care costs for older inmates are twice those of other inmates;
  • Accurate projected population of older inmates;
  • Number of inmates younger than 55 remains constant;
  • Average medical costs are constant.

• Cost increase estimates depend upon the ratio of health care costs for older vs. younger inmates.
Per inmate medical spending per year in SLC states, fiscal years 2010-2015: High, low, and median amounts

Source: Author's analysis of Pew Charitable Trusts data.
Per inmate medical expenditure and proportion of inmates aged 55 or older, by state, 2010-2015

- Alabama
- Arkansas
- Florida
- Georgia
- Kentucky
- Louisiana
- Maryland
- Mississippi
- Missouri
- North Carolina
- Oklahoma
- South Carolina
- Tennessee
- Texas
- Virginia
- West Virginia

Year

Per inmate medical expenditure
Proportion inmates aged 55 or older

Source: Author's analysis of Pew medical expenditures and NCRP data.
Contracted provision is the main method for health care delivery in SLC states

- **Organization of health care delivery varies among states:**
  - Direct provision: NC, OK, SC
  - Contracted provision: AL, AR, KY, MD, MO, MS, TN, WV
  - Hybrid: LA, VA
  - State University: GA, TX

- **Mean, per inmate costs vary by type of delivery system.**

<table>
<thead>
<tr>
<th>Health care delivery system</th>
<th>Mean per inmate cost (annual)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct provision</td>
<td>$4,572</td>
</tr>
<tr>
<td>Contracted</td>
<td>$4,614</td>
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<tr>
<td>Hybrid</td>
<td>$3,603</td>
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<tr>
<td>State university</td>
<td>$3,796</td>
</tr>
</tbody>
</table>

Source: Author’s analysis of Pew Charitable Trusts data on prison health care costs.
Improvement management of health care for older inmate populations

• Recommendations from research and policy advocacy groups include:
  • Improving health care management;
  • Address (improve) conditions inside of prisons:
    • National Commission on Correctional Health Care standards for geriatric care;
    • Geriatricize facilities.
  • Staff training in geriatric issues.
  • Hospice and palliative care.
  • Chronic health “self-management”—Day to day tasks that individuals must undertake to control or reduce the impact of disease on physical health.
  • Facilities for older inmates.
Release, reentry, and future populations of older inmates

• Discharge planning and reentry:
  • Enhancing community supports;
  • Addressing health care, housing, employment issues;
  • Increasing cooperation with voluntary associations (e.g., analogues to Boys & Girls Clubs, Big Brother/Big Sister; faith-based community involvement).

• Expanding release mechanisms:
  • Balancing elements of risk (e.g., type of offense vs. age and chances of recidivating);
  • Medical parole/compassionate release.

• Reducing the number of older persons in prison:
  • Address the rate at which these offenders are imprisoned; use of alternatives.
  • Address the amount of time they spend serving their sentences: Sentence length imposed and length of time served.