Extraordinary Medical Placement (EMP)   CY 2020

Number of Incarcerated Individuals considered for EMP during the reporting period	**75**

Number of incarcerated individuals granted an EMP	**4**
Total number who were on EMP status sometime during the reporting period	6

Number of Incarcerated Individuals denied an EMP	**51**
Number who were denied placement because they did not fit the medical criteria (RCW 9.94A.728(4)(a))	56
Number who were denied placement because they do not fit the safety criteria per Headquarters Community Screening Committee (HCSC)	12
Number who were denied placement by the DOC Secretary	0

Other outcomes of incarcerated individuals during the reporting period	
Number that died during consideration for an EMP/ before EMP placement	12
Number who where released prior to placement/consideration	2
Number who refused, EMP was rescinded or were LWOP & did not qualify	6
Number approved for EMP but were actively awaiting placement in the community	2
Number who died while on EMP	0
Number who released while on EMP	1
Number who were being considered for EMP at the end of the reporting period	3

The average length of time between initial consideration and the placement decision for each incarcerated individual who was granted an EMP (date of referral to placement date)	**153 days**

The number of incarcerated individuals granted an EMP who were later returned to total confinement	**2**
Number granted an EMP who returned to prison due to a change in placement*	1
Number granted an EMP who returned to prison due to a violation	1
Number granted an EMP who returned to prison due to medical condition improving	0

Cost avoidance to the State of Washington for the reporting year**	**$**	**(11,719)**
DOC (EMP days used per yr x avg cost per day/offender) **LESS**	$	(152,430)
State portion of Medicaid payments for community care	$	140,711

*Placement was no longer able to meet individual's needs. Individual returned to prison while seeking new placement option.

**Note: The cost avoidance calculation takes into account the State's share of what the Medicaid program paid for any care in the community.