ASSOCIATION of ARKANSAS COUNTIES



Local Government Inmate Cost Report



ASSOCIATION OF ARKANSAS COUNTIES 2014

Executive Summary

Association of Arkansas Counties Inmate Cost Report for 2013

Introduction

This report is being issued in compliance with Section 33 of Act 1207 of 2013 which requires the Association of Arkansas Counties to compile and submit a Local Government Inmate Cost Report to the Arkansas Legislative Council. The report demonstrates the costs incurred by county governments housing state inmates. The special language of the aforementioned sections is as follows:

Each calendar year, the Association of Arkansas Counties shall compile and submit a report to the Arkansas Legislative Council, of all costs incurred, excluding construction costs, by local government units housing inmates sentenced to the Department of Correction and Department of Community Correction. The cost report shall be a representative sample of all counties housing and caring for state inmates. The report shall be submitted no later than July 1 of the calendar year immediately following the reporting year.

The Association of Arkansas Counties in coordination with Legislative Audit shall determine which counties will be included in the sample and shall include a sufficient number of counties from each classification based upon population and each congressional district to ensure a fair report shall be developed by the Division of Legislative Audit in coordination with the Association of Arkansas Counties. The Division of Legislative Audit shall test the accuracy of the information submitted during the routine audit of the applicable county.

The provision of this section shall be in effect only from July 1, 2013 through June 30, 2014.

Due to insufficient bed space for state prisoners, the county jails of Arkansas are often used to house state prisoners until space becomes available in state prison facilities. The State of Arkansas assumes the cost of housing these inmates when they have been convicted by the Arkansas court system. In fact, the reimbursement calculation begins on the date of sentencing if the judgment and commitment order is received by the Department of Correction not later than twenty-one (21) days from the sentencing date – or in the case of the Department of Community Correction if the judgment and commitment order or the judgment and disposition order, whichever is applicable, is received not later than twenty-one (21) days from either the date of sentencing or the date of placement on probation accompanied with incarceration. If the proper paperwork is not remitted to the applicable state agency within the first twenty-one (21) days after sentencing the reimbursement is started from the day that the paperwork is received by the agency. We feel that this is an acceptable rule. An onus for an elected official to act and perform in a timely manner is reasonable. [Reference: ACA 12-27-114]

The Arkansas State Legislature in recent years has appropriated in excess of \$10 million per year for County Jail Reimbursement. This amount has historically been insufficient by several million dollars which necessitates a supplemental appropriation by the legislature when they convene in order to catch up and fulfill their duty in paying counties for housing state prisoners. Beginning in 2013 we have found a trend of rapid increase in numbers of state prisoners housed in county facilities, largely due to the fact that parole revocations have increased in frequency. At the time of this report, in excess of 2,600 state prisoners are being housed in county facilities.

Although the State of Arkansas pays county government a daily per diem for housing state inmates from the date of sentencing, if the proper paperwork is filed in a timely manner, they do not take on the liability of medical costs of a state prisoner until day 31 [ACA 12-27-11(c)(1)(2)].

Objective

Our objective was to comply with Section 33, Act 1207 of 2013 and secure a representation sample of the cost for housing state inmates in the county jails of Arkansas.

Scope and Methodology

The "cost report" was conducted for the time period January 1, 2013 through December 31, 2013 – since Arkansas county government operates on a calendar year. Guidelines for preparing the cost report were developed by the Division of Legislative Audit in coordination with the Association of Arkansas Counties. The guidelines are very similar to the guidelines developed several years ago by the Division of Legislative Audit and the Department of Correction to ascertain the same type of information. We have included a copy of the guidelines and instructions for the Inmate Cost Report in this report to the Arkansas Legislative Council.

The law required that a sufficient number of counties from each population classification and each congressional district be included to ensure a fair representation of costs incurred. The State of Arkansas has divided the counties of Arkansas into 7 population classifications with Class 1 being the smallest and Class 7 being the largest. There are eleven (11) Class 1 counties with populations up to 9,999; twenty-seven (27) Class 2 counties with populations of 10,000 to 19,999; fifteen (15) Class 3 counties with populations of 20,000 to 29,999; eight (8) Class 4 counties with populations of 30,000 to 49,999; four (4) Class 5 counties with populations of 50,000 to 69,999; seven (7) Class 6 counties with populations of 70,000 to 199,999; and three (3) Class 7 counties – 200,000 population and above. Among the congressional districts, District 4 is the largest in land area and the number of counties – followed closely by District 1. Districts 2 and 3 are much smaller in land mass and the number of counties per district.

The Association of Arkansas Counties in coordination with the Division of Legislative Audit chose the following fifteen (15) counties from which to secure data:

COUNTY	<u>CLASS</u>	CONGRESSIONAL DISTRICT
Calhoun County	1	4
Cross County	2	1
Drew County	2	4
Jackson County	2	1
Van Buren County	2	2
Phillips County	3	1
Polk County	3	4
Yell County	3	4
Baxter County	4	1
Mississippi County	4	1
Crawford County	5	3
Lonoke County	5 .	1
Sebastian County	6	3
White County	6	2
Pulaski County	7	2

We believe that this cost report, comprised of information from fifteen (15) counties, is a fair representation sample of all counties housing and caring for state inmates. All counties in the list submitted useful information.

Prisoner Care Reimbursement Request Procedure

In accordance with state law, in the first week of each month the Department of Correction and the Department of Community Correction prepares an invoice for each inmate received from a county during the previous month. The invoice reflects the number of days an inmate was in the county jail in an awaiting-bed-space status. The Department of Correction and the Department of Community Correction verifies and forwards the invoices to the applicable county sheriff to certify the actual number of days the sate inmates were physically housed in the county jail. The certified invoices are then returned to the Department of Correction and the Department of Community Correction for payment from the County Jail Reimbursement Fund.

This method and system for reimbursement was developed through legislation in 2003.

Per Diem

The current rate of reimbursement to the counties of Arkansas for housing state prisoners is \$28 per day. This amount includes care, custody, treatment, and transportation of prisoners.

In our review of per diem rates, the Governor and the Chief Fiscal Officer of the State approved the last increase in the reimbursement rate from \$25 to \$28 per day effective July 1, 2001. It is still \$28 per day some twelve (13) years later.

According to ACA 12-27-130, both the Governor and the Chief Fiscal Officer of the State must approve any increase in the reimbursement rate. And, of course, it does no good to increase the reimbursement rate if you don't increase the appropriation to fund the increased rate.

Per Diem History

Act 737 of 1981 provided for reimbursements to Arkansas counties for housing state inmates until adequate space become available at the Arkansas Department of Correction (ADC). This initial Act provided appropriation and supplemental funding, not to exceed a cumulative reimbursement total of \$100,000 for each years of the 1982 – 1983 biennium. This Act also stated that the rate paid to counties could be between \$8 per day for that biennium based on both the amount of money available for distribution and an estimate of the number of inmates that would be held by the counties during that year. It was an arbitrary number based more on the amount of money appropriated than on actual costs. The legislation also stipulated that reimbursement requests exceeding the appropriated funding would receive priority payment against funds of the year immediately following that fiscal year. ADC continues to employ this method to pay invoices carried forward from a previous fiscal year.

In 1985, the Board of Corrections began using varying rates for reimbursements, according to costs submitted by each county, up to a maximum of \$18 per day. This procedure continued until 1991 when the reimbursement rate per prisoner per day was increased to \$25 for local governments. The reimbursement rate was raised to \$28 per prisoner per day, effective July 1, 2001, with the new rate to include care, custody, treatment, and transportation of state prisoners. The \$28 rate is the current rate.

Inmate Cost Report – 2011 State Inmate Cost Per Day

County (Beds)	<u>Class</u>	<u>District</u>	Cost Per Day	
Calhoun County (30)	1	4	\$31.63	Page 6
Cross County (86)	2	1	\$39.68	Page 7
Drew County (43)	2	4	\$66.00	Page 8
Jackson County (26)	2	1	\$26.23	Page 9
Van Buren (54)	2	2	\$102.73	Page 10
Phillips County (75*)	3	1	\$47.84*	Page 11
Polk County (26)	3	4	\$33.73	Page 12
Yell County (30)	3	4	\$89.73	Page 13
Baxter County (101)	4	1	\$49.13	Page 14
Mississippi County (266)	4	1	\$77.02	Page 15-17
Crawford County (88)	5	3	\$38.84	Page 18
Lonoke County (148)	5	1	\$21.08	Page 19
Sebastian County (356)	6	3	\$38.69	Page 20
White County (330)	6	2	\$29.64	Page 21-22
Pulaski County (1210)	7	2	\$67.83	Page 23

^{*} Phillips County closed its jail on April 30, 2013. At that point they sent all inmates in their custody to the state prison system on a contract to hold these inmates. For the first 1/3 of the year (January 1-April 30) the in house cost for Phillips County as calculated on page 11 was \$23.52. From May 1-December 31 the state charged Phillips County \$60.00 per inmate, per day to house them. Using an average of 1/3 of the year at \$23.52 and 2/3 of the year at \$60.00 we estimate the cost to house state prisoners in Phillips County to be \$47.84.

The average "cost per day" of the fifteen (15) counties is \$50.65. Deleting the extremes – the low of \$21.08 and the high of \$102.73 reduces the average "cost per day" to \$48.92.

We believe this fifteen (15) county average is indicative of the state-wide average. The \$51.34 cost per day is similar to the surveys of recent years that included other counties.

Α.	General Information			
	Jail Facility Name:	Calhoun County Detenti	c Total State Inmate Days:	4653
	County:	Calhoun	Total Inmate Days:	7989
	Jail Facility Capacity (# Beds):	30	Percentage of State Inmate Days:	58.24%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	161,238.68		
	Utilities	33,560.27		
	Food	52,961.24		
	Clothing	1,674.23		
	Insurance	3,800.00		
	Travel/Training	561.88		
	Capital Outlay	23,702.80		
	Other (attach list)	8,382.62		
	b) Depreciation	N/A		
	c) Overhead	0.00		
	d) Treatment/Medical	6,292.44		
	e) Education/School	0.00		
	f) Other Ancillary Costs (Please list	each separately)		
	Maint.& repair	13,807.13		
	Total Expenditures to be Allocated		305,981.29	
			•	•
C.	Reimbursements			
	Act 309 Contracts	53,271.00		
	State reimbursements for			
	medical costs			
	Total Reimbursements		53,271.00	
D.	Total Expenditures less Reimburse	ements		
	to be Allocated (B-C)		252,710.29	
Ε.	Percentage of State Inmate Days (From A)	58.24%	
F.	Total Allocated State Inmate Costs	s (D*E)	147,185.00	
G.	Total State Inmate Days (From A)		4653	
٠.	Total State initiate Days (170111 A)		4033	•
Н.	State Inmate Cost Per Day (F/G)		\$31.63	
	Source of Information:			

A.	General Information			
7	Jail Facility Name:	CROSS CO JAIL	Total State Inmate Days:	4053
	County:	CROSS CO	Total Inmate Days:	14657
	Jail Facility Capacity (# Beds):	86	Percentage of State Inmate Days:	27.65%
₿.	Expenditures to be Allocated:	· ·		
	a) Direct Facility Expenditures:			
	Salaries & Benefits	485,354.00		
	Utilities	0.00		
	Food	57,363.00		
	Clothing	10,369.00		
	insurance			
	Travel/Training	2,232.00		
	Capital Outlay			
	Other (attach list)	52,180.00		
	b) Depreciation			
	c) Overhead			
	d) Treatment/Medical	2,034.00		
	e) Education/School			
	f) Other Ancillary Costs (Please list	each separately)		
		3.14		
	Total Expenditures to be Allocated		609,532.00	
	14 di dibermini en 44 kê village ean		000,502,00	
C,	Reimbursements			
	Act 309 Contracts	27,905.00		
	State reimbursements for	The same of the sa		
	medical costs			
	Total Reimbursements	the state of the s	27,905.00	
n	Total Expenditures less Reimburse			
٠.	to be Allocated (B-C)	ETTREATES	581,627.00	
Ĕ.	Percentage of State Inmate Days	From Al	27.65%	
	A STATE OF THE STA		27.0370	
F.	Total Allocated State Inmate Costs	: (D*E)	160,833.34	
Ģ.	Total State Inmate Days (From A)		4053	
H.	State Inmate Cost Per Day (F/G)		\$39.68	
	The first of the first state of the state of		935.00	
	Source of Information:			

	Seneral Information Dreid	Co. Detention F	Scillify Total State Inmate Days:
	County:	Drew	Total Inmate Days:
	Jall Facility Capacity (# 8eds):	43	Percentage of State Inmate Days:
ß.	Expenditures to be Allocated:		
	a) Direct Facility Expenditures: Salaries & Benefits Utilities Food Clothing Insurance Travel/Training Capital Outlay Other (attach list) b) Depreciation c) Overhead d) Treatment/Medical e) Education/School f) Other Ancillary Costs (Please list	39034 each séparately)	
	Total Expenditures to be Allocated		785269
Ċ.	Reimbursements Act 309 Contracts State reimbursements for medical costs	18409	
	Total Reimbursements		18409
D.	Total Expenditures less Reimburse to be Allocated (B-C)	ements	71-1-81-15
Ę,	Percentage of State Inmate Days (From A)	45 7
F.	Total Allocated State Immate Costs	s (O*E)	_345087_
G.	Total State inmate Days (From A)		5256
14.	State Immate Cost Per Day (F/G)	·	66.00
	and the same of th		

	•			
Ä,	General Information	JACKSON COUNTY		
	Jail Facility Name:	JACKSON COUNTY	Total State Inmate Days:	3662
	County;	JACKSON COUNTY	Total Inmate Days:	31775
	Jail Facility Capacity (# Beds):	26	Percentage of State Inmate Days:	11.52%
			_	
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	500,450.55		
	Utilities	38,595.59		
	Food	58,330.62		
	Clothing	3,566.56		
	Insurance	500.00		
	Travel/Training	1,270.56	•	
	Capital Outlay	15,796.00		
	Other (attach list)			
	b) Depreciation	2,600.00		
	c) Overhead	86,104.00		
	d) Treatment/Medical	41,281.87		
	e) Education/School			
	f) Other Ancillary Costs (Please list	each separately)		
	out of county housing	97,396.13		
	Total Expenditures to be Allocated		845,891.88	_
C.	Reimbursements			
	Act 309 Contracts	12,402.00		
	State reimbursements for			
	medical costs			
	Total Reimbursements		12,402.00	<u>_</u>
			•	
D.	Total Expenditures less Reimburs	ements		
	to be Allocated (B-C)		833,489.88	
E.	Percentage of State Inmate Days	(From A)	11.52%	<u> </u>
	Total Allegated State Local Co.	. Inves	as arrival	
r.	Total Allocated State Inmate Cost	S (Đ*E)	96,057.91	<u>.</u>
G	Total State Inmate Days (From A)		3000	,
u,	Local acute initiate pals (LIOUI V)		3662	-
H.	State Inmate Cost Per Day (F/G)		\$26.23	₹
			720,23	=
	Source of Information:			

A.	General Information Jail Facility Name:	Van Buren County	Total State Inmate Days:	1001
	County:	Van Buren County	Total Inmate Days:	10529
	Jail Facility Capacity (# Beds):	54	Percentage of State Inmate Days:	9.51%
	Jan Facility Capacity (# Beus).		reflettinge of State Illinate Days.	J.J176
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	752,982.28		
	Utilities	59,940.00		
	Food	50,000.00		
	Clothing	6,000.00		
	Insurance	8,000.00		
	Travel/Training	1,000.00		
	Capital Outlay	146,730.00		-
	Other (attach list)	2.0,700.00		
	b) Depreciation			
	c) Overhead			
	d) Treatment/Medical	65,000.00		
	e) Education/School			
	f) Other Ancillary Costs (Please list	each separately)		
	,			
	<u> </u>			
			·	
	Total Expenditures to be Allocated		1,089,652.28	
	, , , , , , , , , , , , , , , , , , , ,			
C.	Reimbursements			
	Act 309 Contracts	7,968.00		
	State reimbursements for			
	medical costs			
	Total Reimbursements		7,968.00	
D.	Total Expenditures less Reimburse	ements		
	to be Allocated (B-C)	•	1,081,684.28	
E.	Percentage of State Inmate Days (From A)	9.51%	
	, ,	,		
F.	Total Allocated State Inmate Costs	s (D*E)	102,836.54	
		•		
G.	Total State Inmate Days (From A)		1001	
	,			
Н.	State Inmate Cost Per Day (F/G)		\$102.73	
	Source of Information:			

۸	General Information			
۸.	Jail Facility Name:	Phillips County	Total State Inmate Days:	270
	County:	Phillips County	Total Inmate Days:	9000
	Jail Facility Capacity (# Beds):	75	Percentage of State Inmate Days:	3.00%
	san racine, capacity (in 2 2 22)			
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	139,871.19		
	Utilities	6,800.00		
	Food	27,766.80		
	Clothing	1,200.00		
	Insurance	14,740.00		
	Travel/Training	500.00		
	Capital Outlay	3,979.38		
	Other (attach list)			
	b) Depreciation			
	c) Overhead	20,541.15		
	d) Treatment/Medical	3,858.06		
	e) Education/School			
	f) Other Ancillary Costs (Please list	each separately)		
	if Gener Amelian y Goods (i icase iiis			
	Total Expenditures to be Allocated	I	219,256.58	
	Reimbursements			
C.	Act 309 Contracts	•		
	State reimbursements for			
	medical costs	7,560.00		
	Total Reimbursements	7,500.00	7,560.00	
	Total Nembarsements			
D.	Total Expenditures less Reimburs	ements		
	to be Allocated (B-C)		211,696.58	
E.	Percentage of State Inmate Days	(From A)	3.00%	•
F.	Total Allocated State Inmate Cost	s (D*E)	6,350.90	ı
e	Total State Inmate Days (From A)		270	
u.	iotal state limiate Days (FIOHI A)		270	
Н.	State Inmate Cost Per Day (F/G)		\$23.52	

^{*} Phillips County closed its jail on April 30, 2013. At that point they sent all inmates in their custody to the state prison system on a contract to hold these inmates. For the first 1/3 of the year (January 1-April 30) the in house cost for Phillips County as calculated on page 11 was \$23.52. From May 1-December 31 the state charged Phillips County \$60.00 per inmate, per day to house them. Using an average of 1/3 of the year at \$23.52 and 2/3 of the year at \$60.00 we estimate the cost to house state prisoners in Phillips County to be \$47.84.

Д.	General information Jail Facility Name:	Palk Cor	inty Detention (i Total State Inmate Days:	1300
	County:			- Total Inmate Days:	18954
	Jail Facility Capacity (# Beds):	FOIR COL	25	Percentage of State Inmate Days:	6,86%
	Jan racinty capacity (# becoy-			S and a transmitted as a second control of a s	Brown Company
В,	Expenditures to be Allocated:				
	a) Direct Facility Expenditures:		,		
	Salaries & Benefits		472,920.00	•	
	Utilities		65,404.00		
	Food.		30,958.00		
	Clothing		\$66.00		
	Insurance		4,230.00		
	Travel/Training	,	793.00		
	Capital Outlay		0.00		
	Other (attach list)	,	, , , , , , , , , , , , , , , , , , , ,		
	Fuel, oll, tires, lube		3,370.00		
	b) Depreciation		0.00		
	c) Overhead				
	Breathalyzer/QWI	·	188.00		
	Bldg Maint. & Supplies		9,730.00	•	
	Maint/Sve Contracts		5,989.00		
	Software & Computer		7,944.00		
	Administrative		11,768.00	•	
	Janitorial		790.00		
	d) Treatment/Medical		7,726.00		
	e) Education/School		0,00		
	f) Other Ancillary Costs (Please list	each sepa	arately)	· ·	
	Professional Svc	\$	5,988.00		
	Memberships/Dues	\$	589.00		
	Office & Jail Supplies	\$	8,368.00	•	
	Small Equip	Ś	573.00		
	Misc 911	\$	1,095.00		
	Total Expenditures to be Allocated			639,290.0	<u>0</u> .
_	and the second of				
Ç,	Reimbursements				
	Act 309 Contracts		<u>Ö.00</u>		
	State reimbursements for				
	medical costs		0.00		
	Total Reimbursements			0,0	<u>)</u>
D.	Total Expenditures less Reimburse	aynome			
_,	to be Allocated (B-C)	Witchier.			
F.	Percentage of State Inmate Days (Erom Al		639,290.0	
14.7	. c. demonstra pr dease illitible pays	LI ANI WÌ		6.869	<u>8</u>
F.	Total Allocated State Inmate Cost	(D*E)		43,855.29)
	•				=======================================
ċz	Total State Inmate Days (From A)	•.			
				1300)
H.	State Inmate Cost Per Day (F/G)			\$33.78	3
	Source of Information:				

		DARDANELL	2	man man P
A.	General Information	DANVILLE	Total State Inmate Days:	<i>855_</i>
	Jail Facility Name:	MANUTE	Total Inmate Days:	ELLIND
	County;	JE !!	Percentage of State Inmate Days:	15.839
	Jail Facility Capacity (# Beds):	30	Percellings of proce tillinger pala.	
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:	377,724.00)	
٠.	Salaries & Benefits			
	Utilities	\$ 26,000.00		
	Food	55,000.00	·	
	Clothing	4,500.00	•	
	Insurance	1,400.00		
	Travel/Training	2,000.00		
	Capital Outley	_ Co,000, OD		
	Other (attach list)	=0=		
	b) Depreciation			
	c) Overhead		`	
	d) Treatment/Medical	35,000.00	•	
	e) Education/School	handa sandahalid	-	
	f) Other Ancillary Costs (Please list	c each separatery)	•	
		-		
		-	#	
	Total Expenditures to be Allocate	ri	\$507,624	
	The state of the s	•		
c.	Reimbursements	<u> </u>		
	Act 309 Contracts	NONE NONE	ş *	
	State relimbursements for	4.1.45		
	medical costs	NONE	# 000	
	Total Reimbursements		423,000.	ú
D.	Total Expenditures Jess Relmburs	sements	أقالة بينجيد	2
	to be Allocated (B-C)		484,624.00	•
Ę.	Percentage of State Inmate Days	(From A)	15 82%	- · ·
		•		
F,	Total Allocated State Immate Cos	ts (D*E)	76,715.98	
	•			
G.	Total State Immate Days (From A	ĭ	255	
			U Chamber	
H.	State Inmate Cost Per Day (F/G)		89.73	
	Source of Information:			
	Shen; FF Bell 6;	lkey	í.	

A.	General Information	Baxter County Sheriff's Office	Tablificate Investo Descri	. 2100
	Jail Facility Name:	Baxter County Detention Center	Total State Inmate Days:	3198
	County:	Baxter	Total Inmate Days:	26202
	Jail Facility Capacity (# Beds):	101	Percentage of State Inmate Days:	12.21%
В.	Expenditures to be Allocated:	•		
	a) Direct Facility Expenditures:			
	Salaries & Benefits	679,413.00		
	Utilities	70,697.00		
	Food	51,200.00		
	Clothing	6,950.00		
	Insurance	9,700.00		
	Travel/Training	4,600.00		
	Capital Outlay	23,500.00		
	Other (attach list)	58,100.00		
	b) Depreciation	128,000.00		
	c) Overhead	109,415.00		
	d) Treatment/Medical	100,500.00		
	e) Education/School	4,900.00		
	f) Other Ancillary Costs (Please list	each separately)		
	Risk Management	11,442.00		
	Gen Supplies/Maintenance	58100		
	Total Expenditures to be Allocated	I	1,316,517.00	
c.	Reimbursements			
	Act 309 Contracts	29,112.00	•	
	State reimbursements for	0.00		
	medical costs			
	Total Reimbursements	•	29,112.00	
_				
D.	Total Expenditures less Reimburse	ements	4 227 427 22	
_	to be Allocated (B-C)	·	1,287,405.00	
E.	Percentage of State Inmate Days ((From A)	12.21%	
F.	Total Allocated State Inmate Costs	s (D*E)	157,130.04	
G.	Total State Inmate Days (From A)		3198	
н.	State Inmate Cost Per Day (F/G)		\$49.13	

Source of Information:

A.	General Information	Mississippi County Sheriff's		
	Jail Facility Name:	Department	Total State Inmate Days:	7,340
	County:	Mississippi	Total Inmate Days:	47,322
	Jail Facility Capacity (# Beds):	266	Percentage of State Inmate Days:	15.51%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salarles & Benefits	2,412,613.15		
	Utilities	149,722.85		
	Food	202,273.24		
	Clothing	8,075 82		
	Insurance	0.00		
	Travel/Training	0 00		
	Capital Outlay	0.00		
	Other (attach list)	142,959,33		
	b) Depreciation	-530,000.00		
	c) Overhead	0.00		
	d) Treatment/Medical	. 199,112.81		
	e) Education/School	201,05		
	f) Other Ancillary Costs (Please list		•	
	Total Expenditures to be Allocated		3,644,953.25	
c.	Reimbursements			
	Act 309 Contracts	. 0.00		
	State reimbursements for			
	medical costs	See Attached Explanation		
	Total Reimbursements			
D.	Total Expenditures less Reimburse	ments		
	to be Allocated (B-C)	11711	3,644,958.25	
E.	Percentage of State Inmate Days (From A)	15.51%	
F.	Total Allocated State Inmate Costs	(D*E)		
			·	
G.	Total State Inmate Days (From A)		7340	
Н,	State Inmate Cost Per Day (F/G)		. \$77.02	
	Source of Information:			

OTHER ANCILLARY COSTS

TELEPHONE	9,887.20
OFFICE SUPPLIES	286.96
HYGIENE	2,239.42
CHEMICAL/CLEANING SUPPLIES/CLOTHING	28,791.72
BUILDING REPAIR/MAINT/BLD&GROUNDS	36;460.87
BUILDING/REPAIR/MACH/EQUIPMENT	63,043.16
EMPLOYEE MEDICAL EXAMS	2 250 00

EXPLANATION

C. Reimbursements

State reimbursements for medical costs

We use Advanced Correctional Healthcare for our medical needs. They bill the state for state inmates and reimbursements go to them. The total Treatment/Medical under Section B, line item d) is our total inmate medical costs minus any reimbursements for the calendar year 2013 that was paid to Advance Correctional Healthcare.

Α.	General Information			
	Jail Facility Name:	Crawford County Deten	t Total State Inmate Days:	11936
	County:	Crawford	Total Inmate Days:	32626
	Jail Facility Capacity (# Beds):	88	Percentage of State Inmate Days:	36.58%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	861,685.54		
	Utilities	68,625.66		
	Food	87,803.85		
	Clothing	5,702.13		
	Insurance	0.00		
	Travel/Training	2,011.98		
	Capital Outlay	14,848.92		
	Other (attach list)	0.00		
	b) Depreciation	0.00		
	c) Overhead	117,932.00		
	d) Treatment/Medical	108,525.95		
	e) Education/School	0.00		
	f) Other Ancillary Costs (Please list	each separately)		
				-
	Total Expenditures to be Allocated		1,267,136.03	
_				
C.	Reimbursements			
	Act 309 Contracts			
	State reimbursements for			
	medical costs		/	
	Total Reimbursements		0.00	
_	Tatal Forman diagnature I and But all and a			
υ.	Total Expenditures less Reimburse	ements	4 257 426 22	
_	to be Allocated (B-C)	F A)	1,267,136.03	
E.	Percentage of State Inmate Days (rrom A)	36.58%	
F.	Total Allocated State Inmate Costs	(D*E)	463,573.09	
G.	Total State Inmate Days (From A)		11936	
н.	State Inmate Cost Per Day (F/G)		\$38.84	
	Source of Information:			

Α.	General Information			
	Jail Facility Name:	Lonoke County	Total State Inmate Days:	5793
	County:	Lonoke County	Total Inmate Days:	58035
	Jail Facility Capacity (# Beds):	148	Percentage of State Inmate Days:	9.98%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	940,970.14		
	Utilities	8,637.82		
	Food	170,040.27		
	Clothing	3,200.00		
	Insurance	12,842.36		
	Travel/Training	6,500.00		
	Capital Outlay			
	Other (attach list)			
	b) Depreciation			
	c) Overhead			
	d) Treatment/Medical	81,287.08		
	e) Education/School			
	f) Other Ancillary Costs (Please list	each separately)		
	,			
	Total Expenditures to be Allocated		1,223,477.67	
c.	Reimbursements			
	Act 309 Contracts	0.00		
	State reimbursements for			
	medical costs	0.00		
	Total Reimbursements		0.00	
D.	Total Expenditures less Reimburse	ements		
	to be Allocated (B-C)		1,223,477.67	
E.	Percentage of State Inmate Days (From A)	9.98%	
_		tt		
F.	Total Allocated State Inmate Costs	s (D*E)	122,126.41	
_				
G.	Total State Inmate Days (From A)		5793	
	State Immete Cost Day Day (5/5)		4	
н.	State Inmate Cost Per Day (F/G)		\$21.08	
	Source of Information:		, A	
	Source of information:			

Α.	General Information			
	Jail Facility Name:	Sebastian Co. Adult	Total State Inmate Days:	35527
	County:	Sebastian County	Total Inmate Days:	133257
	Jail Facility Capacity (# Beds):	356	Percentage of State Inmate Days:	26.66%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:	·		
	Salaries & Benefits	2,855,737.00		
	Utilities	256,564.00		
	Food	446,087.00		
	Clothing	50,189.00		
	Insurance	62,346.00		
	Travel/Training	853.00		
	Capital Outlay	27,786.00		
	Other (attach list) See below*	555,574.00		
	b) Depreciation	160,993.00		
	c) Overhead	48,832.00		
	d) Treatment/Medical	211,609.00		
	e) Education/School	481,552.00		
	f) Other Ancillary Costs (Please list e	2,459.00		
	Total Expenditures to be Allocated		5,160,581.00	
_	Reimbursements			
C.	Act 309 Contracts	,		
	State reimbursements for medical costs	4 002 00		
	Total Reimbursements	4,883.00	4 602 00	
	Total Reinibursements		4,883.00	
D.	Total Expenditures less Reimburse	ments		
	to be Allocated (B-C)		5,155,698.00	
E.	Percentage of State Inmate Days (F	rom A)	26.66%	
	0	,	20.0070	
F.	Total Allocated State Inmate Costs	(D*E)	1,374,535.54	
G.	Total State Inmate Days (From A)		35527	
ט	State Immete Cost Dev Dev (F/C)		1	
п.	State Inmate Cost Per Day (F/G)	,	\$38.69	

^{*} Machinery, legal, pro services, telephone, postage, cell phone, data, electronic monitoring judgements, advertising

A.	General Information			
	Jail Facility Name:	White County	Total State Inmate Days:	11736
	County:	White	Total Inmate Days:	96009
	Jail Facility Capacity (# Beds):	330	Percentage of State Inmate Days:	12.22%
в.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	1,876,517.48		
	Utilities	112,168.32		
	Food	361,241.15		
	Clothing	10,536.80		
	Insurance	73,015.88		
	Travel/Training	75,015.08		
	Capital Outlay			
	Other (attach list)	220,754.01		
	b) Depreciation	220,754.01		
	c) Overhead			
	d) Treatment/Medical	215,459.44		
	e) Education/School			
	f) Other Ancillary Costs (Please list	each separately)		
	i, concernment, cooks (ricade not	cuon separatery,		
	Total Expenditures to be Allocated		2,869,693.08	
	•			
C.	Reimbursements			
	Act 309 Contracts	23,817.00		
	State reimbursements for			
	medical costs			
	Total Reimbursements		23,817.00	
D.	Total Expenditures less Reimburse	ements		
	to be Allocated (B-C)		2,845,876.08	
E.	Percentage of State Inmate Days (From A)	12.22%	
F.	Total Allocated State Inmate Costs	s (D*E)	347,875.74	
_	Total State Invest- Deve (No. 2)			
G.	Total State Inmate Days (From A)		11736	
н.	State Inmate Cost Per Day (F/G)		\$29.64	

Source of Information:

Cost information obtained from Payroll Distribution Reports and Budget Detail Reports from the White County Clerk's Office which cover actual expenditures incurred by the White County Detention Center for calender year 2013.

Inmate Cost Report White County Dentention Center Jan. 1, 2013 thru Dec. 31, 2013

Other cost:

Janitorial Hygiene/Laundry/Bedding/Inmate uniforms Building (general upkeep/light bulbs, etc.) Equipment maintenance/replacement Printing/general office supplies Telephone Jailer uniforms	\$ \$ \$ \$ \$ \$ \$	20,802.19 53,915.04 28,430.15 90,145.59 15,008.38 11,127.73 1,324.93
Total other expenses:	\$	220,754.01

À,	General Information			
	Jall Facility Name:	Pulaski County Jail	Total State Inmate Days:	59,075
	County:	Pulaski County	Total Inmate Days:	370,059
	Jail Facility Capacity (# Beds):	1210	Percentage of State Inmate Days:	15.96%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits			
	Utilitles			
	Food			
	Clothing .			
	Insurance			
	Travel/Training			
	Çapîtal Outlay	237,714.00		
	Other (attach list)	24,445,413.00		
	b) Depreciation	322,780.00		
	c) Overhead			
	d) Treatment/Medical			
	e) Education/School	95,661.00		
	f) Other Ancillary Costs (Please list	each separately)		
		· · · · · · · · · · · · · · · · · · ·		
	Total Expenditures to be Allocated		25,101,568.00	
C.	Reimbursements			
	Act 309 Contracts			
	State reimbursements for			
	medical costs			
	Total Reimbursements		0.00	•
Ď.	Total Expenditures less Reimbürs	ements		
	to be Allocated (B-C)		25,101,568.00	
E.	Percentage of State Inmate Days	(From A)	15.96%	•
	,	,	2013-070	•
F.	Total Allocated State Inmate Cost	s (D*E)	4,007,131.65	
				i
_	Watel Old to be a firm and			
G.	Total State Inmate Days (From A)		59075	•
Ĥ.	State Inmate Cost Per Day (F/G)		\$67.83	
	* * * * * * * * * * * * * * * * * * * *		707.03	1
	Source of Information:			

Appendix A

Applicable Arkansas Codes And Cost Per Day Methodology Guidelines/Instructions

12-27-114. Inmates in county jails – Reimbursement of County – Medical care.

- (a)(1)(A)(i) In the event the Department of Correction cannot accept inmates from county jails due to insufficient bed space, the Department of Correction shall reimburse the counties from the County Jail Reimbursement Fund at rates determined by the Chief Fiscal Officer of the State, after consultation and upon approval by the Governor, until the appropriation and funding provided for that purpose are exhausted.
- (ii) The reimbursement rate shall include the county's cost of transporting the inmates to the Department of Correction.
- (B)(i) Reimbursement shall begin on the date of sentencing if the judgment and commitment order is received by the Department of Correction not later than twenty-one (21) days from the sentencing date.
- (ii) If the judgment and commitment order is received by the Department of Correction twenty-two (22) or more days after the sentencing date, reimbursement shall begin on the date the Department of Correction receives the judgment and commitment order.
- (2)(A) In the event the Department of Community Correction cannot accept inmates from county jails due to insufficient bed space or shall have an inmate confined in a county jail under any prerelease program or sanction imposed in response to a violation of supervision conditions, the Department of Community Correction shall reimburse the counties from the fund at rates determined by the Chief Fiscal Officer of the State, after consultation with the division and the Department of Correction, and upon approval by the Governor, until the appropriation and funding provided for that purpose are exhausted.
- (B)(i) Reimbursement shall begin on either the date of sentencing or the date of placement on probation accompanied with incarceration in the Department of Community Correction if the judgment and commitment order or the judgment and disposition order, whichever is applicable, is received by the Department of Community Correction not later than twenty-one (21) days from either the d ate of sentencing or the date of placement on probation accompanied with incarceration in the Department of Community Correction.
- (ii) If the judgment and commitment order or the judgment and disposition order, whichever is applicable, is received by the Department of Community Correction twenty-two (22) or more days after the date of sentencing or the date of placement on probation accompanied with incarceration in the Department of Community Correction, reimbursement shall begin on the date the Department of Community Correction receives either the judgment and commitment order or the judgment and disposition order, whichever is applicable.

- (b)(1)(A) In the first week of each month, the Department of Correction and the Department of Community Correction shall prepare an invoice for each inmate received from a county during the previous month.
- (B) The invoice shall reflect the number of days an inmate was in the county jail in an awaiting-bed-space status.
- (2)(A) The Department of Correction and the Department of Community Correction shall verify and forward the invoices to the applicable sheriff to certify the actual number of days the state inmates were physically housed in the county jail.
- (B)(i) Upon written request of a county judge, county treasurer, or county sheriff, the Department of Correction and the Department of Community Correction shall provide to the county official making the request of a written report summarizing the year-to-date county jail reimbursement invoices prepared and forwarded for verification by the Department of Correction and the Department of Community Correction and payment from the fund.
- (ii) In addition, the report shall include a summary of invoices returned by each county for payment for previous months within the fiscal year, the amounts paid, and any balances owed.
- (3) The certified invoices shall then be returned to the Department of Correction and the Department of Community Corrections for payment from the fund.
- (4) The sheriff shall maintain documentation for three (3) calendar years to confirm the number of days each inmate was housed in the county jail.
- (5) The documentation maintained by the sheriff is subject to review by the division.
- (c)(1) The Board of Corrections shall adopt regulations by which the Department of Correction or the Department of Community Correction may reimburse any county, which is required to retain an inmate awaiting delivery to the custody of either the Department of Corrections or the Department of Community Correction for more than thirty (30) days, for the actual costs paid for any emergency medical care for physical injury or illness of the inmate retained under this section of the injury or illness is directly related to the incarceration and the county is required by law to provide the care for inmates in the jail.
- (2) The Director of the Department of Corrections or his or her designee or the Director of the Department of Community Corrections or his or her designee may accept custody of any inmate as soon as possible upon request of the county upon determining that the inmate is required to have extended medical care.

History. Acts 1985, No. 648, § 19; 1991, No. 329, §§ 2, 3; 1991, No. 574, §§ 2, 3; 1991, No. 644, § 3; 1995, No. 316, § 13; 2003, No. 370, § 1; 2003(2nd Ex. Sess.), No. 16, § 1; 2005, No. 2192, §1; 2013, No. 1282, § 1.

12-27-130. Reimbursement of County.

Notwithstanding any other provision of law or Department of Corrections' commitment which may exist to the contrary, the Board of Corrections shall not increase any reimbursement rate for payments made to any county for the purpose of reimbursing the expenses of the care and custody of state inmates without first seeking and receiving the approval of the Governor and the Chief Fiscal Officer of the State.

History. Acts 1993, No. 911, § 19; 1995, No. 158, § 13.

COST PER DAY METHODOLOGY LOCAL GOVERNMENT INMATE COST REPORT Calendar Year 2013 Guidelines/Instructions

GENERAL INFORMATION

The Local Government Inmate Cost Report for 2014, required by Section 33, Act 1207 of 2013, requires the Association of Arkansas Counties (AAC) to compile and submit a report to the Arkansas Legislative Council, of all costs incurred, excluding construction costs, by local government units housing inmates sentenced to the Department of Corrections and the Department of Community Corrections. The cost report shall be a representative sample of all counties housing and caring for state inmates.

The following guidelines were developed by the Division of Legislative Audit in coordination with AAC as required by Act 1207. The Local Government Inmate Cost Report must be submitted to the Arkansas Legislative Council no later than July 1 of the calendar year immediately following the reporting year. The following information is provided to assist in calculating the direct and indirect costs of housing state inmates. All documentation used in preparing this report should be properly maintained. The Division of Legislative Audit will test the accuracy of the information submitted. Please compile the information utilizing the format provided on the attached spreadsheet and send to:

Mr. Chris Villines, Director Association of Arkansas Counties 1415 West Third Street Little Rock, Arkansas 72201

DEFINITIONS

- A. State Inmates Inmates held who have been committed to the Arkansas Department of Correction (ADC) or Arkansas Department of Community Correction (ADCC) or held as a result of revocation of parole. Recognizing that the jail census may fluctuate daily, total state inmate days should accumulate the number of state inmates held daily by the population count at midnight. Do not include Act 309 inmates housed by contractual agreement.
- **B.** County Inmates All other inmates and jail detainees housed by the local jail facility including Act 309 inmates.
- C. Allocation of Costs Accumulate the number of inmates housed each day throughout the calendar year for which costs are being reported (exclude all inmates that may be housed in other facilities). The accumulation shall result in the total inmate days. The number of days state inmates are held in proportion to the total facility census days shall be used to determine allocated costs for state inmates. The total facility costs as determined below should be multiplied by the percentage of state inmate days that were a proportion of the total census days of the facility.

METHODOLOGY/INSTRUCTIONS FOR COST REPORTING (see related attached form)

- A. General Information Please list the jail facility name, county in which the facility is located, jail facility capacity, total state inmate days, and total inmate days in the space provided. Divide the Total State Inmate Days by the Total Inmate Days to obtain the Percentage of State Inmate Days.
- B. Total Expenditures to be Allocated (January December 2013)
 - **a. Direct Facility Expenditures** Record only the direct facility expenditures for housing inmates. Direct facility expenditures are determined as follows:
 - Record all expenditures in a manner that provides for the association of costs for the facility. This shall include the cost of salaries, wages, payroll taxes, and other miscellaneous payroll-related benefits for all employees directly engaged in housing inmates, including the Sheriff. Also include maintenance and operations expenditures such as utilities, clothing, insurance, travel, training, food, etc. (only exclude costs for depreciation, overhead, treatment/medical, education/school, and other ancillary costs that are to be reported separately);
 - Include capital outlay expenditures other than construction costs. Be sure to include any interest expense on indebtedness to purchase capital outlay items other than construction.
 - Include the matching requirements associated with federal grant expenditures. Documentation must be maintained sufficient to identify such costs by grant.
 - b. Depreciation Expense Include depreciation expenses for all fixed assets relating to the housing of state prisoners. Examples of fixed assets include buildings housing inmates, related furnishings, electronic equipment and vehicles used for the jail. Another County Official may already retain this information in a computer program such as the Fixed Asset Tracking System (FATS). Otherwise, depreciation for each asset may be calculated using the following formula:

Original cost of asset/ Asset's useful life= Annual Depreciation Expense

Suggested useful lives: Buildings 25 years Furnishings & Equipment 5 years

Note: Depreciation expense is \$0 if the years of ownership have exceeded the asset's useful life.

Example: Computer purchased in 2008 for \$5,000 with a useful life of 5 years \$5,000/5 years=\$1,000 annual depreciation expense for 2008-2012 Depreciation expense for 2012 and subsequent years =\$0.

- c. Overhead Expense Include administrative or other expenditures that are not directly attributable to the operation of the jail facility such as the Sheriff's office expenditures/ Do not include any expenditure that is reported with the Direct Facility Expenditures.
- **d.** Education/School Include educational and rehabilitation costs that are also made available to state inmates. This should include costs incurred by the local government unit or other public agencies.

- e. Other Ancillary Costs Include any remaining ancillary costs incurred by the local government unit not specifically indentified or included above. List each item individually in space provided.
- C. Reimbursements Include any amounts received from city, county, state or federal sources specifically allocated for operation of county/jail detention facilities (county aid funds, state payments for Act 309 contract inmates, federal reimbursements, any reimbursements received for meals, medical, etc. do not include reimbursements received from ACD or ADCC for housing state inmates) if such funds offset costs included in direct facility or administrative costs for housing "county" inmates as previously defined.
- **D.** Total Expenditures less Reimbursement to be Allocated Deduct Total Reimbursements (c.) form Total Expenditures to be Allocated (B.).
- E. Percent of State Inmate Days Insert amount calculated in General Information (A.).
- **F.** Total Allocated State Inmate Costs Multiply Total Expenditures less Reimbursements to be Allocated (D.) times Percentage of State Inmate Days (E.).
- G. Direct Safe Inmate Expenditures-Medical Costs Include expenditures incurred during the initial 30-day period from the date of commitment for state inmates. Medical expenses incurred after thirty (30) days are paid by ADC or ADCC. Do not include any costs for medical expenditures of county inmates.
- **H.** Total State Inmate Costs Add Total Allocated State Inmate Costs (F.) to Direct State Inmate Expenses (G.).
- I. Total State Inmate Days Enter the Total State Inmate Days from the General Information (A.). Each local unit must maintain documentation of number of inmates housed. Documentation will be reviewed by the Division of Legislative Audit.
- J. State Inmate Cost Per Day Divide the Total State Inmate Costs (H.) by the Total State Inmates Days (I.).

Α.	General Information Jail Facility Name:	Total State Inmate Days:	
	County:	Total Inmate Days:	
	Jail Facility Capacity (# Beds):	Percentage of State Inmate Days:	#DIV/0!
В.	Expenditures to be Allocated:		
	a) Direct Facility Expenditures:		
	Salaries & Benefits		
	Utilities		
	Food		
	Clothing		
	Insurance		
	Travel/Training		
	Capital Outlay		
	Other (attach list)		
	b) Depreciation		
	c) Overhead		
	d) Treatment/Medical		
	e) Education/School		
	f) Other Ancillary Costs (Please list each separately)		
			
	Total Expenditures to be Allocated	0.00)
			-
C.	Reimbursements		
	Act 309 Contracts	<u> </u>	
	State reimbursements for		
	medical costs		
	Total Reimbursements	0.00	<u>.</u>
_	words and the second		
υ.	Total Expenditures less Reimbursements		
_	to be Allocated (B-C)	0.00	<u>-</u>
Ŀ.	Percentage of State Inmate Days (From A)	#DIV/0!	-
F.	Total Allocated State Inmate Costs (D*E)	#DIV/0!	_
		-	-
_	Total State Investe Davis / France A)		
u.	Total State Inmate Days (From A)	0	<u>-</u> .
н.	State Inmate Cost Per Day (F/G)	#DIV/0!	=
	Course of Information		
	Source of Information:	•	

Sen. Bryan B. King
Senate Chair
Rep. Kim Hammer
House Chair
Sen. Linda Chesterfield
Senate Vice Chair
Rep. John W. Walker
House Vice Chair





Roger A. Norman, JD, CPA, CFE Legislative Auditor

LEGISLATIVE JOINT AUDITING COMMITTEE DIVISION OF LEGISLATIVE AUDIT

November 5, 2014

Senator Bill Sample, Co-Chair Representative John Edwards, Co-Chair Arkansas Legislative Council One Capitol Mall, 5th Floor Little Rock, AR 72201

Senator Sample and Representative Edwards:

Section 33 of Act 1207 of 2013 required the Association of Arkansas Counties to compile and submit a Local Government Inmate Cost Report to the Arkansas Legislative Council demonstrating the costs incurred by selected county governments housing state inmates. This section also requires the Division of Legislative Audit to test the accuracy of the information submitted. Attached for your review is a listing by county of the State Inmate Cost Per Day reported by the Association of Arkansas Counties and the State Inmate Cost Per Day verified by the Division of Legislative Audit.

DIVISION OF LEGISLATIVE AUDIT

Roger A. Norman, J.D., CPA, CFE

Legislative Auditor

RAN:jb

INMATE COST REPORT - 2013 COMPARISON OF COST PER DAY REPORTED AND VERIFIED

	Cos	t per Day	Cost	t per Day		
COUNTY	Re	eported	V	erified	Diff	erence
Pulaski	\$	67.83	\$	59.96	\$	(7.87)
Sebastian	\$	38.69	\$	47.93	\$	9.24
White	\$	29.64	\$	29.40	\$	(0.24)
Lonoke	\$	21.08	\$	28.64	\$	7.56
Crawford	\$	38.84	\$	39.04	\$	0.20
Baxter	\$	49.13	\$	46.42	\$	(2.71)
Mississippi	\$	77.02	\$	78.67	\$	1.65
Yell	\$	89.73	\$	85.11	\$	(4.62)
Phillips*	\$	47.84	\$	65.95	\$	18.11
Drew	\$	66.00	\$	61.62	\$	(4.38)
Jackson	\$	26.23	\$	25.98	\$	(0.25)
Van Buren	\$	102.73	\$	92.96	\$	(9.77)
Cross	\$	39.68	\$	34.27	\$	(5.41)
Calhoun	\$	31.63	\$	18.94	\$	(12.69)
Polk	\$	33.73	\$	38.60	\$	4.87
average	\$	50.65	\$	50.23	\$	(1.30)
average without high						
and low	\$	48.92	\$	49.35	\$	0.43

* Per AAC report:

Phillips County closed its jail on April 30, 2013. At that point they sent all inmates in their custody to the state prison system on a contract to hold these inmates. For the first 1/3 of the year (January 1 - April 30) the inhouse cost for Phillips County as calculated was \$23.52. From May 1 - December 31 the state charged Phillips County \$60 per inmate, per day to house them. Using an average of 1/3 of the year st \$23.52 and 2/3 of the year at \$60, we estimate the cost to house state prisoners in Phillips County to be \$47.84.

Per DLA verification:

DLA verification of inmate costs for state prisoners other than ADC contract was \$44.94. Including the contract amount paid to ADC the inmate costs were \$65.95.