



Juvenile Rehabilitation - Apple Health (Medicaid) Enrollment

Background

Young people under the age of 26 involved in Juvenile Rehabilitation (JR) start in an institution and may later be eligible to be placed in a community facility.

- **Institutions** are medium/maximum security facilities that provide young people sentenced to juvenile rehabilitation with education and vocational training. Young people placed in institutions do not have freedom of movement and do not leave the institution until they have completed their sentence or become eligible to transfer to a community facility.
- **Community Facilities** are minimum security facilities that provide young people with the opportunity to have freedom of movement in their communities. Young people are allowed to participate in regular schooling, have employment, visit their families along with many other community activities.

Changes to Apple Health Suspension

Young people under the age of 26 who enter the juvenile rehabilitation (JR) system go through several Apple Health eligibility coverage changes as they transition between a JR institution or a community facility (CF).

As of September 1, 2023, the Health Care Authority (HCA) changed the previous manual enrollment process to align the Apple Health suspension processes across populations and support care coordination for young people. This change helps minimize the managed care disruptions young people experience each year as they are exiting JR institutions, transferring between community facilities, and when transitioning back into their communities.

Apple Health enrollment – Institution

How is eligibility and enrollment updated for a young person involved in JR?

Apple Health coverage is suspended for young people involved in the JR system through HCA's ProviderOne ticket system. Young people are eligible for inpatient hospital services only during their suspension. For example, inpatient services are covered when a serious illness or injury requires a person to be treated overnight in a hospital setting.

When does a young person become eligible to transfer to a Community Facility?

All young people involved in JR start in an institution. Most young people are considered for placement in a community facility after they spend 10% or 30 days of their sentence in an institution. Young people are allowed access to the community to engage in community employment, attend public schools, and strengthen family connections through enhanced visitation and home leaves.

Enrollment *prior* to September 2023 change

How is eligibility and enrollment updated for a young person placed in a community facility?

Apple Health coverage is unsuspended, and current enrollment is terminated. HCA opens the young person's coverage type to a JR coverage group which means they are eligible for medical (including dental, prescription, and vision) services under Apple Health without a managed care plan (also known as fee-for-service) and behavioral health services only (BHSO) under a managed care plan. The only facility that could enroll clients in managed care was Oakridge community facility.

What happens if a young person is transferred back to an institution from a community facility?

A young person's eligibility remains active, their coverage is suspended and only their inpatient hospital services are covered by Apple Health.

Enrollment *after* September 2023 change

As of September 1, 2023, all young people will remain in their current managed care plan when entering a JR community facility. Clients will begin seeing their enrollment change beginning October 1, 2023.

Young people remain enrolled in their current Apple Health plan or choose a plan (Apple Health Core Connection for young people in foster care dependency) during a transition to a community facility, they will no longer change to JR coverage. If they transition back into an institution, coverage will be suspended.

Eligibility and enrollment for young people placed at a community facility

Since the September 1, 2023, change, a young person who transfers to a community facility is unsuspended and is reconnected in the managed care plan they had before being admitted to the JR institution.

The following populations are enrolled as follows:

- American Indian or Alaskan Native individuals have the option to enroll in managed care or Apple Health without a managed care plan.
- Foster care clients will be reconnected to Apple Health Core Connections with Coordinated Care of Washington.

Why is enrollment changing?

These changes support contractual compliance, remove barriers for young people receiving care coordination and understanding coverage, eases transitions back to the community, and helps the managed care organizations (MCO) receive the correct member information on their facility location and expected release date.

Care coordination is a vital component for young people transitioning back into their communities and helps clients reconnect to the same plan they had prior to suspension or have the option to choose their MCO if they are age 19 or older.

MCOs will be better supported for Wraparound with Intensive Services (WISe) service coordination and WISe provider selection while their client is in a community facility ensuring no break in services during clients' time involved with JR and transition back to their community.

Does a young person's coverage remain active when in a community facility?

Yes, with the new enrollment process Apple Health remains active while in a community facility when young people are:

- Placed in a community facility,
- Released from a community facility after completing their sentence,
- Approved for authorized leave or pre-release from a community facility,
- Released earlier than their original release date, or
- Have an unauthorized absence (escape).

How will Apple Health be billed for community facility services?

Services provided to a young person in a community facility will follow regular Apple Health billing protocols.

- When a young person is enrolled in managed care, their plan will be the responsible payer for medical, prescription, and behavioral health services.
- When a young person is enrolled in Apple Health without managed care (fee-for-service), ProviderOne will be the responsible payer for all covered services. Dental services will be billed fee-for-service through their ProviderOne services card.

Will youth that do not meet citizenship requirements qualify for coverage while in JR?

Yes, youth up to age 19 may qualify for Apple Health for Kids while in JR if they continue to meet the eligibility requirements.

Visit hca.wa.gov/apple-health-non-citizens for information on other coverage options for noncitizens.

Can young people decline Apple Health coverage when they enter JR?

Yes, young people can decline coverage when they enter JR. Everyone is asked to sign an authorization form allowing information sharing with HCA upon entry. A young person will not be enrolled in Apple Health if they decline authorization.

Can a young person's parent/guardian decline Apple Health coverage when they enter JR?

Parents/guardians can decline Apple Health coverage for residents under the age of 19.

Does a young person's earned income affect eligibility while placed in a community facility?

A young person's earned income affects eligibility during their stay in a community facility.

Their household income will also affect their eligibility if they are:

- Returning to their family or guardian, or
- A tax dependent, or
- Under the age of 19.

Visit hca.wa.gov/apple-health-eligibility to view Apple Health eligibility requirements.

How will the change affect community facilities' relationships with providers?

Community facilities will continue to work with their established providers. The managed care plan will provide care coordination with providers not contracted with HCA, until a long-term solution can be reached. The young person may have the option to transfer to a different plan. The new plan would start on the first day of the following month.

Note: UnitedHealthcare Community Plan is not available in all regions. The following community facilities require youth to be enrolled in one of the other four managed care plans:

- Sunrise
- Canyon View
- Twin Rivers
- Ridgeview
- Parke Creek

Email HCAJRRequests@hca.wa.gov to assist with care coordination and plan changes if a youth is placed in one of these facilities and is enrolled in UnitedHealthcare Community Plan.

About Apple Health

What is Managed Care?

Most Apple Health clients have managed care, which means Washington State pays a managed care plan a monthly premium for the client's coverage. Coverage includes preventive, primary, specialty, and other health care services. Clients enrolled in managed care must see providers who are in their plan's provider network, unless prior authorized or to treat urgent or emergent care.

Newly eligible and renewing Apple Health clients choose or are auto assigned into a managed care organization (MCO) the day they become eligible. Their managed care enrollment is backdated to the beginning of the current month. Clients can change their managed care plan at any time. Changes will take effect the following month, depending on when the request was received.

Visit hca.wa.gov/apple-health-managed-care for more information on Apple Health managed care.

What is Fee-For-Service?

Fee-for-Service means services are paid for directly by Apple Health rather than a managed care plan, this is also known as Apple Health without managed care. Clients are issued a ProviderOne Services card only. Their services are covered under the services card and should be presented to providers for payment. Clients under Fee-For-Service can see any provider that takes the services card.

Note: The following services are **always** covered by Apple Health without a managed care plan.

- Dental care
- Vision hardware (children only)
- Long-term care
- Inpatient psychiatric care for physician services

Visit hca.wa.gov/apple-health-without-managed-care for more information on Apple Health without a managed care plan.