

SSB 6430

Medicaid Suspension and Care Coordination

Overview

Substitute Senate Bill (SSB) 6430 directs the Health Care Authority (HCA) to suspend, rather than terminate, medical assistance benefits for persons who are incarcerated (also known as justice-involved individuals) or committed to a state hospital. The intent is to provide continuity of care for individuals upon re-entry into the community.

SSB 6430 also requires HCA and the Department of Social and Health Services (DSHS) to:

- Identify care coordination and clinical best practices for the development of training materials for behavioral health organizations, managed care organizations, and behavioral health providers.
- Request expenditure authority from the federal Centers for Medicare & Medicaid Services (CMS) to provide behavioral health services to those incarcerated.
- Request permission from CMS to allow the state to cover individuals participating in a work release setting or other partial confinement programs under the state Medicaid program.


Providing better transition services to justice-involved individuals and those residing in a state hospital is an important first step in improving their lives. Incarcerated individuals have disproportionately high rates of chronic health conditions, infectious disease, and behavioral health issues. Providing effective, equitable, and respectful care and services that are responsive to diverse cultural health beliefs, practices, preferred languages, and health literacy can help close the gap in health care outcomes.

Incarceration and commitments to a state hospital provide an opportunity to connect individuals with health coverage and engage them in treatment. This engagement may benefit them for the rest of their lives and hopefully prevent future institutionalization. Investing in health care and behavioral health treatment is one way to reduce the cycle of repeated criminal activity and crisis related interventions which may save communities money on both the justice system and healthcare while increasing public safety.

Background

CMS limits federal financial participation (FFP) for Washington Apple Health (Medicaid) coverage provided to individuals while residing in correctional institutions or an institution for mental diseases (IMD). IMD's are primarily engaged in the diagnosis, treatment, or care of individuals with mental diseases. Institutions in which FFP is limited includes state and federal prisons; city, county and tribal jails; juvenile rehabilitation facilities; the special commitment centers; and Eastern and Western State hospitals.

Specifically, Medicaid statute does not allow federal funding for justice-involved individuals of any age who are incarcerated or for patients 22-64 years of age residing in an IMD, such as our state hospitals. The only exception to this rule is Medicaid statute does allow federal funding for inpatient hospitalizations lasting longer than 24 hours. Individuals who are on parole, probation, or have been released to the community pending



trial, including under pre-trial supervision, are not considered inmates. Federal funding for Apple Health (Medicaid) is available for services provided to these individuals.

Update

On July 7, 2017, HCA implemented Medicaid suspension for city/county jails and the Department of Corrections (DOC). HCA uses a nightly interface with DOC to place individuals incarcerated in a state prison into a suspended status. A suspended status means that the individual's coverage is limited to inpatient hospital services lasting longer than 24 hours. To suspend coverage for individuals in city/county jails, HCA has partnered with Washington Association of Sheriffs and Police Chiefs (WASPC) to receive daily statewide booking data. Through the combined DOC and jail data sources, HCA receives approximately 28,000 files a day. On the first day of Go Live, HCA was able to place over 7,100 individuals into a suspended status and as of September 7th, 2017, 30,000 suspensions have occurred (this includes individuals who may have been suspended multiple times due to multiple incarceration segments).

Upon release from the correctional facility these individuals have their benefits automatically reinstated to full scope coverage. A new application is not required. Individuals who are not current Medicaid clients may apply for benefits at any time during their incarceration and they will automatically be placed into a suspended status.

HCA has worked through most technical challenges and will focus next on implementing suspension in the state hospitals, juvenile rehabilitation facilities and the Special Commitment Center. Additionally, HCA will create and implement best practice trainings to support care coordination and continue to gather guidance from CMS regarding care coordination services provided during incarceration.

Next Steps

HCA will work to:

- Develop procedures to handle situations such as medical furloughs, electronic home detention, work release and offline facilities.
- Determine tools to communicate incarceration status for care coordination purposes.
- Identify tools to communicate an inmate's coverage status and MCO plan with correctional institutions and the state hospitals.

For questions or additional information, please contact medicaidsuspension@hca.wa.gov or visit the Medicaid Suspension webpage on the Health Care Authority website at www.hca.wa.gov and entering "Medicaid Suspension" in the search field.

