

Welcome!

The learning series webinar will begin momentarily.



Your microphone will be muted while presenters are speaking.



Use the chat throughout the presentation to ask questions. We will get to them during the Q&A.



Please keep your video off during the presentation to avoid distractions.



The webinar is being recorded and will be posted on the HCA website within a week.

Reentry Initiative

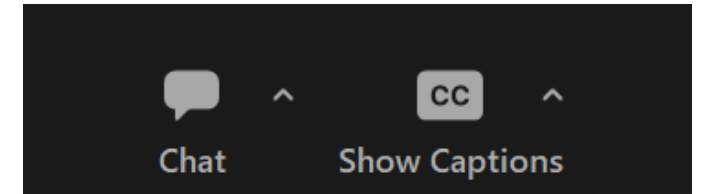
HCA Web Resources and Data Exchange Requirements

March 5, 2025

Welcome

- ▶ We're recording this webinar and have muted all attendees.
 - ▶ Turn on live captioning with the "Show Captions" button.

- ▶ There will be time at the end for Q&A.
 - ▶ Submit comments through the "Chat" function.
 - ▶ We will hold all questions until the Q&A portion.

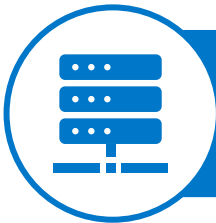


- ▶ HCA does not permit Artificial Intelligence (AI) note taking apps.
- ▶ Slide deck and webinar recording will be available at:
 - ▶ <https://www.hca.wa.gov/about-hca/programs-and-initiatives/medicaid-transformation-project-mtp/reentry-carceral-setting>

Webinar Objectives



Review staffing and governance requirements (15 mins)

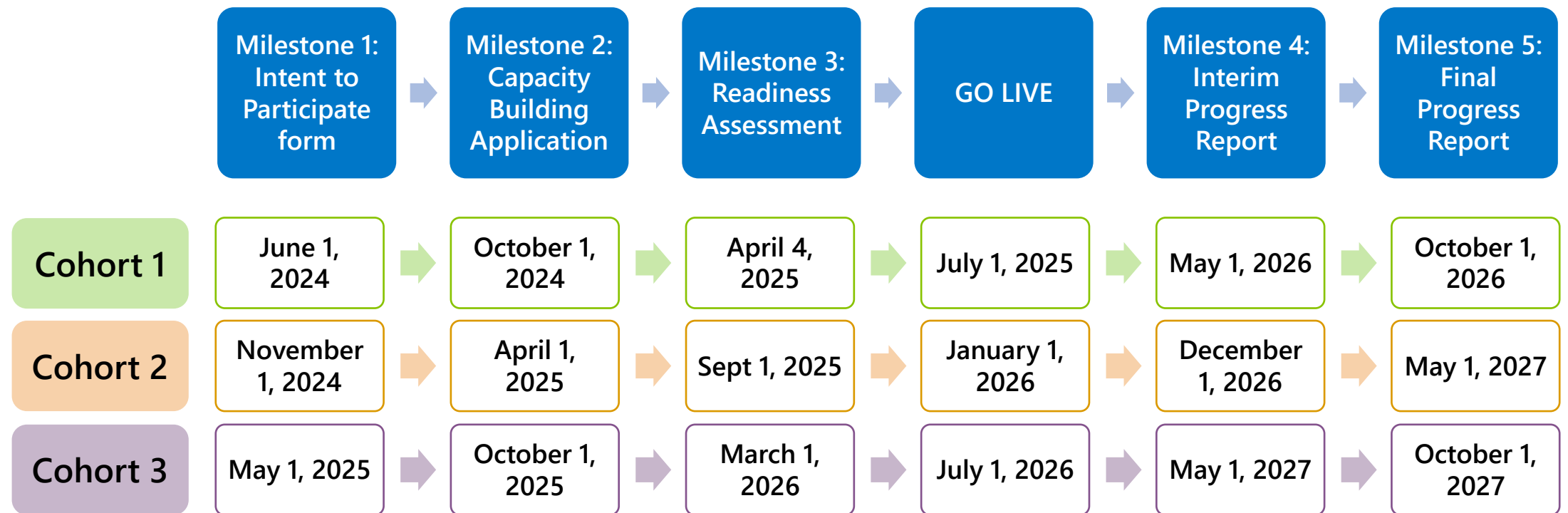


Review data exchange requirements (30 mins)



Questions and Answers (15 mins)

Reentry Initiative Milestones



Milestones 2 and 3

- ▶ **Milestone 2: Capacity Building Application (CBA):** Each attestation question in the CBA is a requirement for program participation.
 - ▶ **Milestone 3: Readiness Assessment:** To pass the Readiness Assessment, facilities will need to demonstrate – through attestations and written-response questions – how they achieved each requirement in the CBA.
 - ▶ Important: Facilities must pass the Readiness Assessment to go live.
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- ▶ The Reentry Initiative Policy and Operations Guide provides step-by-step instructions for facilities to meet program requirements.
 - ▶ This learning webinar series walks facilities through each requirement in the Reentry Initiative Policy and Operations Guide.
 - ▶ HCA will release the Reentry Initiative Policy and Operations Guide in sections over the next few months to correspond with each learning series webinar.

Learning Series Webinars and Milestone 2: CBA Requirements

Each webinar will cover a specific Milestone 2: CBA requirement.

Topic	CBA Sections and Questions
Provider enrollment	<ul style="list-style-type: none"> • CBA section 4: Provider enrollment and billing (question 1)
MCO contracting and credentialing	<ul style="list-style-type: none"> • CBA section 4: Provider enrollment and billing (questions 2 and 3)
Client eligibility and enrollment, Consolidated Appropriations Act (CAA), 2023, eligible juveniles	<ul style="list-style-type: none"> • CBA section 3: Apple Health (Medicaid) intake and release data, screening, application support, and release date notifications (questions 1–7, 9–12)
Benefit services delivery	<ul style="list-style-type: none"> • CBA section 5: Case management; CBA section 6: Support for medications; CBA section 7: Additional services – optional
No cost to individual, staffing and governance, and data exchange requirements	<ul style="list-style-type: none"> • CBA section 1: No cost to individuals (question 1) • CBA section 2: Staffing and governance structure (questions 1-2) • CBA section 3: Apple Health (Medicaid) intake and release data, screening, application support, and release date notifications (questions 1-2, 10) • CBA section 4: Provider enrollment and billing (question 5) • CBA section 5: Case management (questions 5, 9)
Billing and claiming	<ul style="list-style-type: none"> • CBA section 4: Provider enrollment and billing (questions 4 and 5)

CBA sections referenced today

- ▶ **Section 1: No Cost to Individuals**
 - ▶ #1: Facility provides reentry services and activities at no cost to the individual or their health care provider(s).
- ▶ **Section 2: Staffing and Governance Structure**
 - ▶ #1: Facility establishes a staffing structure to support each readiness requirement.
 - ▶ #2: Facility has a defined governance structure for decision-making and coordinating with key partners.
- ▶ ***Section 3: Apple Health (Medicaid) Intake and Release Data, Screening, Application Support and Release Date Notification**
 - ▶ #1: Facility screens individuals entering their facility for Apple Health (Medicaid) eligibility within 24 hours of intake for individuals (note: facility not required to screen individuals if they are in a facility for fewer than 24 hours) For prisons and JRA screening must occur 90 days prior to release.
 - ▶ #2: Facility submits an application for Apple Health (Medicaid) within two business days of an individual's intake, based on a client's ability and willingness to provide appropriate information.
 - ▶ #10: Facility share release date information with HCA.
- ▶ ***Section 4: Provider Enrollment and Billing**
 - ▶ #5: Facility providers can bill HCA and MCOs for reentry services.
- ▶ ***Section 5: Case Management**
 - ▶ #5: Facility works with the MCO to share relevant information with the case manager (e.g., carceral health information).
 - ▶ #9: Facility provides a warm handoff for individuals to a post-release case manager prior to release.

***Data exchange related requirements**

CBA: Section 1 Section 2

No cost to individuals

CF provides reentry services and activities* at no cost to the individual or their health care provider(s)



Reentry services and activities include:

- Verifying Apple Health (Medicaid) eligibility
- Support in applying for Apple Health (Medicaid) coverage by submitting an Apple Health application
- Provision and receipt of medical care, prescription drugs, case management, labs and radiology, medical equipment and supplies
- Communication in any form (e.g., emails, phone calls, mail, copies of medical records)



Providers include:

- Carceral facility and community-based providers, including physical health, behavioral health, and health-related social needs providers such as community health workers and recovery coaches
- Accountable Communities of Health (ACHs)
- Managed care organizations (MCOs)

Staffing and governance structure

Participating carceral facilities must establish a staffing and governance structure to support planning and decision-making for implementation of the Reentry Initiative.



Staffing Structure

- Facilities should define key roles that are needed to support each requirement for the Reentry Initiative, such as:
- Overall management and oversight
- Apple Health eligibility and enrollment
- Reentry services delivery
- Facilities must submit supplemental documentation to HCA through the Readiness Assessment to further describe their staffing structures (e.g., organizational charts).



Governance

- Facilities must define a governance structure to facilitate decision-making and engage implementing partners, such as internal and external providers and pharmacies, MCOs, Community Hubs, Native Hub, and the Third-Party Administrator (TPA).
- Facilities may submit governance diagrams, charters, and other supplemental documentation in their Readiness Assessment to further describe the governance structure.

Data Exchange Requirements

Key processes

Successful implementation of the Reentry Initiative requires information exchange between partners, including carceral facilities, HCA, MCOs, and pre- and post-release service providers.

- 1 • Verify Apple Health (Medicaid) eligibility and enrollment status
- 2 • Submit Apple Health (Medicaid) applications
- 3 • Provide booking and release information
- 4 • Share carceral health history with rTCM providers
- 5 • Share Reentry Care Plans with post-release providers
- 6 • Submit claims for Reentry Initiative benefit services

CBA: Section 3

Questions 1-2, 10

1) Verify Apple Health (Medicaid) eligibility and enrollment status

Facilities must screen individuals entering their facility for Apple Health (Medicaid) eligibility within 24 hours of intake.

- Facilities are encouraged, but not required, to screen individuals if they are in a facility for less than 24 hours.
- For prisons and JR facilities, screening must occur 90 days prior to estimated release date.

Facilities have two pathways to access ProviderOne and verify an individual's Apple Health (Medicaid) eligibility and managed care enrollment and fee-for-service (FFS) status:

ProviderOne

Apple Health (Medicaid) billers or providers have direct access into ProviderOne by using the ProviderOne Provider Portal

OneHealthPort (OHP)

OHP is a secure portal where Apple Health (Medicaid) billers or providers can access ProviderOne



Individual consent is not needed to check Apple Health (Medicaid) eligibility and managed care enrollment or FFS status.

2) Submit Apple Health (Medicaid) applications


*Reminder:
Webinar recording
on application
processes is
available [online](#)*

Carceral facility staff must provide support to individuals who voluntarily seek to submit an Apple Health (Medicaid) application.

Apple Health (Medicaid) Application Pathways

- ▶ For the purposes of eligibility and processing applications, Apple Health (Medicaid) is divided into two application pathways.
- ▶ Facilities need to determine which Apple Health (Medicaid) pathway to use for the Apple Health application using the below eligibility criteria.

Pathway	Eligible Populations	Application Modalities
Modified Adjusted Gross Income (MAGI)	<ul style="list-style-type: none"> • Adults ages 19 to 64 years old • Children under 18 • Parents or caretakers applying on behalf of a child • Pregnant individuals or individuals applying for someone who is pregnant 	<ul style="list-style-type: none"> • Online: WAHealthplanfinder.org • Mobile app: WAPlanfinder app • Phone: 1-855-923-4633. • Paper: Application for health care coverage (18-001P)
Apple Health Classic	<ul style="list-style-type: none"> • Adults ages 65 or older • Individuals who are eligible for Medicare • Individuals who are blind or disabled • Individuals who need long-term services and supports 	<ul style="list-style-type: none"> • Online: Go to WashingtonConnection.org • Phone: 1-877-501-2233 • Paper: Application for aged, blind, disabled/long-term care coverage (HCA 18-005)


 **Individual consent must be secured to submit an Apple Health application on an individual's behalf.**

CBA: Section 5 Questions 5 & 9

4) Share carceral health history with rTCM providers

Carceral facilities may share information on the individual's medical history while incarcerated with rTCM provider to inform ongoing case management and treatment.

Purpose	Support initial and ongoing rTCM and treatment by providing access to prior service needs and history, as available
Scope of Information	Needs assessments, carceral health medical history, continuity of care documents
Sender	Carceral health providers and any contracted providers (e.g., community-based providers), where available
Receiver	rTCM provider
Timing	At least 90 days prior to estimated release date or upon assignment of rTCM provider
Transmission Modality	Electronic health records, other forms of secure transmission (e.g., secure email), or paper-based transmission

 Individual consent may be needed to disclose carceral health history, depending on the type of information and the recipient.

Deeper Dive: Securing Individual Consent

- ▶ Facilitating rTCM will include sharing of private information within and outside of the carceral facility.
- ▶ As such, all participating facilities must:
 - ▶ Secure individual consent to disclose private information, such as substance use disorder information;
 - ▶ Track when individuals do or do not provide consent and ensure information is shared according to the individual's consent; and,
 - ▶ Comply with all other applicable state and federal privacy rules, such as HIPAA and 42 CFR Part 2.
- ▶ Facilities may leverage existing or new consent processes, or leverage the HCA-provided consent form template.


The image shows a consent form from the Washington State Health Care Authority. The title is "Authorization and Information Sharing Consent - Reentry Care Management". It includes a section for "Information sharing consent" with a numbered header "1". The form contains several paragraphs of text explaining the purpose of the consent and the rights of the individual. There are several lines for the individual to fill in, including their name, the provider/organization name, and the date of consent. There are also checkboxes for "Mental health" and "HIV/AIDS and sexually transmitted disease (STD) test results, diagnosis, or treatment". A section for "alcohol or drug treatment" is also present. At the bottom, there are fields for the beneficiary's name, date of birth, signature, date, and relationship to the beneficiary. There is also a section for listing providers/partners.

Example HCA-provided individual consent form

5) Share Reentry Care Plans with post-release providers

As part of the reentry warm handoff process, rTCM providers must share the reentry care plan and related information with post-release rTCM providers, providers and MCOs.

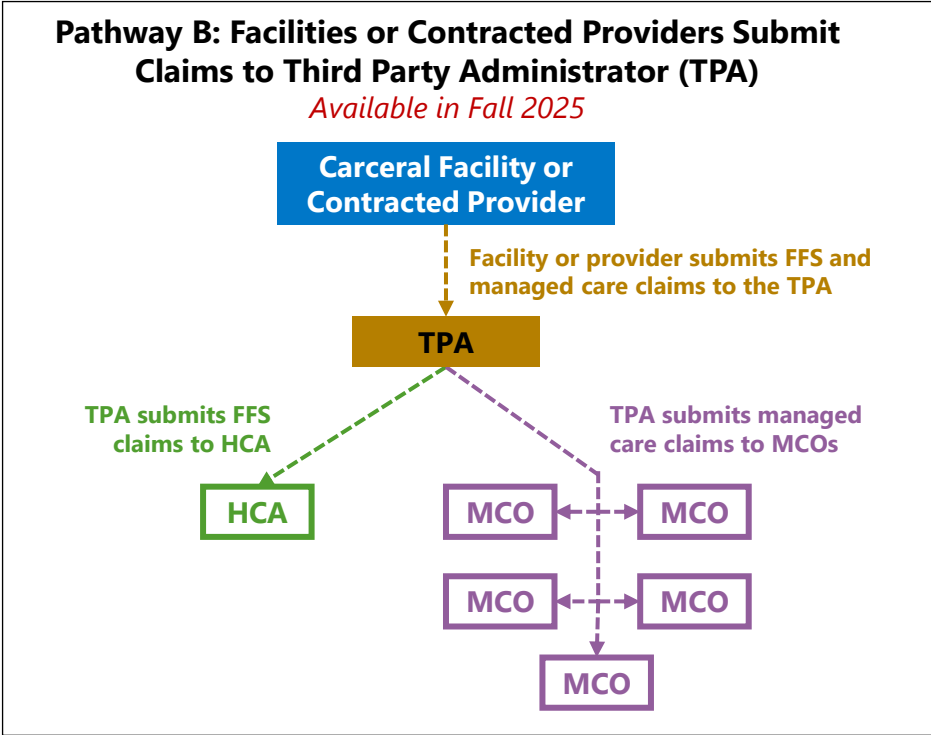
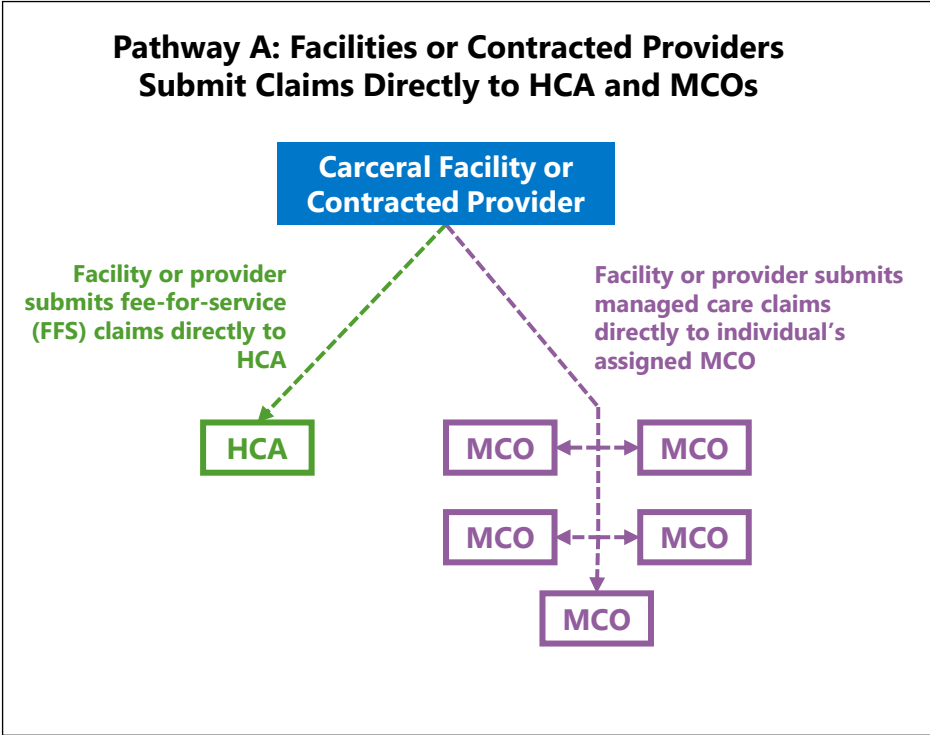
Purpose	Support care continuity as the individual transitions from a carceral setting to the community
Scope of Information	Reentry care plan, needs assessment(s), post-release appointments, outstanding needs
Sender	rTCM provider
Receiver	Post-release rTCM provider, post-release service providers (e.g., primary care provider), individual's MCO
Timing	Within 14 days prior to release, if release date known, and no later than 7 calendar days after release
Transmission Modality	Secure electronic transmission (e.g., electronic medical records, secure email) or paper-based transmission

 Individual consent must be secured to disclose reentry care plans.

CBA: Section 4 Question 5

6) Submit claims for Reentry Initiative benefit services

All rTCM providers and service providers must submit claims for eligible services to be reimbursed by Apple Health (Medicaid) through one of the following pathways:



In the near-term, HCA expects facilities and providers to submit paper-based claims, with a plan to transition to electronic claims submission over time (e.g., electronic medical record billing module). Providers that already bill Apple Health (Medicaid) directly may choose not to use the TPA.

Questions & Answers

Reentry Initiative Policy and Operations Guide

Topic	Release date
Introduction	Published
Provider enrollment	Published
Client eligibility and enrollment, Consolidated Appropriations Act (CAA), 2023, eligible juveniles	March 2025
Reentry Initiative benefits	March 2025
Billing and Claiming	March 2025
HCA Web Resources and Data Exchange Requirements	Section TBD
Roles and Responsibilities	March 2025

[Reentry Initiative Policy and Operations Guide link](#)

Learning series webinars

*Your facility's
Reentry Initiative
lead should
attend all
webinars.*



Provider enrollment

Wednesday, January 8
at 10:00 a.m.

(providers, leadership,
administrative staff)



MCO contracting and credentialing

Wednesday, January 15
at 10:00 a.m.

(leadership, admin staff)



Client eligibility and enrollment

Wednesday, January 22
at 10:00 a.m.

(intake screening staff,
community workers, MCOs)



Pre-release services delivery (part 1)

Wednesday, February 5
at 10:00 a.m.

(clinical staff, community
providers, intake screening staff)



Pre-release services delivery (part 2)

Wednesday, February 19
at 10:00 a.m.

(clinical staff, community
providers, intake screening staff)



HCA web resources and data requirements

Wednesday, March 5
at 1:00 p.m.

(leadership, admin staff)



Readiness Assessment intro and walk-through

Wednesday, March 12
at 10:00 a.m.

(leadership, admin, clinical staff)



Additional topics, open forum, Q&A

Wednesday, March 19
at 10:00 a.m.

(leadership, admin staff)