



Medicaid Suspension and Care Coordination
Substitute Senate Bill 6430
Executive Summary

The Intent

To provide continuity of care for recipients of Apple Health (Medicaid) during periods of incarceration or commitments in a state hospital by:



Current Policy

Today when an individual is incarcerated or committed in a state hospital for over 30 days their coverage is ended

If an inpatient hospitalization lasting over 24 hours occurs the confinement facility can apply to have that inpatient stay covered by Apple Health (Medicaid)

What does it mean to Suspend?

In the future incarceration or commitment in a state hospital will not affect eligibility but will determine the scope of coverage:

Coverage will not end but, will be placed into a coverage category in the Medicaid payment system which will only cover inpatient hospitalizations lasting over 24 hours

When the individual is released full scope coverage is reinstated automatically without the need for action by the individual

Why Suspend Rather than Terminate?

- ✓ Persons with mental illness and substance use disorders need seamless access to treatment networks, services and health care coverage upon release.
- ✓ Access to care increases the chance of successful re-entry and is critical to reduce recidivism and reduce cost associated with:

Relapse

Decompensation

Crisis Care

- ✓ Suspension allows for quicker and easier reinstatement of coverage resulting in reduced work load and fewer incidences of uncompensated care.

The Rationale

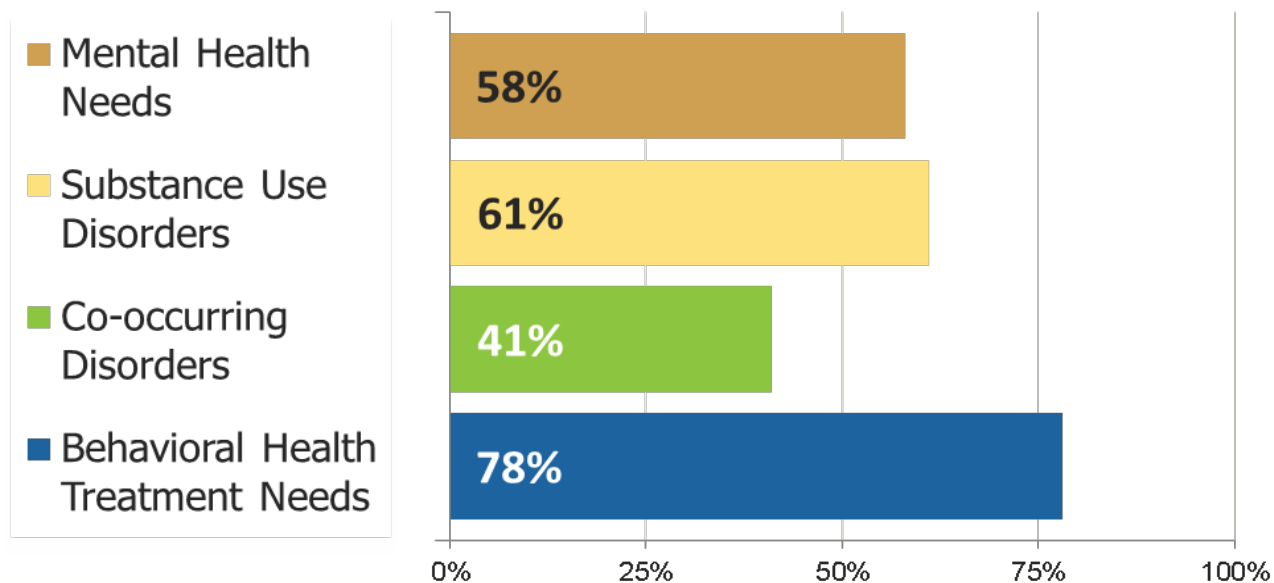
Characteristics of WA Adult Jail Inmates:

- A study of WA adult jail inmates followed those who were booked in 2013. Looking retrospectively and following this population into the future the study found that:
 - ✓ **86% of those had received DSHS or HCA services between 1999-2015 (not just medical)**
 - ✓ **In 2013, 31% were actively enrolled in Medicaid, this number expanded to 58% by 2014 due to the implementation of the ACA and continued growth is expected**

The Rationale

Characteristics of WA Adult Jail Inmates:

Medicaid Clients



Source: DSHS, RDA Behavioral Health Needs of Jail Inmates in Washington State, January 2016

The Scope

Setting	# of Facilities	Average Daily Population
WA DOC*	12	18,299
WA City/County Jails	59	12,014
Detention Centers	32	373
Special Commitment Center	3	280
Juvenile Rehabilitation Facilities	3	301
Institutions for Mental Diseases	4	Western State: 800 beds Eastern State: 287 beds Maple Lane: 30 beds Yakima: 24 beds
Tribal Jails	8	Varies by facility

DOC * not including work release

Policy Proposals

Suspension of both MAGI and classic Medicaid in all populations (Jails, DOC, JR, state hospitals, detention centers and SCC)

Suspend immediately and indefinitely Medicaid will be suspended upon incarceration and coverage will not terminate regardless of the incarceration period, unless other eligibility factors change

Proposed Implementation Plan

Spring 2016 – Winter 2017

Identify best practices for behavioral health, outreach and enrollment

Beginning July 2017, justice involved individuals will be able to apply for suspended Medicaid coverage or have their current coverage suspended

Deliver best practices training to support enrollment & care coordination

Example of the Suspension Process

An Individual is taken
into custody 6:00 p.m.
Friday night



Saturday at 12:00 a.m.
HCA receives JBRS
booking data and
Medicaid Coverage is
suspended



Sunday at 12:00 a.m.
HCA receives JBRS
booking data and
Medicaid coverage is
reinstated



Saturday night at 5:00
p.m. the individual is
released

Get Involved

Outreach & Training Workgroup

- Participation needed – email Medicaidsuspension@hca.wa.gov to get involved.

Questions?

Email: medicaidsuspension@hca.wa.gov

