

# Washington HCA Leverages Real-time Incarceration Data to Improve Continuity of Care



## Challenge

Ensuring continuity of care for justice-involved persons was difficult and time consuming.



## Solution

Access to real-time, national booking information allows the Agency to automatically suspend benefits when a person is incarcerated and reinstate them when the person is released.



## Benefit

Access to the right data helped create a faster, more efficient verification process by lowering the number of manual verifications performed resulting in greater operational efficiency.

## Background

The Washington State Health Care Authority ("Washington HCA" or the "Agency") oversees healthcare benefits for more than 2 million Washingtonians. One of the Agency's primary programs is "Apple Health," which administers all the state's medical assistance programs, including Medicaid, the Children's Health Insurance Plan (CHIP), and some smaller state-funded programs.

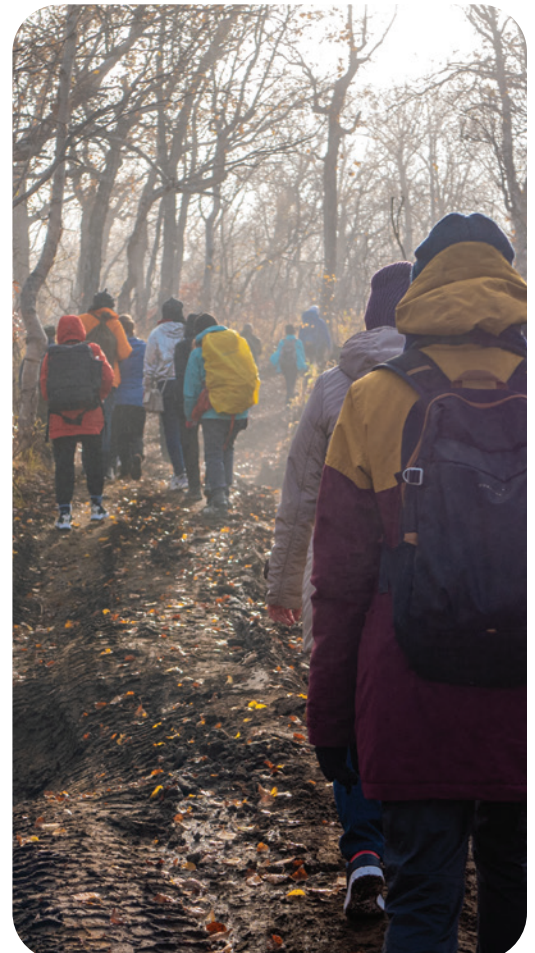
In 2013, Washington's governor signed a bill expanding Medicaid under the provisions of the Affordable Care Act (ACA). Over the next five years, Medicaid enrollment grew by 58%. As of January 2019, 1.8 million individuals participated in Apple Health.

Like other Medicaid expansion states, initial eligibility for Medicaid is determined by a modified adjusted gross income (MAGI) budgeting system. The MAGI eligibility engine compares an individual's household size versus its income to determine if their household falls below a certain set eligibility threshold. In addition to MAGI, there are other factors (e.g., incarceration status) that help determine a person's Medicaid eligibility.

Washington HCA employs a staff of approximately 1100. Of those employees, 220 are tasked with managing the state's eligibility system and processes.

## Program Challenge

In attempting to provide quality healthcare while remaining fiscally responsible, Washington HCA faced many of the same problems shared by Medicaid agencies across the United States.



## The Incarcerated Population

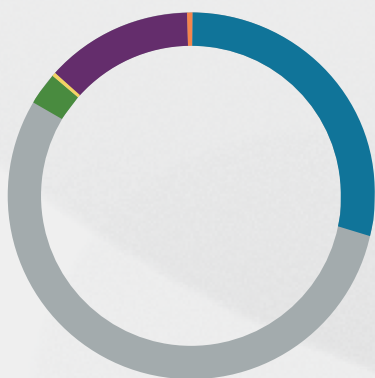
Justice-involved persons experience a greater percentage of health issues than the general population.

**3x** the normal rate of mental illness

**4x** the rate of substance abuse

**4-9x** the rate of serious infectious diseases

Nationwide, offenders are widely dispersed among facilities, making manual monitoring difficult.



- 59% State Prisons
- 27% Local Jails
- 10% Federal Prisons
- 2% Youth Facilities
- 1.5% Immigration Detention
- .5% Territorial Prisons

Nationwide, incarcerated individuals are not eligible for Medicaid. Each detention facility is responsible for administering healthcare to its supervised population. However, incarcerated individuals tend to have income levels that qualify them for medical assistance once they are released from prison. In Medicaid expansion states, this dichotomy puts an operational strain on the Medicaid agencies who are responsible for providing healthcare to a population that frequently cycles in and out of the criminal justice system. In Washington, close to 30% of former prisoners recidivate within 3 years of release, and around 10% are rearrested within the same year. For states without a data-driven solution to this challenge, the financial ramifications are severe: monthly overpayments to tens of thousands of ineligible, incarcerated individuals.

Additionally, the incarcerated population suffers from a higher percentage of health issues than the general population. As compared to the average American, justice-involved persons suffer at 3x the rate of mental illness, 4x the rate of substance abuse disorders, and up to 9x the rate of serious infectious diseases. There is a critical need for continuity of care among this population to support successful community re-entry and positive health outcomes.

Washington HCA had been working to proactively address Medicaid suspension among their incarcerated population for nearly 10 years. Prior to the expansion of Medicaid under the ACA, two separate task forces each attempted to identify and implement a solution that would better incorporate data from the state's prison and jail system into the Agency's eligibility determination engine.

One proposed plan failed to gain traction as it would have added administrative burden to staff at the roughly 50 state prison and jail facilities statewide. This system would have required jail and prison staff to input booking data into a separate, state-built system that consolidated the data into one feed linked to Washington HCA's eligibility.

The need for a solution intensified after the signing of new legislation in 2016. Substitute Senate Bill (SSB) 6430 directed the Agency to "suspend, rather than terminate, medical assistance benefits for persons who are incarcerated." The bill received bipartisan, unanimous support in both the state House and Senate. SSB 6430 aimed to improve continuity of care for justice-involved individuals upon their release from incarceration.

The Agency needed a reliable, easy-to-use method for incorporating statewide incarceration data into their Medicaid eligibility and enrollment process.

## The TotalVerify™ Data Hub from Equifax

While partnering with the Washington Association of Sheriffs and Police Chiefs (WASPC), HCA learned of the database that manages the jail reporting information from all the city/county jails within Washington. HCA and WASPC partnered to leverage the existing framework and data contained in the TotalVerify data hub.

The TotalVerify data hub contains the nation's most comprehensive and timely incarceration data network, interfacing with over 2,500 jails and DOC facilities across the nation.

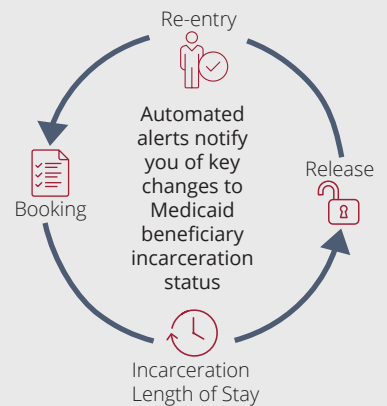
Rather than requiring jail and prison staff to input data into an additional system, TotalVerify directly connects with each facility's jail management system to pull the most recent booking data as frequently as every 15 minutes.

Our Incarceration Intelligence solution gave Washington HCA access to accurate, comprehensive incarceration data that could influence the eligibility suspension process for newly incarcerated individuals and streamline access to healthcare assistance when those individuals were released.

## The Solution

Key staff members at Washington HCA worked with a dedicated team to define the criteria and scope of services necessary to facilitate suspension. The result meant expedited re-enrollment into Medicaid, expedited information to health care entities for recently released individuals, and consistent termination of full scope Medicaid coverage. The program launched in July 2017 with 38 of the state's 39 counties. Each day, the TotalVerify data hub provides Washington HCA with new, up-to-date incarceration information for the entire state. The Agency uses the information within their Medicaid Management Information System (MMIS), directly adjusting each relevant individual's benefit package based on a change in their incarceration status. A detailed booking record ensures accuracy, and the daily batch file ensures timeliness and compliance with SSB 6430.

## Continuous Monitoring of Medicaid Beneficiaries



## The Results

Incarceration Intelligence has helped Washington HCA accomplish a critical goal of supporting a healthier population.

- **Washington HCA has implemented a solution that helps improve continuity of care for individuals cycling in and out of the justice system.**
- Incarceration Intelligence is one tool in the Agency's broader vision of providing **better care coordination among behavioral and healthcare providers.**

With an efficient, effective solution to Medicaid suspension and enrollment in place, Washington HCA can **continue to look for new innovations** that improve the quality of life for millions of Washingtonians.

