



**Department
of Health**

Medicaid
Redesign Team

Health Homes and Criminal Justice

April 28, 2015

Common Themes for Pilot Sites

Each site is working with criminal justice partners to identify and engage formerly incarcerated individuals.

- Sites are communicating with the criminal justice Health Home system through a mix of informal and formal partnerships.
- Sites in NYC are working with Transitional Health Services at Rikers.
- Multiple sites are working with Division of Parole to identify candidates.
- Some sites are working with drug and mental health courts.
- One site has their County Sheriff and County DA serving on the board of the lead CJHH agency, creating buy-in and collaboration.
- Two sites noted leveraging relationships that already existed between the community-based agencies in their network and the criminal justice system.

Sites will be surveyed to get an update on progress to date.



Data Sharing

Ability to share data is critical. Medicaid data is subject to strict federal and State protections; criminal justice agencies have only been allowed to have limited access to data on Medicaid recipients.

Use cases from parole and probation were presented to CMS to pursue a more liberal interpretation of Medicaid Confidential Data (MCD) restrictions- CMS initial reaction was positive and expanded agreements will be pursued to:

- Allow greater sharing of data between DOCCS, DCJS, and DOH/OHIP for quality assurance and population management;
- Drive data sharing down to the provider/community level, e.g., share Health Home assignment information with parole and probation.

Proposed Metrics

- Primary

- Linkage to Care
- Retention/Maintenance in Care

- Secondary:

- Clinical markers (change in HIV+ CD4 & VL, for DM, A1c)
- Access to treatment:
- Self-reported Wellness:
- Emergency Department visits
- Homeless shelter stays

- Tertiary:

- Recidivism: Number arrested and incarcerated on new charges within 12 months of release
- Time in correctional facility: number of days incarcerated in the year prior to index incarceration compared to number of days incarceration in the year following release from index incarceration

Resources-DSRIP

- Delivery System Reform Incentive Program (DSRIP): Part of the Medicaid waiver that will allow the State to reinvest \$8 billion in federal MRT savings to achieve comprehensive reform of the healthcare safety net system.
- Safety net providers have formed Performing Provider Systems (PPS); conducted Community Health Assessments to identify the needs in their communities including the CJ population; and have selected projects based on these needs; incentive payments contingent on meeting established milestones.
- These reforms will benefit the criminal justice involved population who are widely served by the safety net system.

Resources-Health Home Development Funds

- Health Home Development Funds: \$190.6 million of the MRT waiver has been allocated to Health Home development in four key areas:
 - Workforce Training and Retraining
 - Member Engagement and Health Home Promotion
 - Clinical Connectivity and HIT Implementation
 - Joint Governance Technical Assistance
- Funds would be distributed via a rate add-on; guidance around approved uses of the funds will include improved linkages with criminal justice.

Resources-2015-2016 Budget

- The 2015-2016 budget included approval for 5 million dollars in grants to more fully develop linkages between Health Homes and the criminal justice system and leverage data connections.
- Stakeholders provided input into the types of projects that would facilitate connections between Health Homes and State and local correctional facilities. Suggestions included improving linkages to community resources such as Alternatives to Incarceration (ATI).
- The budget also included approval for 1 million dollars in grants for “certified application counselors and assistors” to facilitate enrollment of high risk populations, including but not limited to those with mental health conditions/SUDS, recently discharged or pending release from state and local correctional facilities.