

CalAIM Justice Involved Pre-Release Medi-Cal Webinar Caption Materials

November 15, 2022

- [Julian] Hello and welcome. My name is Julian and I'll be in the background answering any Zoom technical questions. If you experience difficulties during this session, please type your question into the Q&A field, which is located on the Zoom panel at the bottom of your screen. We encourage you to submit written questions at any time using the Q&A. Finally, during today's event, live close captioning will be available in English and Spanish. You can find the link in the chat field. With that, I'd like to introduce Sandie Williams, chief of Medi-Cal Eligibility at Department of Healthcare Services. Sandie, you now have the floor.

- Hello. Thank you, Julian. Again, my name is Sandra or Sandie Williams. I'm chief of Medi-Cal Eligibility here at the Department of Healthcare Services and my team is overseeing the launch or implementation of the CalAIM Justice-Involved Initiative specific to the pre-release Medi-Cal application mandate. I'm gonna go over several bits of information that were recently published in the ACWDL 22-27. Looking forward to hearing questions and answering those. So a part of the presentation will also be the unlimited suspension for individuals who are incarcerated. We will have a presenter speak to PATH Round 2 funding opportunity. We'll break for a question and answer and then we'll go over some next steps as, at the conclusion of our presentation. So first, we want to make, and you'll notice with DHCS presentation, we do speak about our health navigators, excuse me, DHCS Coverage Ambassadors Program and Initiative. So as part of the public health emergency unwinding the, well, the COVID-19 Public Health Emergency will end soon and millions of Medi-Cal beneficiaries could lose their coverage. The Medi-Cal continuous coverage requirement necessitates a coordinated phased communication campaign to reach beneficiaries with messages across multiple channels using trusted partners that we call DHCS Coverage Ambassadors. As we in California plan to resume normal Medi-Cal eligibility operations, beneficiaries are going to need to know what to expect and what they need to do to keep their health coverage. Most beneficiaries will either remain eligible for Medi-Cal or qualify for tax subsidies to allow them to buy affordable Covered California coverage. Now, DHCS has engaged community partners to serve as DHCS Coverage Ambassadors to deliver important messages to Medi-Cal beneficiaries about maintaining Medi-Cal coverage after the COVID-19 Public Health Emergency ends. The DHCS Coverage Ambassadors will be trusted messengers made up of a diverse, made up of diverse organizations that can reach beneficiaries in both culturally and linguistically appropriate ways. Additionally, the DHCS Coverage Ambassadors will connect Medi-Cal beneficiaries at the local level with targeted and impactful communication. Coverage Ambassadors can include local

county offices, health navigators, managed care plans, community organizations, advocates, stakeholders, providers, clinics, healthcare facilities, legislative offices and other state agencies. We encourage anyone who is interested in being a DHCS Coverage Ambassador to access or request to be added through the DHCS Coverage Ambassador webpage. There is a toolkit for folks to download and a mailing list to request to be a part of and you'll receive updates periodically to help with this effort. Next slide. So we are, the Public Health Emergency Unwind Communication and Outreach Campaign is currently rolling out in two phases to prioritize and sequence strategies, tactics, and messages across the state to prepare for the resumption of normal eligibility. In phase one, which has already begun, is to encourage beneficiaries to provide updated contact information such as name, address, phone number, and email address in order for us and for counties to be able to contact beneficiaries with important information about keeping their Medi-Cal. As I explained, this phase is underway. We know that some folks during the public health emergency have moved or they've changed their phone number or email address. So connecting with them and making sure they receive the paperwork and the communication they need, keep their Medi-Cal coverage active is critically important. Phase two is designed to do just that, encourage beneficiaries to continue to update their contact information, report any changes in circumstance, as well as check for any updated upcoming renewal packets. Phase two will begin 60 days prior to the end of the public health emergency and a phase two outreach toolkit will be released in the future. We have not received word yet that the public health emergency will be ending. We did our last extension, carried us to January 2023. However, CMS did commit to letting agencies, states know 60 days ahead of the end of the public health emergency and we did not receive that notification last week. So we know that the public health emergency will, at the very least be extended beyond January. We don't have a date yet and we will share with our partners once we have that date communicated. All right, now we will move over to our CalAIM Justice-Involved Initiative, the presentation regarding the pre-release application mandate. So California is taking significant steps in to address poor health outcomes among our justice-involved individuals. Key to that is establishing Medi-Cal enrollment processes, providing targeted Medi-Cal services to individuals while they're incarcerated immediately prior to their release and ensuring continuity of coverage and services after incarceration as part of the reentry planning. Today's focus and our presentation today is focused on pre-release Medi-Cal application processes. Next slide. Just wanted to give you a little bit of an update on our CMS negotiations on the go-live date for Pre-Release Services. DHCS continues to work with CMS on the Pre-Release Services go-live date. However, keep in mind and it's important to note, the go-live of the pre-release Medi-Cal application mandate does not depend on CMS approval and will go-live January 1st, 2023. Now, due to the delay in approval of our 1115 Waiver and the complexity of the policy proposal for Pre-Release Services, the originally planned launch date of the CalAIM Pre-Release Services of July 1st, 2023 is not viable and we are reevaluating the effective date for the 90-day Pre-Release Services, behavioral health linkages and ECM for justice-involved populations. When we receive more

information, we will share that as far as updated timelines for the launch of the Pre-Release Services and associated PATH funding that will be available to support planning and implementation of that section. So more to come. Next slide. All right, we're gonna dive right into the pre-release Medi-Cal application mandate. California statute implemented when CalAIM was enacted, mandates all counties to implement pre-release Medi-Cal enrollment processes by January 1st, 2023. Establishing Medi-Cal enrollment processes within county jails and youth correctional facilities is part of the State's vision to enhance the Medi-Cal healthcare delivery system for justice-involved populations. The rationale behind this is that implementation of pre-release Medi-Cal enrollment processes will help ensure Medi-Cal coverage upon reentry into the community for these individuals to facilitate access to needed Medi-Cal covered services. Establishing a pre-release application process is foundational to providing Medi-Cal services in the 90 days pre-release. And we talk about the effective date of the pre-release Medi-Cal application process mandate being January 1st, 2023. Next slide. The pre-release Medi-Cal enrollment process, three step process just to condense it a bit. We'll talk about it in quite a bit more detail as the presentation moves forward. So pre-release Medi-Cal enrollment process includes screening, application submission and processing, and then the eligibility determination, which is accomplished through the county social services department. It's important to note there is no one size fits all. I would venture to say that every county will have a unique process in place, but these three pillars will, should be part of every county correctional facility and county social services departments process. Counties and excuse me, county correctional facilities and social services departments should collaborate to develop a process that works for them. DHCS is not, is not telling entities how they should operationalize this. We are here to guide folks, provide TA, technical assistance. We're here to help connect you with other counties, maybe similarly situated that have very successful processes in place, anything that might help counties, whether they don't have a process in place today to actually build one or for counties who have a process in place, but they want to expand upon that. DHCS is here to help counties either implement or enhance a Medi-Cal pre-release application process. Next slide. So counties can leverage and build upon an existing pre-release application process. I think that this is important to note and we actually, we published ACWDL 22-27, it was published last Thursday, November 10th. And we go into, I think we've actually bolded a particular portion of this ACWDL because we felt it was important for entities to understand that if the county social services department and the county correctional facility have existing pre-release application processes that meet the requirements of the CalAIM pre-release Medi-Cal application mandate, those processes can be leveraged and built upon if necessary to comply with this mandate. It is not necessary for you to have a, you know, a wildly complicated and intricate process in place today. There are certainly some best practices that DHCS has gleaned from other counties in so far as what they are doing in this space, but we have set forth some minimums and that minimum would be that the county social services department in collaboration with the correctional, county correctional facilities have a process in place to take pre-release applications. Ideally, it

would be at or around the time of booking, but if that is not the process you have in place today, that's okay. That's something that you can build upon. So we do, there are a couple of points we recommend that counties establish dedicated points of contact to support the initial planning and ongoing elaboration, establish a secure form of communication between the two entities to transmit and receive information between the county social services department and the county correctional facility. This can be encrypted email or some other form of secure communication. Just have something secure in place to ensure that our, the inmate information is exchanged effectively, expeditiously, and protects their privacy. There are some examples I think we have drawn from the strategic, I believe there was a publication in the previous slide, strategies for conducting pre-release Medi-Cal enrollment in county jails. We do encourage and we did put a hyperlink in the ACWDL to point folks to counties who have some, establish some best practices, some examples of those. Some counties contract with a community-based organization to enroll eligible inmates. Some county correctional facilities contract with a third party vendor to take pre-release Medi-Cal applications. Some counties are able to enroll individuals through just close collaboration between the county social services department and the correctional facility. In some of those instances, the county correctional facility provides a roster of individuals that are about to be released to the county. And the county identifies individuals from that list who are not enrolled in Medi-Cal and they have specific workers or community-based organization or rehabilitation officers who help take the Medi-Cal application and forward those onto the county for processing. One county correctional facility actually has trained their staff to complete and submit Medi-Cal applications to the county. So there are a variety of ways to accomplish this. We say there's not one size fits all, but whatever works operationally within your county due to its size or its operational makeup within the correctional facility, we encourage folks to explore those opportunities to expand or again implement a process. Now DHCS, we understand that this is a huge undertaking and there is workload involved. So we are looking at opportunities to automate certain processes. We are collaborating internally and with our county Statewide Automated Welfare System. We're also collaborating with our county partners to just determine the feasibility and timeline for automating some of these processes within SAWS and or MEDS. More to come on that as we do more research here. Counties can request technical assistance from DHCS. I think I've hit that point home numerous times. If you're experiencing challenges establishing a pre-release Medi-Cal application process or you're experiencing difficulties in collaborating with you know, one entity or another, please don't hesitate to contact DHCS for assistance. We have our CalAimJusticePreReleaseApps@dhcs.ca.gov. That is an email box that is monitored closely. Please do send any and all questions that you have, requests for TA, you can send through this email box. Now, there is a requirement as part of this pre-release application mandate that within 30 days of the release of ACWDL 22-27, so we released it November 10th, so by December 10th we are asking county correctional facilities and county social services departments to provide the name, address and phone number and fax number and email address of the contact

person and or their designated backup that you've selected to be responsible for the CalAIM Mandatory Pre-release Medi-Cal application process. And we ask that you submit that contact information to the CalAIMJusticePreReleaseApp inbox that is here on your slide here. Finally, wanted to, we did receive feedback from Cal Sheriffs' and CPOC and CWDA on the ACWDL and at a high level wanted to let folks know we are exploring the availability of Medicaid administrative funding for correctional facility activities relating to assistance with application completion and submission to county social services departments and it will provide more information about whether this can be possible soon. So more to come on that. Next slide. Now we're gonna go over some operational requirements. These are spelled out in, gosh, pages, the ACWDL pages 10 through, I think it goes on a number of pages actually. So in a nut, lots of lots of words on this slide. In a nutshell, first step, screening individuals for Medi-Cal eligibility. Again, ideally at or near intake, but if you are a county that has explored that and that is not feasible, we welcome your processes, your write up of your processes and if it's something you would like to explore, we're happy to provide TA on expanding your program to include that if it's operationally feasible in your county. So the county correctional facility, again, first step, screening individuals for Medi-Cal eligibility, the county correctional facilities responsibilities, screening the individual and verifying if they're already in Medi-Cal. We are hoping to provide and are looking to provide effective January 1st, access to our AEVS lookup system and this would provide the county correctional facility staff with the ability to look and see if an individual is on Medi-Cal or if they are not currently on Medi-Cal, that would help tremendously. But to the extent that that is unclear then the county correctional facility would reach out to the county social services department just to verify whether an individual is actually enrolled in Medi-Cal or not. The county social services department responsibilities would be to work with the county correctional facility to verify if the individual is already in Medi-Cal. And if the individual's already enrolled, the county will then suspend Medi-Cal coverage. Now, we'll discuss the timing of that suspension in just a bit. We just received some guidance and some clarification on how we treat our inmates that are in for short-term stays. So we'll talk a little bit about that in a slide to come. Next slide. So the second step in this process is completing, submitting and processing the Medi-Cal application. County correctional facility will help the individual to complete and submit a Medi-Cal application. Now, this can also be done through a third party vendor, a community-based organization or a designee, you know, someone that the county Board of Supervisors designates as the entity that will help inmates complete and submit Medi-Cal applications. For purposes of our ACWDL, we did focus on the county correctional facility being the entity to initiate the application for those that are not already on Medi-Cal. They should communicate, county correctional facility should communicate with the county social services department to troubleshoot any issues with the application and the county social services department must receive and process the application. They should communicate with the county correctional facility to troubleshoot any issues with the application. And we are asking that between county correctional facilities and the county social services departments, that these pre-release applications be submitted at

least 135 days before release if the release date is known, just to ensure that the county has time to determine eligibility. Now, ideally, this is ideally 135 days ahead of release. If today you have a process in place where you are taking Medi-Cal pre-release applications, which is the mandate, but perhaps your process is to take them 60 or 90 days ahead of release, that's okay. Come January 1st, 2023, the process you have in place to take pre-release applications is absolutely acceptable. We would just ask that moving forward, you build a process in which you expand to begin to take applications at least 135 days before release. Counties have 45 days to process applications, Medi-Cal applications, and in likely in 2024, we are going to have Pre-Release Services 90 days in rate. So we wanna make sure that that application is processed and eligibility is determined and active before or in order for us to deliver those Pre-Release Services. So this is just in preparation for that day when we implement the Pre-Release Services portion of the CalAIM mandate. All right. Next slide. Operational requirements for the eligibility determination. So county correctional facilities must make sure the individual has, so the inmate has their county or their social services department contact information upon release and notify the county social service department of individuals and individuals or inmates release date so that they can unsuspend coverage. If the inmate is on active Medi-Cal, but their Medi-Cal is suspended, the county needs to know well ahead of time so that they can unsuspend that coverage. This must happen, the notification from the county correctional facility to the county social services department must happen within one week of release and no later than one business day prior to release. Now the county social services department must notify the correctional facility if a Medi-Cal determination is not expected before release. This could very well happen for folks who are not incarcerated for very long. Perhaps the application process has already begun, but the county does not have enough time to adjudicate the case. So once the individual is determined eligible, the county social services department will notify the inmate if they are determined eligible for Medi-Cal and provide contact information for their county office. They must also unsuspend Medi-Cal when the individual is suspended and upon release. Now, we do go into a lot of detail in the ACDWL. We give examples of how both the county correctional facility and the county social services department would handle each of those steps, but those are the basic steps. Next slide. So the operational requirements for data sharing, we've been getting a lot of questions about this. Generally speaking, county correctional facilities and social services departments must put data sharing processes in place to implement a pre-release Medi-Cal process. All data shared must comply with state and federal regulations to protect the applicant's information. We do ask and require that the county social services department and the county correctional facility enter into a written agreement. There are a variety of written agreements out there. We understand that 48 out of the 58 counties have a pre-release application process in place at the county level with county correctional facilities. So we believe that there are already written agreements in place, but we wanted to spell out the restrictions and the conditions in respect to Medi-Cal PII, Medi-Cal Personally Identifiable Information that applies to the social services departments. Now social services departments are very

well versed in the, what we call the PSA, the Medi-Cal Privacy and Security Agreement and the compliance pieces are, you can find in ACWDL 19-16 and they do include the restrictions, the conditions regarding use of the safeguards to protect Medi-Cal PII and requirements for any breach of information. Now this is information that is shared outside of the county correctional facility or social services departments. Counties can also include in their written agreements because we saw this a lot in feedback to the ACWDL and questions that we've received, you know, up until releasing the ACWDL, that there are instances, and it's not a rare instance, there are instances where folks are in one county, County A Correctional Facility and they are due to be released in County B and how do we communicate that? How does a county correctional facility in another county communicate with the county or soon to be county of residents for that inmate? And so we did provide some canned language in the ACWDL 22-27 that counties can use in their written agreements that will allow for more authorized data sharing between other county correctional facilities in other counties even though they're not a direct party in that agreement. It's also important to note that a release of information is not required for the county correctional facility or county social services departments to share information to enable a pre-release Medi-Cal application process. This includes the submission of applications. An authorized rep is also not required for county correctional facilities to submit an application on behalf of an individual. The individual can appoint an authorized rep if they choose, it can be someone on the outside and that's fine, someone that can help shepherd their application through the process. But by and large, correctional, county correctional facilities or their designee and county social services departments will be able to share information back and forth to facilitate the pre-release Medi-Cal application process. Next slide. We're gonna talk a bit about operational requirements for the readiness assessment. We did publish again on November 10th. We published MEDIL I 22-46 and MEDIL I 22-47, one for county social services departments and one for county correctional facilities. We are requiring these entities to each of you to submit a readiness assessment to DHCS by December 1st. We did receive feedback from Cal Sheriff's and CWDA on the readiness assessment. We did integrate this feedback into the readiness assessment as appropriate. And at a high level we received feedback requesting four weeks to, between the ACWDL release and the readiness assessment due date. DHCS is providing three weeks. December 1st would be three weeks from the November 10th issuance date. And so December 1st is the due date there. And the readiness assessment asks each entity to self attest to their organization's, whether their organization currently has processes in place or will have processes in place by January 1st to support pre-release Medi-Cal applications. And the goal of this was not to be overly burdensome. We understand and in transparency we just issued the ACWDL November 10th. So a lot of the information that you are going to use in requesting TA for the pre-release application mandate is gonna be found in ACWDL 22-27. So if your county is in a situation where you are not prepared, whether you're a county social services department or a county correctional facility and you are not prepared to implement a pre-release Medi-Cal application process, we encourage you to complete the readiness assessment and indicate in what areas you need

technical assistance from DHCS to be able to implement this process. We're also asking for those who either do have a process in place or will have that you describe that process and how you plan to implement the process. Again, the readiness assessment is simply to allow DHCS to assess the level of readiness for our county correctional facility partners and our county social services departments. At the bottom of this slide we talk about transmitting the completed readiness assessment again by December 1st at the email inbox that we've been discussing. And if you have any questions or requests for TA, please don't hesitate to reach out to us and submit those via this email address. I wanna mention here also that the Department of Healthcare Services holds inmate work groups, work group meetings every second Thursday of the month from 1:00 to 2:00 PM. If you are not already part of this work group and you would like to be, please contact us at the CalAIMJusticePreReleaseApps email inbox so that we can add you to that meeting invite. We are planning to as we move forward, we plan on inviting counties who have a successful process in place inviting those counties to speak to those, the best practices within those processes to help counties maybe formulate what might work in your county or what might work to expand the process that you have currently. And just wanted to clarify both the county correctional facilities and social services departments must complete readiness assessments. We're asking for, one from each. Next slide. That concludes the pre-release application mandate section. We're gonna now speak a little bit about the unlimited suspension for individuals who are incarcerated. We'll talk about short-term stays and immediate need policies. So first up, we did put forth alleged proposal and that was passed as part of Senate Bill 184, that effective January 1st adult inmates and children or juveniles, once they are incarcerated they must be suspended. But rather than discontinuing that suspension and terminating the individual's Medi-Cal eligibility at the 12-month mark, which used to be the policy, this Senate Bill 184 and the Welfare Institutions Code now requires that that adult and or child inmate remain eligible to Medi-Cal as long as they remain eligible to Medi-Cal otherwise eligible, that they remain eligible for the duration of their incarceration. Whether that is 8 months, 12 months, two years, et cetera. The county social services department will unsuspend Medi-Cal upon release and no sooner than upon release as long as the inmate remains otherwise eligible for Medi-Cal. And that's in a nutshell. Now to, just to remind counties, I don't think this isn't a new piece, just a reminder that a 10-day notice is required for the suspension of Medi-Cal benefits for both adult and eligible juveniles. So once you are notified of the incarceration and you go to suspend, I'm speaking to the county social services departments, you go to suspend that inmate's eligibility, there is a requirement that you set that suspension 10 days out allowing for the 10-day notice requirement. All right. Next slide. And we're gonna talk a bit about the timing of those suspensions. So in ACWDL 22-27, we did speak to a short-term stays suspension policy. So effective January 1st, 2023 for situations in which an inmate or youth is subject to a short-term stay of incarceration with a release date within 28 days, the county social services department will not report the incarceration in MEDS. They will give the inmate or youth, given that the inmate or youth will be released within the 28 days, a suspension of benefits is not necessary. If

the county correctional facility has communicated with the social services department that the inmate is going to be released within fill in the blank, 3 days, 14 days, 27 days, the county does not have to suspend that case. And once that is confirmed, they will, the individual who is incarcerated will be released from incarceration without an interruption in their Medi-Cal benefits. And that truly is the goal of this particular short-term stays policy. We understand that suspending takes time and then unsuspending takes time. So we want to make sure that those who are incarcerated and we understand that a majority of folks are incarcerated and released within 30 days. So we just wanted to alleviate that workload and allow the inmate to access services upon release given that their Medi-Cal eligibility would not be suspended. So notification of release dates and immediate need policy. County correctional facilities are to notify county social services departments as soon as they become aware of the expected release date for an inmate or a youth. They are to make every effort to submit confirmation of the release information to the county social services department within a week of the expected release date, but no later than one business day except in cases of unplanned releases no later than one business day prior to release. Now, in those situations the county correctional facility could provide as much notice as possible so that the county can close the incarceration period and activate or unsuspend available benefits as appropriate. Now in cases where immediate need for services is, must be established, the county shall follow standard immediate need processes by utilizing the transactions in MEDS. And we ask that the counties activate coverage within one business day of the notification from the county correctional facility just with the ultimate goal of ensuring that the inmate can obtain immediate needs services upon release. This will become most critical when our Pre-Release Services component goes into effect in 2024. All right, and that concludes the suspension pieces of this, of the pre-release application process. And I'm going, we're gonna transition over to Katherine.

- Hey everyone, my name's Katie Thomas. I'm the grant support lead for the PATH Justice-Involved Initiative with Public Consulting Group. We are acting as the third party administrator for the PATH JI Round 2 funds. So I wanna talk a little bit about our, the background for the PATH JI Initiative. So the CalAIM 1115 Waiver authorized \$151 million for the PATH JI Capacity Building Program that supports collaborative planning and IT investments that are needed to implement justice-involved pre-release Medi-Cal application and suspension processes. The PATH funding will be dispersed in multiple rounds. So PATH Round 1 was a planning grant that provided smaller planning grants to understand the protocols and processes as well as do some modifications to IT that are needed to support these enrollment and suspension processes. That application has been awarded and closed already, so today we're gonna focus more on PATH Round 2. This is a larger application-based grant that are available to probation offices, Sheriff's Offices, and county social security departments. The application deadline is December 31st, 2022. However, I do wanna stress that this is a rolling application period. It is live now, so the sooner that you submit your application, the sooner the

funds can be awarded to you. So if you have any questions about that please let us know. And DHCS is also seeking approval for additional funds for the PATH JI Capacity Building Program for these IT support planning and pre-release and re-entry services. Next slide, please. So PATH Round 2 funds are only available for the applicants at the top of the screen. Those are county SSDs, County Sheriff's Offices that support county jails, county probation offices to support youth correctional facilities and the California Department of Corrections and Rehabilitation Services to support state prisons, the CDCR. The Sheriff's Office or probation office within a county must submit a joint application with the county SSD. The joint application will include separate budgets for the county Sheriff's Offices, probation offices, and the county SSDs. So Sheriff's Offices and probation offices will be required to work with their local county SSD to support the development of the application and budgets for this initiative. Sheriff's Office, probation offices, and county SSDs may not apply for the funding independently. Some of the permissible uses of funding include modifying your tech and IT systems that are needed to support Medi-Cal enrollment and suspension. Recruiting, hiring, onboarding and training staff to assist with the coordination of the enrollment and suspension processes for justice-involved individuals. Developing or modifying your current protocols and procedures that specify steps taken to prepare for and execute the Medi-Cal enrollment. Facilitating collaborative planning activities between correctional institutions, correctional agencies, county SSDs, and other stakeholders. Some modifications to physical infrastructure that supports the implementation of Medi-Cal pre-release enrollment and other activities that are approved by the state. Next slide, please. So while the PATH JI Round 2 funding may be used to support staff salaries, as we talked about on the last slide, there are a few guardrails to keep in mind when you are filling out your budget templates and pieces. So funding may only be used to support salaries for positions that are directly involved in the planning or implementation of pre-release Medi-Cal application processes. Also, they may only be requested for the portion of their full-time equivalent that is directly pertinent to the planning and implementation of pre-release application processes. For example, if the individual dedicates 10% of their time, then the entity may only apply for 10% of their salary. The request for salary support also must be considered reasonable to the different market rates and things like that within your region. So keep that in mind as well when you're planning for your salary positions. Indirect rates overall will be capped at 5% and funding for direct salary support may include costs associated with fringe, subject to guardrails that are listed above. Next slide, please. All right, and some additional guardrails to keep in place. DHCS recommends the applicants cap their funding for planning and implementation as described below. So if applicants anticipate that they need a longer time period to extend the funds outside of these guardrails, you may request an extension to that cap. Within the budget template, there is a justification section for you to fill out if you do need to extend those funds to get them extended. So for correctional facilities, funding for salary support's gonna be capped at 18 months in duration from the time of the funding disbursement for brand new positions related to those Medi-Cal positions and 12 months in duration from the funding disbursement for positions with new

responsibilities that support that Medi-Cal enrollment and suspension process. For county SSDs, the funding for salary support will be capped at 18 months in duration from the time of funding disbursement and will only be available for new positions that are supporting planning and implementation of pre-release application processes. So county SSDs may not apply for salary support for positions that are entirely funded via Medi-Cal administrative funding already. The maximum amount of funding that applicants are eligible to request will depend on the type of applicant and the number of correctional institutions within their jurisdiction. So for example, if you have one Sheriff's Office that oversees two correctional institutions within their jurisdiction, they're able to request \$500,000 per adult jail. So keep that in mind when you're looking at your budgets and the number of jails that, correctional facilities, that you'll be applying on behalf of. Next slide, please. So how to apply. The getting started, you really just wanna go to the CaliforniaPATH.com website and go to the justice-involved page. There are some screenshots within this page, I'm sorry if they're small if you're looking on a little monitor, however, you're going to want to download a PDF of the application since you are working with your partners in order to fill this out and make sure that you're able to fill out each piece. There is that PDF version. There is also a budget spreadsheet template. You must use that and submit that with your application. So after you fill out that spreadsheet, make sure you upload it back to your application, you'll be prompted to do so and you won't be able to submit your application without it. So we don't anticipate that being an issue. There will also be an attestation so you will attest your signatures of all of the partners that are applying and then you will sign and submit the application. So at this time, if you have any issues at all with the application, you can feel free to reach out to us at PCD. I'm also going to put out that we have Office Hours this Thursday at noon on Pacific Standard that will go through the application and answer any questions that you all may have, application related. These occur every other Thursday and they will occur until the application deadline closes. This is a place where you can drop in, ask questions, no obligation to stay for the entire hour. So we also have those in addition to our email inbox. So if you need any questions answered, please feel free to reach out to us about the application. Next slide, please. So here is an overall timeline. This application is already live, it went live August 9th. The first informational session was hosted on September 20th and the application closed date is December 31st, 2022. I know I've said this again, but I'm gonna say it again, the earlier you applied, the earlier you can get the funding because as you see on this timeline table, we will at PCG review it within 30 days of when it is submitted. So if you were to submit an application tomorrow, it would be reviewed and forwarded in the next 30 days. We will then confer with DHCS and we will go ahead and be able to start that awarding notification packet and get you your funds earlier. So the earlier you apply, the better we can get you your fund quicker. Next slide, please. And that is it for me with PCG and the application. I'm gonna turn it back over to you, Sandie.

- Thank you.

- Uh-huh.

- I'm gonna go ahead now, we are going to be going through questions that were submitted throughout the presentation, but understand that at this point, the QA box, yeah, Q&A box will remain open if other questions come up. So please do utilize that. I'm gonna start at the top. We have some questions that have been submitted. They're very good questions. Somebody caught an error typo in the ACWDL. So good on you. Let's start at the top here. Pre-release Medi-Cal process, to be clear, the name required to be submitted is meant to be a high level point of contact and not the person to be contacted for application status, correct? That is correct. We're looking for a point of contact that DHCS could reach out to for that, those that high level information. What if release dates are not known or are moved for an incarcerated individual? If release states are not known, excuse me. This is where the communication between the county correctional facility and the county social services department is key. Meaning, the social services department will need to check in at the 28th day to see if the inmate is still incarcerated or if they've been released and if they are still incarcerated and then they've not yet been released and there is no incarceration or excuse me, release date, then I would proceed as if they are going to be incarcerated beyond the 28 days. And suspend benefits as noted in the ACWDL, I think we even have an example that mirrors that scenario. Is there funding to help social services department sustain pre-release application process workload aside from PATH? Now there is certainly county admin and if you are using, you know, 100% of your county admin funding and project that you will need more, we absolutely can have conversations about that with CWDA and our county partners. But at this point, the pre-release application process workload is meant to be, the county admin dollars are meant to be used for that. Now again, we are looking at a, some opportunities to provide the funding for county correctional facilities, some admin funding there, but for county processing applications, that is county admin that at this. Data sharing. So what was the system county correctional facilities will use to verify current enrollment? That was AEVS, A-E-V-S, Automated Eligibility Verification System. It is a system that is, that providers, doctors, health clinics and such have access to and it gives real time eligibility information whether a person is active or they're not. It gives the aid code they're active in, it shows the health plan that they are enrolled in. So it gives lots of information that would be helpful to the county correctional facility or the third party entity that's taking the application to see the status of a person's Medi-Cal eligibility and then decide whether or not a pre-release application, excuse me, is warranted or decide if we need, you need to communicate with the county Social Services department to let them know you have an incarcerated individual. Will DHCS be confirming or excuse me, how would the county correctional facility request access to the AEVS system? Well, we are, there will be a process once we get all of the nuts and bolts nailed down, there will be a process, we will likely use the point of contact for

the county correctional facility to help facilitate, you know, providing us names of folks who will be, who will need to access the system and we'll work out access. Will DHCS be confirming with county social services departments once the MEDS access has been given to county correctional facilities? Probably need a little bit more information about that. I think we definitely will be communicating with county social services departments when, you know, by and large we have opened this up and giving access. But if you're talking about learning who we've given access to specifically like names and such, I'll take that back. Might need a little bit more information on what that question is getting at. Does the written data sharing agreement between county correctional facilities and social services departments need to be in place by January 1, 2023? Here's where we get to the, I mean, in transparency, we just issued the guidance November 10th. Expecting, if you don't already have an agreement in place, you know, between your agencies, more likely is not you won't have one by January 1st, 2023. And that's okay. We understand that folks were waiting for this guidance, we would want you to have one in place. You need to have one in place to share information securely. There are, I think there are ways that you can have a process in place without, for example, without a data sharing agreement in place, CBOs, county correctional facilities, third party vendors can submit Medi-Cal applications on behalf of an inmate. It's the sharing back and forth of information and troubleshooting the application that can't occur without that agreement inputs. So is it possible that folks can have a process in place come January 1st, 2023 without the written data sharing agreement? It's possible. Certainly ask for some TA. I actually worked in a county where we didn't have a data sharing agreement with our county correctional facility because it was one way communication. We got lists from the correctional facility and we then acted upon that information, but we didn't share back information. So there are certain definitely, you know, pathways. But I would encourage everyone and anyone that doesn't already have one in place to get that started 'cause we understand county council will likely need to be involved and if you need technical assistance from DHCS, please don't hesitate to reach out. So that was a long answer to that question, but ideally, yes, we want it in place by January 1st, 2023, but if you can't because have one in place by then, let us know when you believe that you can. And I would put that on the readiness assessment as far as your, what you need to have in place to be ready. Suspension. Can you clarify the example on page five of ACWDL 22-27? Yes, you have pointed out that it states 10 days notice, sent April 29th with an effective date of May 1st, it should have been May 9th, that would've been 10 days. So the example is wrong, counting out 10 days and counties I know are very familiar with this process. We need to give 10 days notice for suspension. It's considered a negative action. So count out 10 days from the day you are sending the notice and that will be the date. If the inmate is booked into jail and the county is notified, but there is no projected release date available at that time, does the county still wait to suspend for 28 days? Yes, it does. We actually, we have an example in the ACWDL on that. For short-term stays, for those incarcerated less than 28 days. Do social services departments need to still report the incarceration period and just not suspend the benefits or neither? You will do neither. You will act as if they were not

incarcerated. You will not enter an incarceration period. No entry in MEDS will be necessary. Again, that is for someone who goes in, is booked into jail and then is released in less than 28 days. Readiness assessment. Where can we access the readiness assessment and do the sheriff and probation officers need to fill out separately? That is a good question. I might need to phone a friend here. I, my guess would be that yes, we would one from the Sheriff's Office and one from the county youth facilities or probation. But do we have, do I have a phone a friend available that could answer that? If not, we can take that back and answer.

- Yeah, we can take it back and confirm for sure, Sandie. But I, my understanding would be that the readiness assessments are for each facility.

- Yes.

- Which would be each correctional facility, which would mean each sheriff's facility and each probation youth correctional facility.

- Okay. All right. Yeah, at the very least I'm thinking, yeah, each entity. Okay, thank you, Brian. This is cool having a phone a friend that I might have to arrange that in my everyday life. Hi there, when will counties be required to meet performance standards? Very good question. So because of the public health emergency, the county oversight and monitoring, so part of the CalAIM proposal and then the implementation or reinstatement of performance standards is tied to the end of the public health emergency. So as soon as the public health emergency ends, let's say I'm making up, I'm making this up, I don't know any of this for certain. But let's say the public health emergency ends in April and we expect counties to go back to normal business operations May 1st, the performance standards and monitoring of those performance standards would be effective 12 months from the end of the public health period. Please find PATH Round 2... Oh, thank you, Hannah. One more pre-release Medi-Cal application question. Currently counties have 45 days to process a Medi-Cal application and complete an eligibility determination. So if the goal is for inmates to have active Medi-Cal upon release, how are counties to process these applications if the inmate is incarcerated for 28 days or less? Is there a requirement to process these applications within a new timeframe? No, federally speaking, the application processing timeframe is 45 days. That has been in place for decades back to the stone ages when I was an eligibility worker. So what we're saying is if you have a process in place that takes pre-release applications at or near booking and this individual will be released, you know, within or before 28 days, you would still take the application and you would process it accordingly. If it takes 45 days to process it, it takes 45 days to process it. That's just the

reality. Whenever that application is processed, however, and as part of the pre-release application process, you'll be obtaining an address that that inmate intends to be, you know, released to, you'll have the inmate's contact information so that once the application is approved, if it's not approved prior to their release, once it's approved, you have the ability to connect with the released individual and let them know that their application and their Medi-Cal benefits are active. Do we need to take Medi-Cal applications for those who will be detained less than 28 days? Again, there are, I know, so the mandate is that you have a pre-release application process in place, a best practice and something DHCS recommends is that processes be implemented where you're taking the application at or near booking. So that would include the decided and released. But the mandate is simply to have a pre-release application process in case. So yes, you can take Medi-Cal applications and we encourage you to do so, you know, at the start and I'll leave it at that. Okay, there is an answer to a question that was, we posed. Sandie, each Sheriff's Office or probation office is responsible for filling out the readiness assessment on behalf of the correctional facilities that they oversee. So Sheriffs, County Sheriffs will fill out a readiness assessment for all of their county jails, for example. And the probation office will be responsible for filling out a readiness assessment for their correctional, their juvenile correctional facilities, youth correctional facilities that they oversee. So not every individual jail or youth correctional facility needs to fill out their own readiness assessment. Hopefully that makes sense and it's clear. So for every county, ideally, we would have one from the social services department, one from the Sheriff's Office that represent county jails and one from the probation office, chief probation officer that represents the youth correctional facilities in that county. And that was it for the questions that I have on deck here. Any other questions?

- [Staff Member] Sandie, we have a series of other questions. I'll pop them into the chat.

- Sure.

- Most of them are related to just general pre-release application process question.

- Sure. Oh, okay. Thank you. Currently counties have 45 days to process Medi-Cal application and complete an eligibility determination. I think we answered that question. Is there a requirement to process within a new timeframe? Yeah, we, no, 45 days is the timeframe. Are counties going to be responsible to process Craig v Bonta for these individuals who lose their SSI as a result of their incarceration that isn't specified in any guidance? So I'm going to speak off the cuff and I hope I'm not far afield from the answer here. So once an individual is incarcerated, they eventually lose their SSI. Medi-

Cal has a program in place called Craig v Bonta, where we determine a person's ongoing Medi-Cal eligibility even though they've lost their SSI eligibility. So I am going to say, and I will take it back. I'm going to say in, generally speaking, I believe that you would process a Craig v Bonta incarceration, remembering that, gosh, dating back years, incarceration is no longer a reason that a person would be ineligible for Medi-Cal. So processing a Craig v Bonta application for these individuals would certainly be warranted, but if there is a nuance there that makes it impossible or challenging, we can certainly talk through that and we'll take that down. Angela, if you could take that down so that we can answer that, research that and answer that in an upcoming. Our intent is to issue an clarification or a Q&A MEDIL or ACWDL for those questions and things that need to be clarified based on 22-27. I believe the application for Medi-Cal eligibility is around 23 pages. Will the Medi-Cal eligibility application be streamlined for incarcerated individuals? I know that there are some and perhaps checking out the best practices that have been submitted to DHCS and published in the, I think Hannah was able to pop that link into the chat. There are some counties, some CBOs, some correctional facilities that come up with kind of a streamlined application if it, as it were a paper where they fill in the inmates information, the, you know, the minimum information of the necessary information and then once they are, you know, they leave the correctional setting or they no longer have the inmate in front of them. They take that application and they enter the information into an automated, whether that's BenefitsCal or the Covered California portal, or there are opportunities to use an abbreviated version of the application. It's not something that is, it will have to be transferred into the application, the official Medi-Cal application. But if the inmate and there are, you know, there are, or is the ability to have the inmate sign in, this is where an authorization would be warranted, where the inmate is allowing the person taking the application to take their information and, you know, essentially be an authorized rep, you know, on their behalf. Ideally, they would take the 23-page Medi-Cal application in and fill it out and the inmate would sign it. But I know that there are some processes in place for some counties that, are creative in that way. So I would recommend if it's not currently in the streamlining piece of guidance, that we can ask our county partners to offer up some of their best practices and how they handle that. What was the name of the meeting in which sharing of best practices existing processes will occur? That is the inmate, excuse me, the inmate work group or support act/inmate work group. And if you would like to be a part of that, please do, you know, give us your contact information, send us your contact information via the email link that we've been sharing. To clarify, does the public health emergency no negative action policy affect the inmate suspension process? No, it does not. So an inmate can be suspended, they just can't be terminated. If they are on Medi-Cal and once they're on Medi-Cal, they cannot be terminated throughout the public health emergency, but their benefits can be suspended. Are there suggestions on how to handle inmates that wish to apply, but are only in custody for a day or two or over a weekend if the SWD, maybe county welfare department cannot see them before they leave? Is there a best practice we should look at? And those are, there are some entities that have in, for example, county correctional facilities have been, their county

correctional staff or they have CBOs or a third party vendor embedded in the jail to, you know, to catch those folks that want to apply for Medi-Cal even if they're in custody for just a day or two. So that would be, you know, based on the capacity of the correctional facility and or the, you know, the ability for the correctional facility to allow for that, whether it's a county correctional facility staff or the county social services staff or third party entity. But you would work together to make that happen, if that is something that you would like to pursue, we certainly encourage that and could put you in touch with folks who have a process in place for that. In this webinar it was stated that it's the responsibility of the county correctional facility to complete and submit the Medi-Cal application, but it states in the ACWDL that the Board of Supervisors will assign this responsibility and therefore it's contradicting the stated requirement. I did, and I hope I was clear when I said when I, during this webinar about the county correctional facility, and responsibilities therein, it could be a designee that the Board of Supervisors has designated, it could be a third party entity, it could be a community-based organization or could be the county social services department itself, but it is up to the County Board of Supervisors in collaboration with the Sheriff's Office and the chief probation officer who designate whether it is a county correctional facility or designated someone else to take those applications. It is the responsibility of the county correctional facility to work with the social services department in establishing that and figuring that out and working with the social, the county social services department in establishing the process. Let's see here. Thank you, Hannah. Shared the CalAIMJusticePreReleaseApps mailbox. For youth, how do we pursue consent around suspension if they are a minor or a dependent on someone else's Medi-Cal? If a person is released from county correctional facility, but is being transferred to a prison, okay, so let me take the first question first. So for a youth it depends, and we know at least folks, eligibility workers from our social services departments understand that a person can as young as 14 and say they're in an independent living situation unless they are a tax dependent, right, of the, with their parent or parents on the outside. So those are the kinds of things you need to explore. If they are a minor or a tax dependent, we have information that they are, you know, they're claimed as a tax dependent and they are not indicating that they are in a, you know, individual living situation. And you're going to have to treat them like a dependent within that household and gain the parents' information so that you can fully adjudicate the Medi-Cal. And if you are, if you have a youth who is associated with a household and they become incarcerated and you know because you have that case that they are a dependent and they are not in an independent living situation, you can suspend their Medi-Cal, but the notices would go to the parent on the outside. If a person is released from a correctional facility, but is being transferred to a prison will be released the suspense, oh, will we release the suspension and then resuspend for the change in incarceration or keep the original suspense in place? You would keep the original suspense in place. After, okay, we're gonna move on to next steps. Thank you all for your questions. Very, very good questions. So just some key dates to remember. December 1st, the pre-release Medi-Cal application readiness assessments are due. Again, likely a minimum of three of each- if each county has a county jail, a county

youth facility, and a social services department. December 31st is the PATH Round 2 applications due. Please, please, please, look into applying for PATH Round 2 funding. There is a lot of funding available. It can cover a lot of things having to do with implementation of the pre-release application process. January 1, 2023, the pre-release Medi-Cal application mandate is go-live and sometime in 2024 there will be the go-live of Pre-Release Services. More to come on that. So county social services departments, correctional facilities, please submit your readiness assessments. Contact calaimjusticeprereleaseapps@dhcs.ca.gov. That was also put in the chat for you with any questions about readiness assessment or the pre-release Medi-Cal application mandate. And please don't hesitate to contact justice-involved@ca-path.com with any questions about the PATH application. We look forward to receiving, hopefully, each of you is able to put in a PATH Round 2 application for funding. It's extremely important and I think will be extremely helpful in expanding and enhancing your pre-release application programs. And with that-

- Sandie, can I?

- Yeah, Brian, go ahead.

- I just wanted to mention one thing again about the Pre-Released Services implementation date. The date that we will announce in 2024 will be a no sooner than date. There will be a 24-month timeframe after that date that facilities, youth correctional facilities, and adult jails and prisons will be allowed to pick when they want to go-live based on their own readiness within that 24-month timeframe, stretching out past our no sooner than date in 2024. So I just wanted to let you know you're all in the driver's seat to some extent in picking your launch date and we'll have more information to come.

- Thank you, Brian. And back to you, Julian.

- [Julian] Okay. Thank you for joining. You may now disconnect.

- Thank you.