



STATE OF WISCONSIN  
Department of  
Corrections

# MEDICAID APPLICATION ANNUAL REPORT

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FISCAL YEAR 2023

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# EXECUTIVE SUMMARY

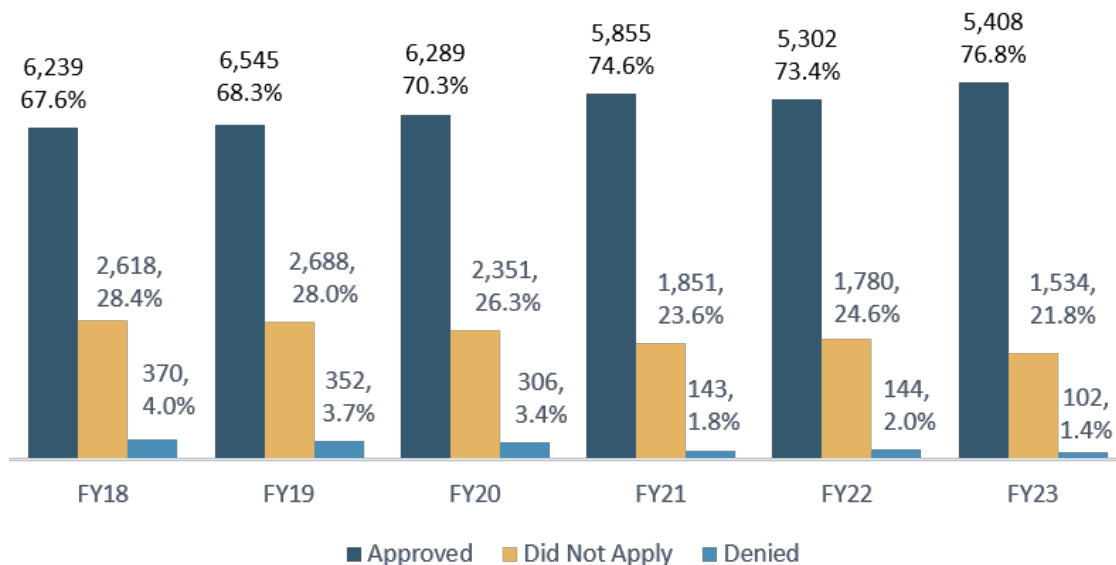


The Department of Corrections (DOC), Department of Health Services (DHS), and Income Maintenance (IM) agencies partner to provide individuals in DOC custody the opportunity to apply for Medicaid before release from incarceration. Individuals leaving prison with Medicaid approval can access medications and treatment for acute and chronic medical conditions, mental illness, and substance use disorders upon release. In Fiscal Year (FY) 23, there were 7,044 individuals released from prison that fit the criteria for this evaluation as shown in Figure 1. This includes youth or adults incarcerated longer than 30 days in DOC custody and released from DOC facilities, county jails, the Wisconsin Resource Center, and Mendota Juvenile Treatment Center.

In FY23, 5,408 individuals were approved for Medicaid programs. Of the 76.8 percent of people released from incarceration that were approved, 75.6 percent were approved the month before release, 16.6 percent were approved the month of release, and 7.5 percent were approved the month following release. Approximately 21.8 percent of individuals did not apply for Medicaid, and 1.4 percent of the population applied for a Medicaid program and were denied. The overall approval rate increased 3.4 percent from FY22 to FY23 and is the highest approval rate since the DOC and DHS Medicaid application partnership was established. The high approval rate highlights the integration of Medicaid application assistance into the pre-release planning process and the dedicated work of staff at DOC, DHS, and IM agencies to make healthcare coverage accessible for individuals returning to the community.

As part of the inter-governmental agreement, DOC and DHS exchange information to study and improve application advocacy. The information exchange also provides the data used in this report. The Medicaid approval determinations referenced in this report refer to approved applications for Wisconsin Medicaid programs; denial determinations refer to individuals who applied for Medicaid and were not approved; and lastly, the did not apply rates capture individuals who did not apply for Medicaid. Department leaders can use this report to inform and fine-tune Medicaid application assistance processes at each facility. Medicaid application approval before release maximizes successful community reentry by improving access to preventative and routine physical and behavioral health care.

Figure 1: Medicaid Eligibility Determination Totals and Rates by Fiscal Year



# FACILITIES



## Maximum

Columbia Correctional Institution (CCI)  
Dodge Correctional Institution (DCI)  
Green Bay Correctional Institution (GBCI)  
Waupun Correctional Institution (WCI)  
Wisconsin Secure Program Facility (WSPF)

## Medium

Fox Lake Correctional Institution (FLCI)  
Kettle Moraine Correctional Institution (KMCI)  
Milwaukee Secure Detention Facility (MSDF)  
New Lisbon Correctional Institution (NLCI)  
Oshkosh Correctional Institution (OSCI)  
Racine Correctional Institution (RCI)  
Racine Youthful Offender Correctional Facility (RYOCF)  
Redgranite Correctional Institution (RGCI)  
Stanley Correctional Institution (SCI)

## Minimum

Chippewa Valley Correctional Treatment Facility (CVCTF)  
Oakhill Correctional Institution (OCI)  
Prairie du Chien Correctional Institution (PDCI)  
Sturtevant Transitional Facility (STF)

## Wisconsin Correctional Center System (WCCS)

Black River Correctional Center (BRCC)  
Drug Abuse Correctional Center (DACC)  
Felmers O. Chaney Correctional Center (FCCC)  
Flambeau Correctional Center (FCC)  
Gordon Correctional Center (GCC)  
John C. Burke Correctional Center (JBCC)  
Kenosha Correctional Center (KCC)  
Marshall E. Sherrer Correctional Center (MSCC)  
McNaughton Correctional Center (MCC)  
Oregon Correctional Center (OCC)  
Sanger B. Powers Correctional Center (SPCC)  
St. Croix Correctional Center (SCCC)  
Thompson Correctional Center (TCC)  
Winnebago Correctional Center (WCC)

## Wisconsin's Women's Correctional System (WCCS)

Taycheedah Correctional Institution (TCI)  
Milwaukee Women's Correctional Center (MWCC)  
Robert E. Ellsworth Correctional Center (REECC)

## Juvenile

Lincoln Hills School (LHS)  
Cooper Lake School (CLS)

## Department of Health Services

Wisconsin Resource Center (WRC)  
Mendota Juvenile Treatment Center (MJTC)

# FACILITY OUTCOMES



## MEN'S MAXIMUM

This fiscal year's report includes Medicaid approval rates over time by security classification and system. The FY23 data show a 16.1 percent decrease in releases from the men's maximum security facilities compared to releases in FY22. Figure 2 notes the men's maximum security facilities increased eligibility determinations by 2.8 percent in FY23.

Figure 3 indicates Maximum Security Medicaid Eligibility Determination Totals and Rates by Institution. Dodge Correctional Institution (DCI) exceeded the DOC average approval rate in FY23 and increased eligibility by 7.7 percent since FY22. Wisconsin Secure Program Facility (WSPF) also exceeded the overall DOC average for eligibility determinations in FY23 and increased eligibility by 23.7 percent since FY22. Columbia Correctional Institution (CCI) increased the institution's approval rate by 3 percent from FY22.

Figure 2: Men's Maximum Security Medicaid Eligibility Determination Totals and Rates by Fiscal Year

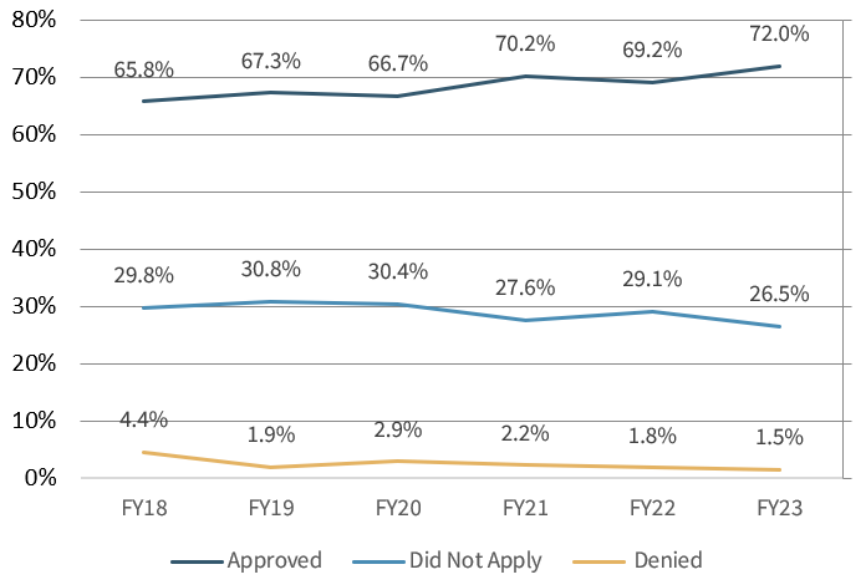
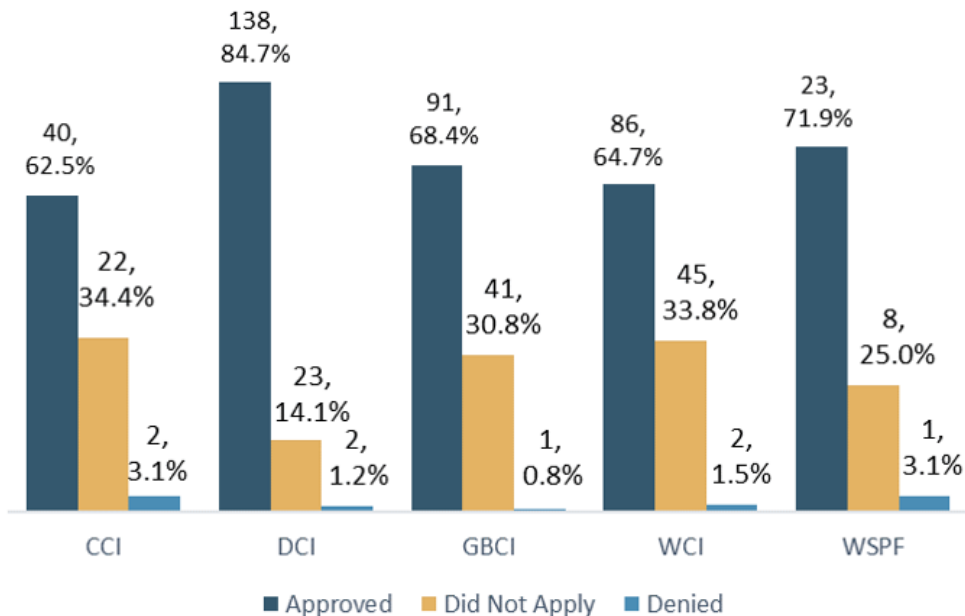


Figure 3: FY23 Men's Maximum Security Medicaid Eligibility Determination Totals and Rates by Institution



# FACILITY OUTCOMES

## MEN'S MEDIUM

Over the last five years, the men's medium security classification has trended positively with increased Medicaid approval rates and decreased rates of individuals not applying or being denied Medicaid, as illustrated in Figure 4. This is a significant trend because the men's medium security classification represents the largest security classification of individuals released to the community each year. In FY23, the men's medium security facilities saw a Medicaid approval rate of 77.2 percent which is higher than the DOC average approval rate of 76.8 percent; in tandem, the rates of individuals being denied and not applying for Medicaid decreased by 1.1 and 11.8 percent respectively.

Figure 5 indicates FY23 Medium Security Medicaid Eligibility Determination Totals and Rates by Institution. Stanley Correctional Institution (SCI) saw the highest approval rate of any medium security institution and exceeded the DOC average approval rate by 6.7 percent. Oshkosh Correctional Institution (OSCI) exceeded the DOC average approval rate by 5.5 percent. Redgranite Correctional Institution (RGCI) exceeded the DOC average approval rate and increased facility eligibility by 3.5 percent since FY22. Jackson Correctional Institution (JCI) saw the greatest increase in facility approval rate with an increase of 12.9 percent since FY22.

Figure 4: Men's Medium Security Medicaid Eligibility Determination Totals and Rates by Fiscal Year

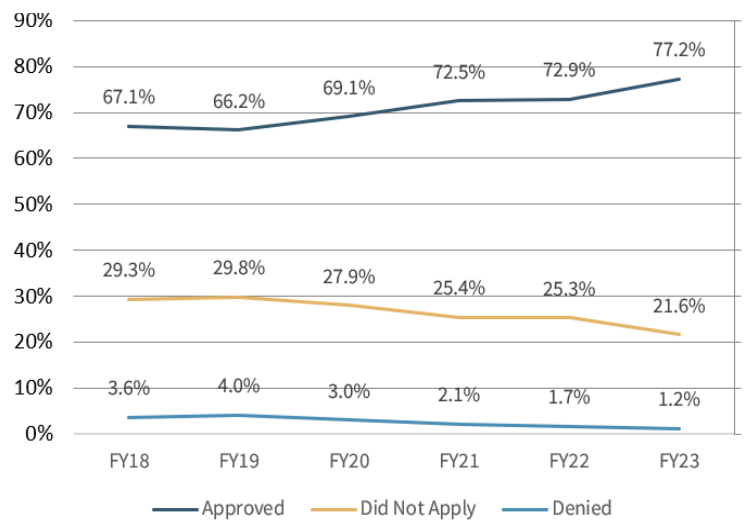
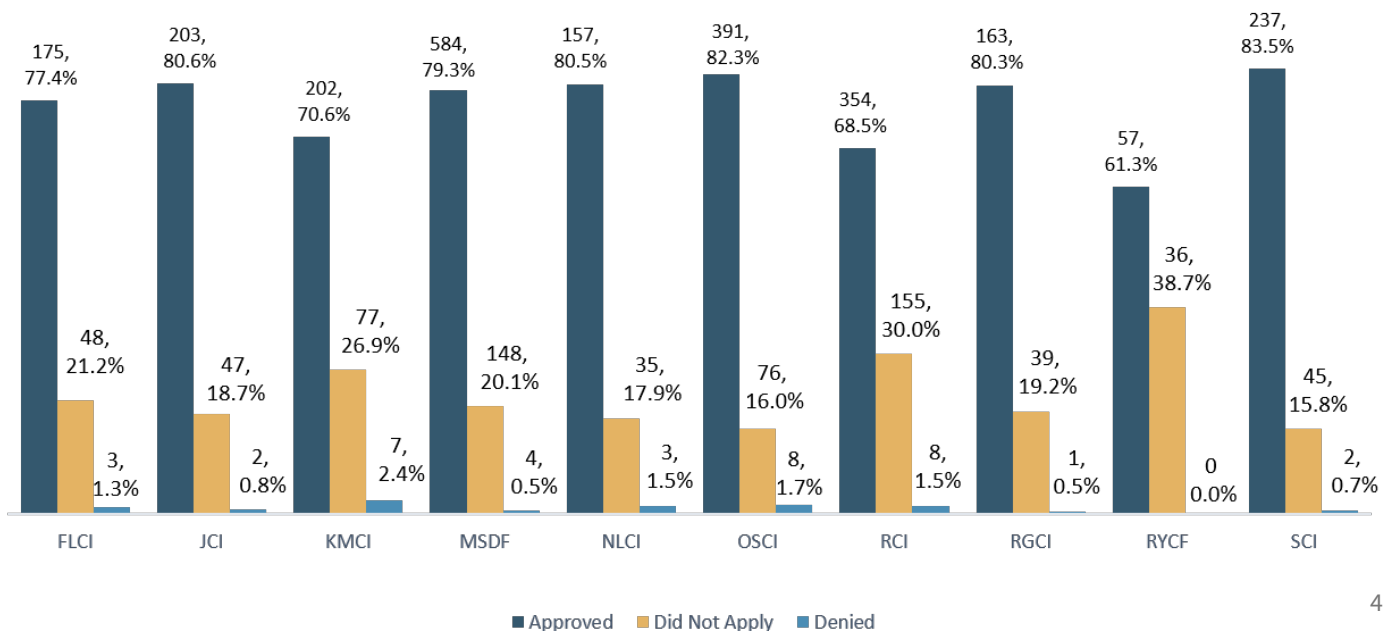


Figure 5: FY23 Men's Medium Security Medicaid Eligibility Determination Total and Rates by Institution



# FACILITY OUTCOMES

## MEN'S MINIMUM

In FY23, men's minimum security institutions increased Medicaid application approvals by 3.6 percent from the previous fiscal year. This approval rate of 81.3 percent is 4.5 percent higher than the DOC approval average. Figure 6 indicates that as approval rates continue to increase well past the DOC average, the rates of individuals being denied or not applying for Medicaid are decreasing.

Over the last six years, the men's minimum security facilities have consistently demonstrated overall approval rates higher than the DOC approval average. This proves a commitment by facility staff to the pre-release Medicaid application assistance process.

Please note, Prairie Du Chien Correctional Institution (PDCI) transitioned from a medium security facility to a minimum security facility in FY21. This transition was representative of the growing need for minimum security beds and an increased need for program opportunities.

Figure 7 indicates Minimum Security Medicaid Eligibility Determination Totals and Rates by Institution. Chippewa Valley Correctional Treatment Facility (CVCTF) exceeded the DOC average approval rate by 8.8 percent and increased the institution-specific approval rate by 7 percent from the previous fiscal year. Oakhill Correctional Institution (OCI) exceeded the average DOC approval rate by 4.3 percent and increased the institution-specific approval rate by 8.6 percent from FY22. PDCI exceeded the DOC average approval rate by 4.2 percent.

Figure 6: Men's Minimum Security Medicaid Eligibility Determination Totals and Rates by Fiscal Year

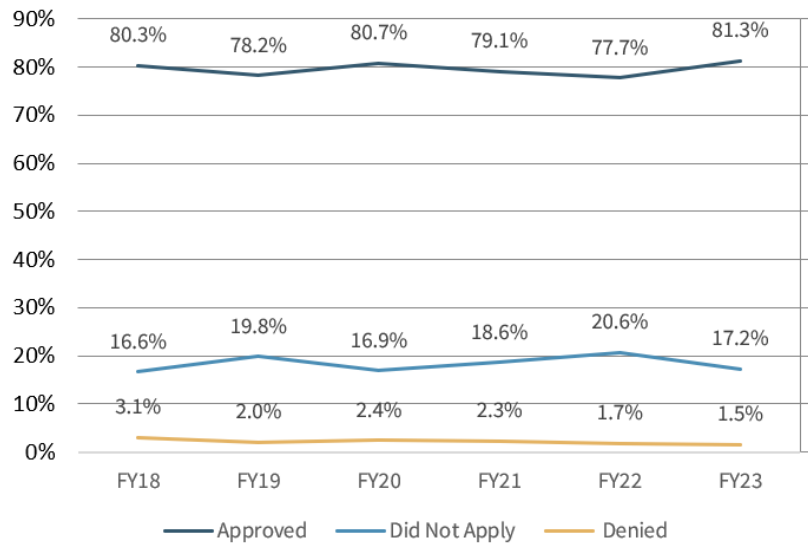
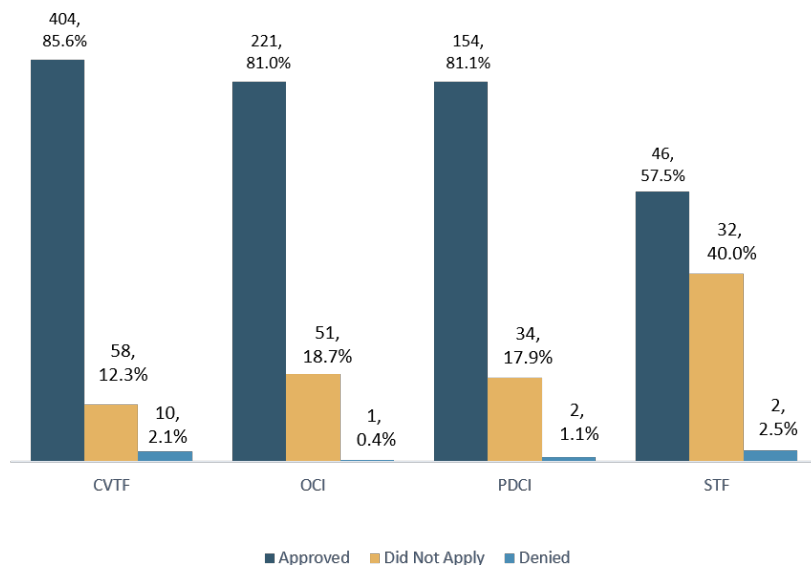


Figure 7: FY23 Men's Minimum Security Medicaid Eligibility Determination Totals and Rates by Institution



# FACILITY OUTCOMES

## WISCONSIN CORRECTIONAL CENTER SYSTEM (WCCS)

The FY23 data continues to show a stabilization of Medicaid application approval since the COVID-19 pandemic. As indicated in Figure 8, there was a dramatic increase in Medicaid approvals within the Wisconsin Correctional Center System (WCCS) in FY21. This was likely caused by pandemic operations where there were limited work release opportunities and more individuals qualified for Medicaid by falling below the monthly income eligibility limit. As WCCS transitions from pandemic operations and work release opportunities increase, it is likely several individuals will no longer fall below the monthly income eligibility limit. Thus, it is anticipated Medicaid approval rates will continue to be lower than the FY21 approval rate.

Figure 9 indicates FY23 WCCS Medicaid Eligibility Determination Totals and Rates by Institution. Drug Abuse Correctional Center (DACC) exceeded the DOC average approval rate by 11.2 percent. DACC is one of many Wisconsin Correctional Center System (WCCS) facilities offering substance use treatment programs. Medicaid eligibility provides necessary benefits for individuals in need of further treatment, aftercare, or Medication-Assisted Treatment (MAT) in the community.

Figure 8: WCCS Medicaid Eligibility Determination Totals and Rates by Fiscal Year

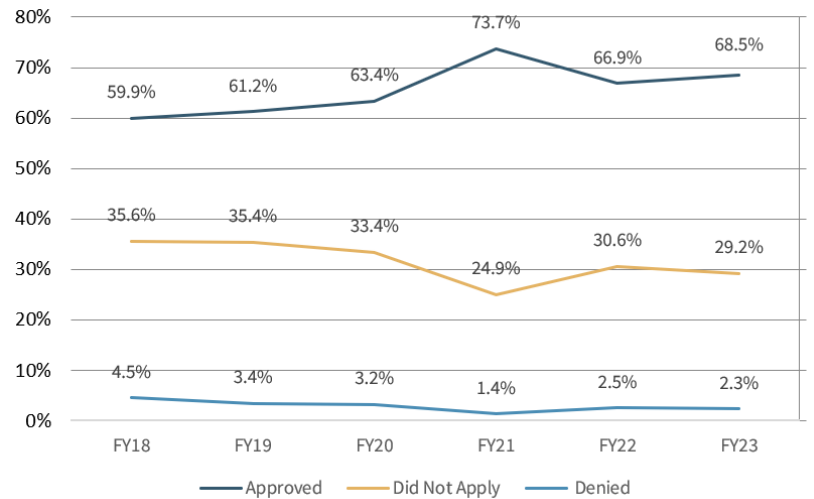
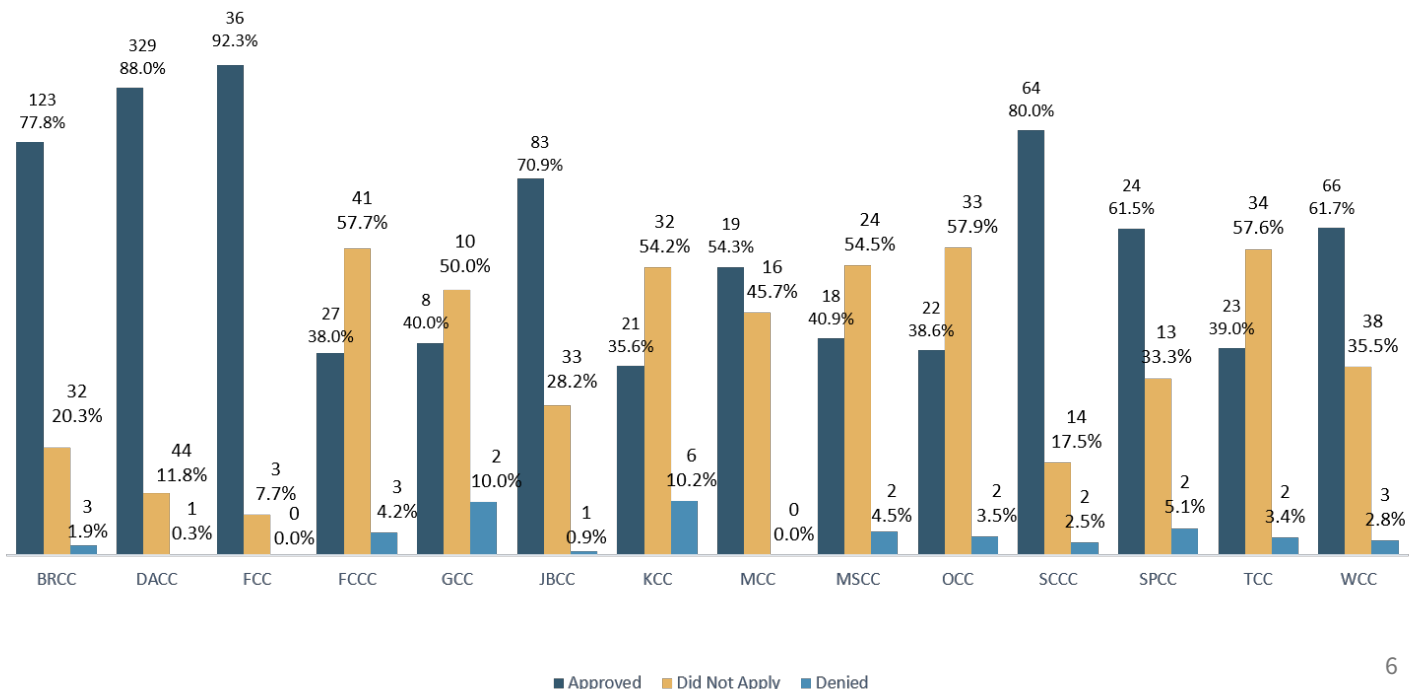


Figure 9: FY23 Wisconsin Correctional Center System Medicaid Eligibility Determination Totals and Rates by Center





# FACILITY OUTCOMES



## WISCONSIN WOMEN'S CORRECTIONAL SYSTEM (WWCS)

The Wisconsin Women's Correctional System (WWCS) showed the highest approval determination rate of DOC facilities in FY23 at 88.4 percent. Figure 10 indicates continued high approval determination with WWCS's overall Medicaid application approval rate being 11.6 percent higher than the average DOC approval rate. In conjunction, the rate at which releasing individuals are not applying is 10.3 percent which is 11.5 percent lower than the DOC average of individuals not applying.

Milwaukee Secure Detention Facility (MSDF) maintains a male and female population. Therefore, the MSDF eligibility rates are separated by male and female populations and reported in the respective areas of this report.

Figure 11 notes FY23 Medicaid Eligibility Determination Totals and Rates by Institution. Milwaukee Women's Correctional Center (MWCC) exceeded the DOC average approval rate by 17.1 percent. Robert E. Ellsworth Correctional Facility (REECC) exceeded the FY23 DOC approval average by 8.8 percent. Taycheedah Correctional Institution (TCI) exceeded the DOC average approval rate by 13.3 percent and increased facility-specific eligibility by 5.2 percent from FY22.

The trend analysis further demonstrates the WWCS's commitment to release planning and access to healthcare. WWCS has established a very successful application assistance process, exceeding the DOC average eligibility determination rate each year. This is critical for the continuity of care for the female population, who are released with higher rates of serious mental illness.

Figure 10: WWCS Medicaid Eligibility Determination Totals and Rates by Fiscal Year

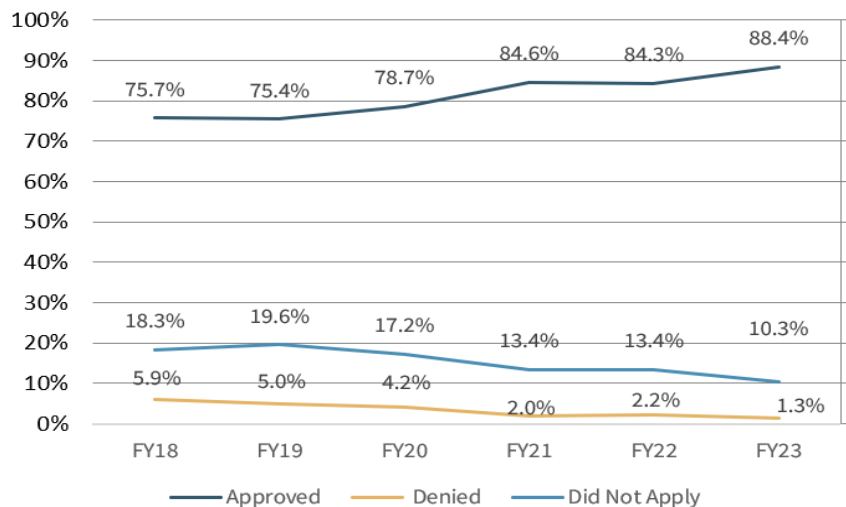
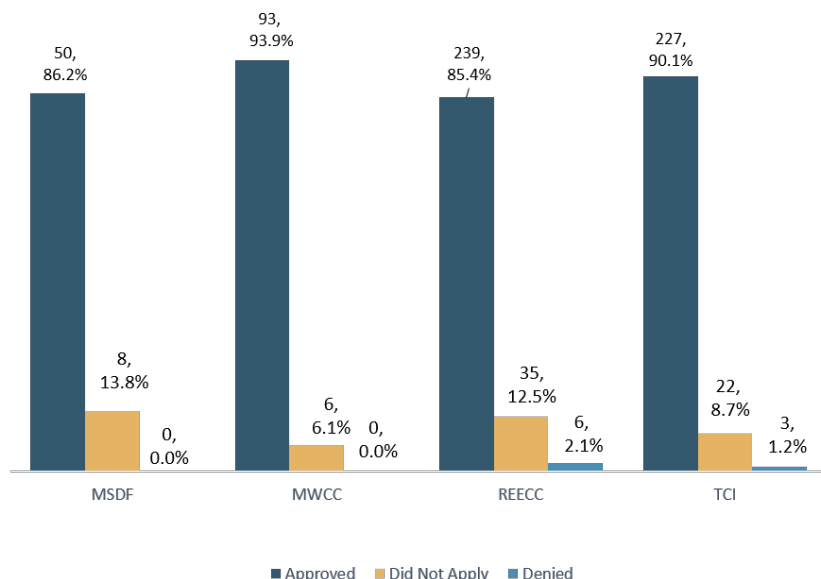


Figure 11: FY23 WWCS Medicaid Eligibility Determination Totals and Rates by Institution



# FACILITY OUTCOMES

## OTHER FACILITIES

The Division of Juvenile Corrections (DJC) houses a small population at two DOC facilities. As indicated in Figure 12, 3 youth from Copper Lake School (CLS) and 35 youth from Lincoln Hills School (LHS) were released in FY23. DJC staff work closely with aftercare agencies and guardians to recommend healthcare options upon release. Furthermore, decision-making is complex as youth returning to an in-home setting may have access to a guardian's employer-sponsored health care plan, reducing the need for Medicaid coverage. In addition, youth may remain on parent or guardian health insurance until the age of 26.

Mendota Juvenile Treatment Center (MJTC) and DJC facilities share similar small populations and considerations when educating guardians and youth regarding health care options. Figure 12 indicates MJTC released 13 individuals of which 6 were approved for benefits, 7 did not apply, and there were no application denials.

The Wisconsin Resource Center (WRC) provides mental health treatment and programming to individuals with serious mental illness in DOC custody. WRC release planners facilitate Medicaid applications for individuals released. Attaining Medicaid before release helps release planners make referrals to Long-Term Care programs at local Aging and Disability Resource Centers. The approval rate trend for WRC has been consistently high over the five years of the DOC and DHS Medicaid application assistance agreement. Figure 13 demonstrates WRC exceeded DOC's average approval rate in FY23 by 10 percent and increased institution-specific approvals by 9.2 percent from FY22.

Figure 12: Juvenile Medicaid Eligibility Determination Totals and Rates by Facility

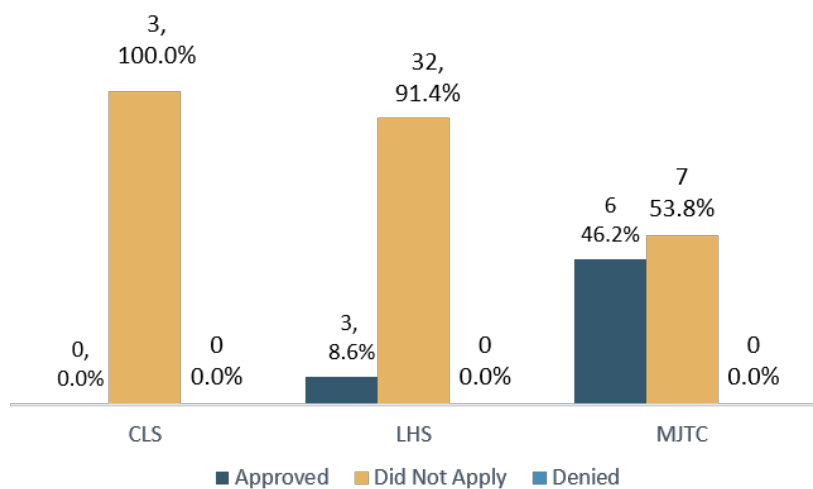
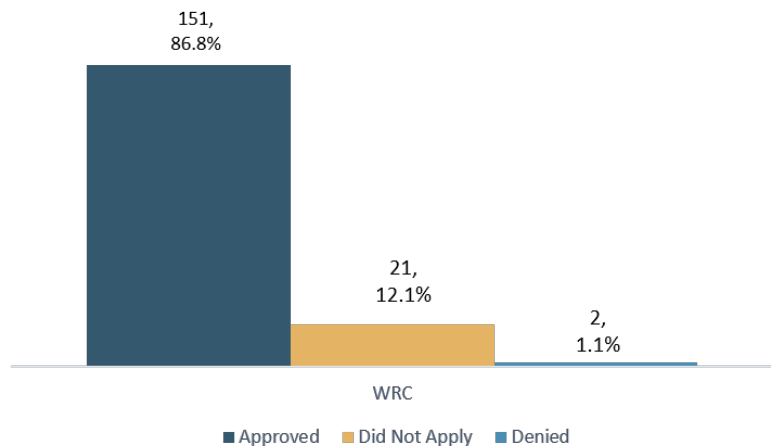


Figure 13: Wisconsin Resource Center (WRC) Medicaid Eligibility Determination Totals and Rates by Institution



# DEMOGRAPHICS

## GENDER AND RACE

This section of the report compares approval rates by demographic category. As shown in Figure 14, 4,779 males and 629 females were approved for Medicaid benefits in FY23. As indicated previously in this report, the Wisconsin Women’s Correctional System has the highest eligibility determination rates within the DOC.

Race is reported by persons in the care of the Department at intake. Figure 15 indicates persons who identify as white exceeded the average DOC approval rate by 3.2 percent. The data indicates individuals who identify as black were 3.4 percent below the DOC approval average for Medicaid benefits in FY23. American Indians and Alaskan Natives had the most significant approval increase since FY22 with an eligibility determination rate increase of 6.7 percent. It should be noted that Native Americans can apply for healthcare coverage through tribal agencies. The Indian Health Service (IHS) may be the preferred healthcare for Native Americans released from prison, though Medicaid programs can provide coverage to individuals even where IHS may not be available.

Figure 14: Medicaid Eligibility Determination Totals and Rates by Gender

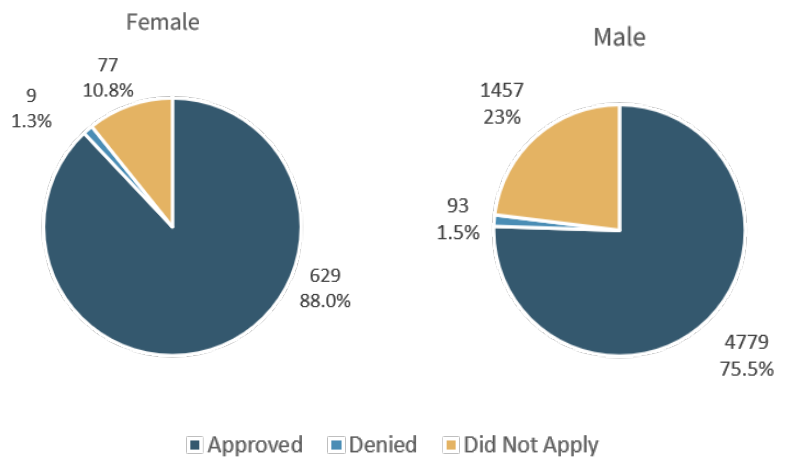
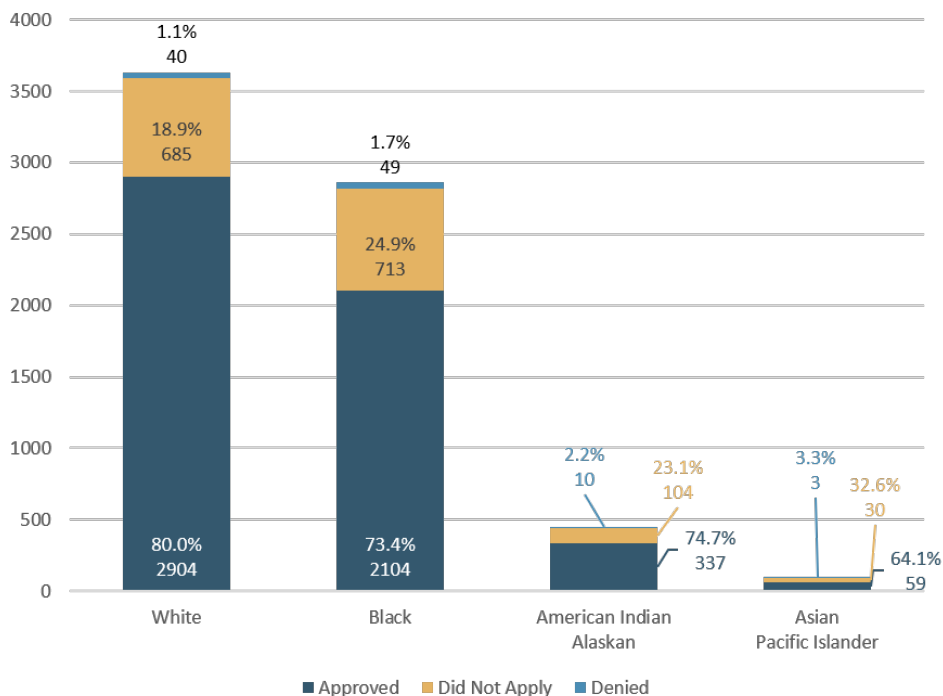


Figure 15: Eligibility Determination Totals and Rates by Race



# DEMOGRAPHICS



## MEDICAL ACTIVITY AND MENTAL HEALTH

The Medical Activity Classification comparison in Graph 16 serves as a depiction of the various levels of ability within the DOC and represents persons in our care with different levels of limitation (see Appendix A for activity definitions). Individuals classified with the ability to do more activities, primarily work, apply for Medicaid less often. Medicaid approval rates generally increase for individuals with more limited activity level classifications.

Figure 16 notes the Light Activity Classification exceeded the average DOC approval rate by 2.3 percent, the Moderate Activity Classification exceeded the average DOC approval rate by 4.8 percent, and the No Work Classification exceeded the average DOC approval rate by 3.5 percent.

Mental Health (MH) screening and classification is used in the Department to provide clinically appropriate mental health treatment to persons in our care (see Appendix A for MH code definitions). Approval rates generally increase as an individual's mental health needs increase.

The MH-1 Classification exceeded the DOC average approval rate by 5.1 percent, the MH-2A Classification exceeded the DOC average approval rate by 9.7 percent, and the MH-2B Classification exceeded the DOC average approval rate by 8.1 percent as noted in Figure 17.

The Reentry Legal Services (RLS) program provides Medicaid application assistance for those who may need additional support. Legal Action of Wisconsin provides three Paralegals who facilitate Medicaid applications at Oshkosh Correctional Institution (OSCI), Taycheedah Correctional Institution (TCI), Milwaukee Secure Detention Facility (MSDF), Robert E. Ellsworth Correctional Center (RE-ECC), and Racine Correctional (RCI)/Sturtevant Transitional Facility (STF). RLS submitted 762 successful applications, representing 14.1 percent of the total Medicaid application approvals in FY23.

Figure 16: Medicaid Eligibility Determination Totals and Rates by Medical Activity Classification

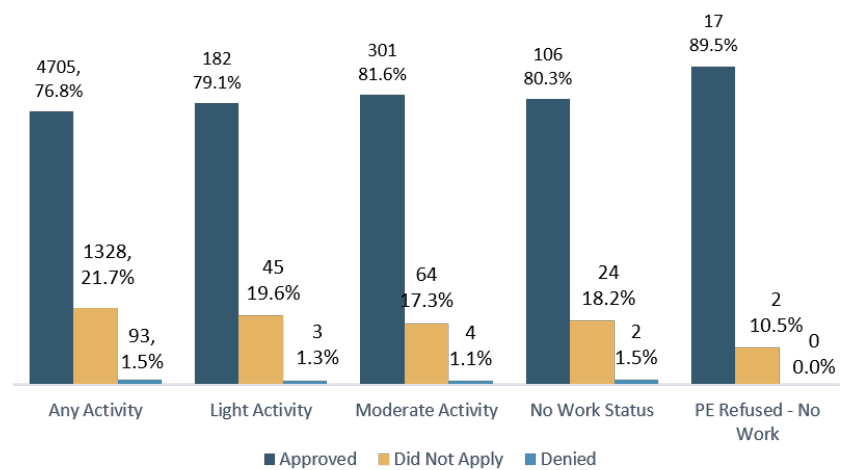
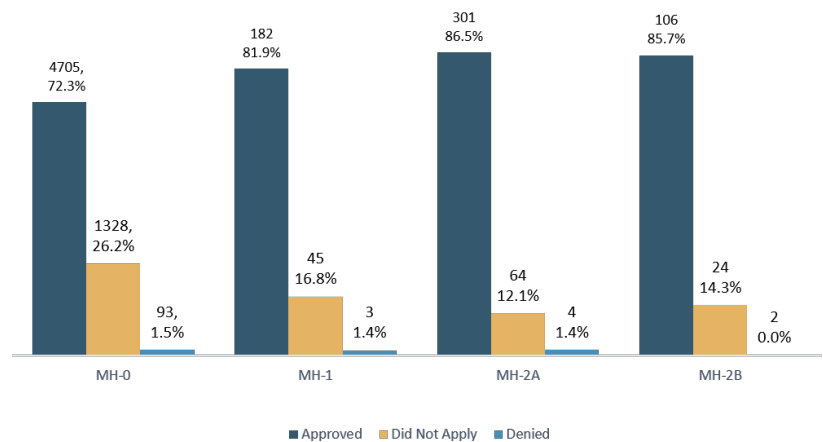


Figure 17: Medicaid Eligibility Determination Totals and Rates by Mental Health Classification



# INCOME MAINTENANCE AGENCY



The Wisconsin Department of Health Services (DHS) partners with counties and tribes to form income maintenance agencies. County agencies join together to form a consortium. There are 11 consortia throughout the state as seen in Figure 18. Consortia workers process applications for benefits for BadgerCare Plus, Medicaid, and FoodShare.

Figure 19 indicates the MiES consortium in Milwaukee County processes the largest number of applicants with 1,767 individuals approved for benefits in FY23.

Eight tribal agencies provide services separate from the county consortia and are noted separately in Figure 19. The Menominee Indian Tribe of Wisconsin administers the program in Menominee County. As noted previously in the report, in addition to Medicaid programs, the Indian Health Service (IHS) is also available to Native Americans returning to the community.

Figure 18: Wisconsin Income Maintenance Agency Areas

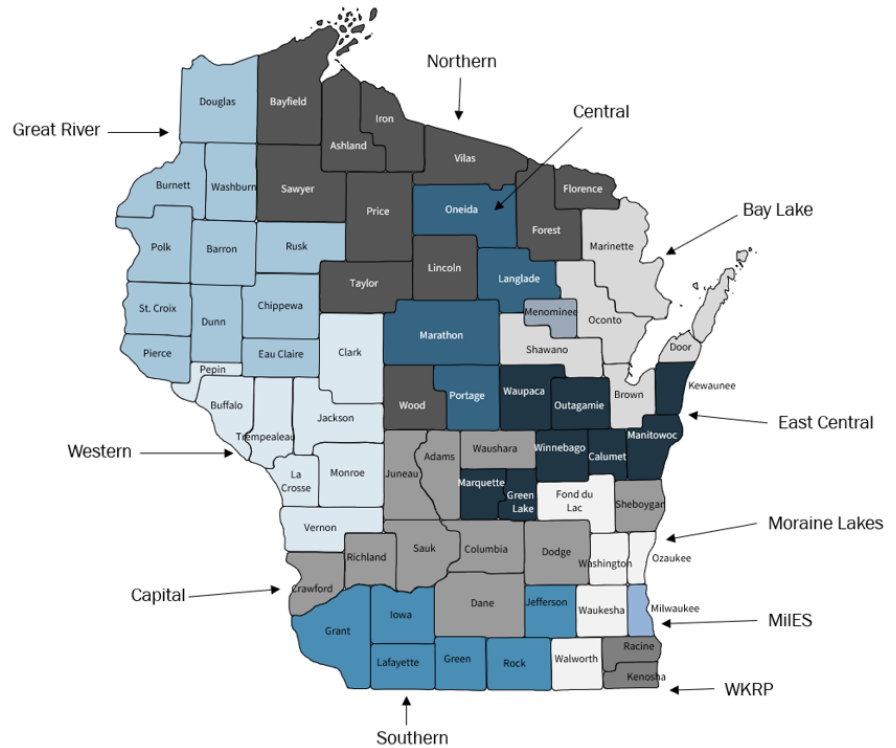
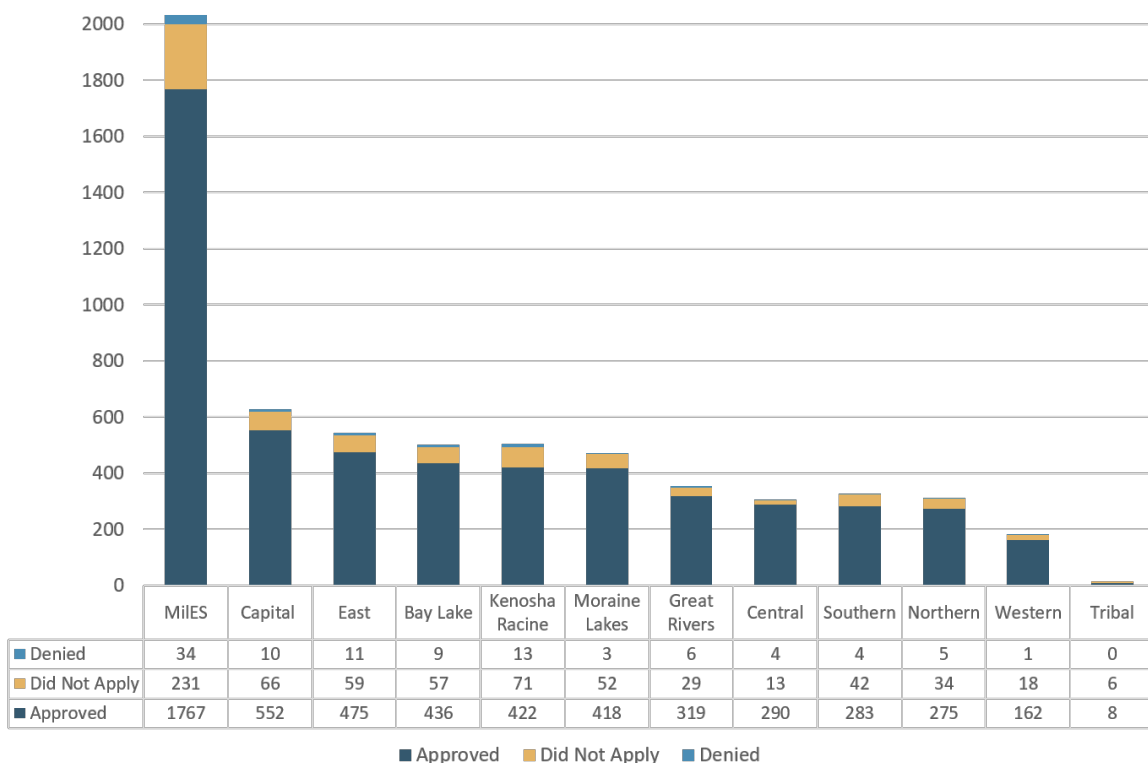


Figure 19: Medicaid Eligibility Determination Totals and Rates by Income Maintenance Agency



# APPENDIX A



## DEFINITIONS

**Any Activity:** The individual is physically fit to perform any type of work/activity.

**Did Not Apply:** This category includes two populations. The first group contains individuals who do not appear in the DHS data, meaning they have never received benefits. The second group contains individuals who have had previous periods of eligibility, but with no application activity during the time frames studied in this report.

**Eligibility Determination:** A technical term used by the Department of Health Services (DHS) describing the decision to enroll the applicant in Medicaid programs after processing the application and collecting the electronic signature of the applicant. In most cases involving telephone applications, this determination is made during the call. Eligibility determination is similar to program enrollment, but eligibility determination is the term used in the report to retain continuity with DHS descriptions.

**Facility Releases:** Includes all youth and adult releases incarcerated longer than 30 days in DOC custody and released from DOC facilities, certain county jails, the Wisconsin Resource Center, and Mendota Juvenile Treatment Center. If an individual had more than one qualifying release during the time frame, only the first qualifying release was included in this evaluation.

**Income Maintenance (IM) Agency:** This is a broad term that includes the IM Consortia, Milwaukee Enrollment Services, and the tribal agencies designated by the elected tribal governing body of a federally recognized Wisconsin Indian tribe or band and contracted by DHS to administer an income maintenance program.

**Income Maintenance (IM) Consortium:** A group of counties that is approved by the Department of Health Services to administer income maintenance programs. These counties staff and maintain a call center, conduct application processing and eligibility determinations, and conduct case management.

**Light Activity:** The individual is restricted from work assignments requiring steady paced activity. Individuals should be allowed to work at own pace.

**Medicaid:** Wisconsin Medicaid is a joint federal and state program that provides high-quality health care coverage, long-term care, and other services to over one million Wisconsin residents. There are many types of Medicaid programs. Each program has different rules, such as about age and income, that one must meet to be eligible for the program. (<https://www.dhs.wisconsin.gov/medicaid/index.htm>)

**Medical Activity Classification Description:** After completion of a physical exam, persons in our care are classified into the levels of activity that their health will tolerate. The descriptions are used in this report to approximate individuals that may have various levels of limiting health conditions.

**Mental Health (MH) Code 0:** There is no current mental health need. The person in our care does not need a follow-up visit with the Psychological Services Unit and is not seeing a psychiatrist for any reason.

**Mental Health (MH) Code 1:** The person in our care is receiving mental health services but does not have a serious mental illness. This code is not appropriate for individuals who only receive program services, such as substance abuse or sex offender treatment, and have no other mental health needs.

**Mental Health (MH) Code 2A:** A current diagnosis of, or being in remission from, the following conditions: Schizophrenia, Delusional Disorder, Schizophreniform Disorder, Schizoaffective Disorder, Other Specified (and Unspecified) Schizophrenia Spectrum and Other Psychotic Disorder, Major Depressive Disorder, Bipolar I Disorder, and Bipolar II Disorder. MH2-A also includes persons in our care with current or recent symptoms of the following conditions: Brief Psychotic Disorder, Substance/Medication-Induced Psychotic Disorder, head injury or other neurological impairments that result in behavioral or emotional dyscontrol, chronic and persistent mood or anxiety disorders, and other conditions that lead to significant functional disability.

**Mental Health (MH) Code 2B:** Persons in our care with a severe primary personality disorder, accompanied by significant functional impairment, and subject to periodic decompensation; i.e., psychosis, depression, or suicidality. If an individual has stable behavior for two years, the code may be reassessed. Excluded from MH-2B classification are persons in our care who have a primary diagnosis of Antisocial Personality Disorder and whose behavior is primarily the result of targeted goals rather than impairment from diagnosed mental illness.

**Moderate Activity:** The individual is restricted from work involving heavy lifting over 50 pounds; tasks which demand prolonged physical exertion such as excessive running, climbing, walking or the manual use of heavy machines.

**No Work Status:** The individual is unable to work.

# APPENDIX A



## DEFINITIONS

**Race:** Persons in our care report race during the assessment and evaluation process conducted at Dodge Correctional Institution (DCI) for males and at Taycheedah Correctional Institution (TCI) for females. Categories include: White, Black, American Indian/Alaskan Native, Asian or Pacific Islander, and Unknown.

**Refused PE/No Work Status:** The individual refused to participate in physical exam and cannot work.

**Releases Denied:** Individuals who have submitted applications and do not meet the criteria for Medicaid programs. The ten most common denial reasons are listed and discussed earlier in this report. Individuals with at least one denial during the month prior to, the month of, or the month after release without at least one month with an eligibility determination are recorded in this category.

**Releases Eligible:** For the purposes of this report, individuals are recorded as eligible if they have at least one eligibility determination during the month prior to, the month of, or the month after release.

**Suspension of Medicaid Status:** Wisconsin has developed a suspension policy for PIOC of all ages in various correctional facilities such as state prisons, federal prisons, and local jails. The suspension process will allow individuals incarcerated in these settings to maintain health care eligibility to support easier transition to the community and provide continuity of care so that they can immediately access Medicaid-covered services upon release from the facility. (For more information about this policy, see DHS Operations Memo 20-24 dated October 16, 2020.)

**Time frame:** The time frame of this report is state fiscal year 2023, and includes individuals with actual release dates on or after July 1, 2022, through June 30, 2023.





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