



STATE OF WISCONSIN
Department of
Corrections

WISCONSIN DEPARTMENT OF CORRECTIONS

MEDICAID APPLICATION ANNUAL REPORT

FISCAL YEAR 2024

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EXECUTIVE SUMMARY

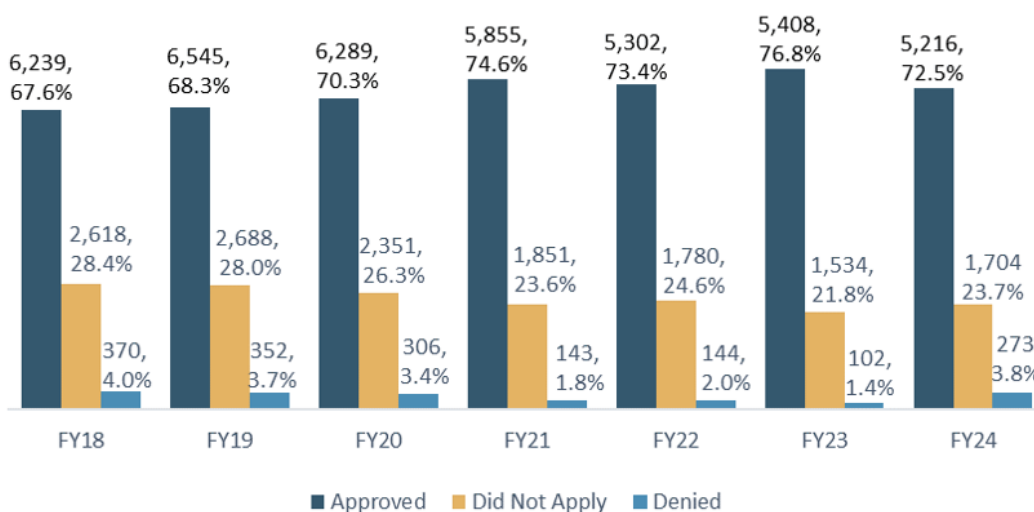


The Department of Corrections (DOC), Department of Health Services (DHS), and Income Maintenance (IM) agencies partner to provide individuals in DOC custody the opportunity to apply for Medicaid before release from incarceration. Individuals leaving prison with Medicaid approval can access medications and treatment for acute and chronic medical conditions, mental illness, and substance use disorders upon release. In Fiscal Year 2024 (FY24), there were 7,193 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, or Mendota Juvenile Treatment Center.

In FY24, 5,216 individuals were approved for Medicaid programs. Of the 72.5 percent of people released from incarceration that were approved, 69.7 percent were approved the month before release, 23.8 percent were approved the month of release, and 6.5 percent were approved the month following release. Approximately 23.7 percent of individuals did not apply for Medicaid, and 3.8 percent of the population applied for a Medicaid program and were denied. The overall approval rate decreased 4.3 percent from FY23 to FY24. At the onset of COVID, Medicaid implemented “continuous coverage” which suspended annual eligibility verifications. The unwinding of the suspended eligibility verifications concluded in FY24. The resuming of eligibility criteria and the recertification process has impacted residents of Wisconsin, including those preparing for release from incarceration. Even with the decreased approval rate, FY24 demonstrates an approximate five percent increase in approvals from pre-COVID years (2018-2020). This approval rate signifies 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



FACILITY OUTCOMES



MEN'S MAXIMUM

This fiscal year's report includes Medicaid approval rates over time by security classification and system. Columbia Correctional Institution (CCI), Dodge Correctional Institution (DCI), Green Bay Correctional Institution (GBCI), Waupun Correctional Institution (WCI) and Wisconsin Secure Program Facility (WSPF) are the men's maximum facilities.

The FY24 data show a 13.3 percent increase in releases from the men's maximum security facilities compared to releases in FY23. Figure 2 notes the men's maximum security facilities decreased eligibility determinations by 0.2 percent in FY24.

The DOC average approval rate in FY24 is 72.5 percent. Figure 3 indicates CCI exceeded the DOC average approval rate in FY24 and increased eligibility by 19.9 percent since FY23. WSPF also exceeded the overall DOC average for eligibility determinations in FY24 and increased eligibility by 33.7 percent since FY22. GBCI increased the institution's approval rate by 5.9 percent from FY23.

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

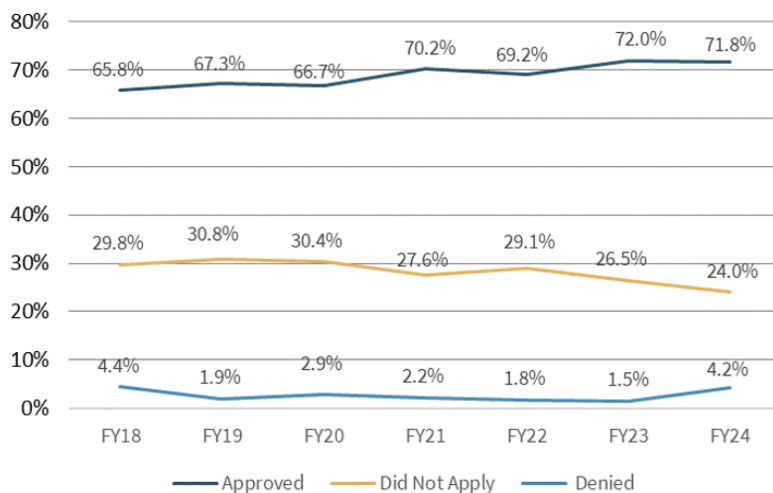
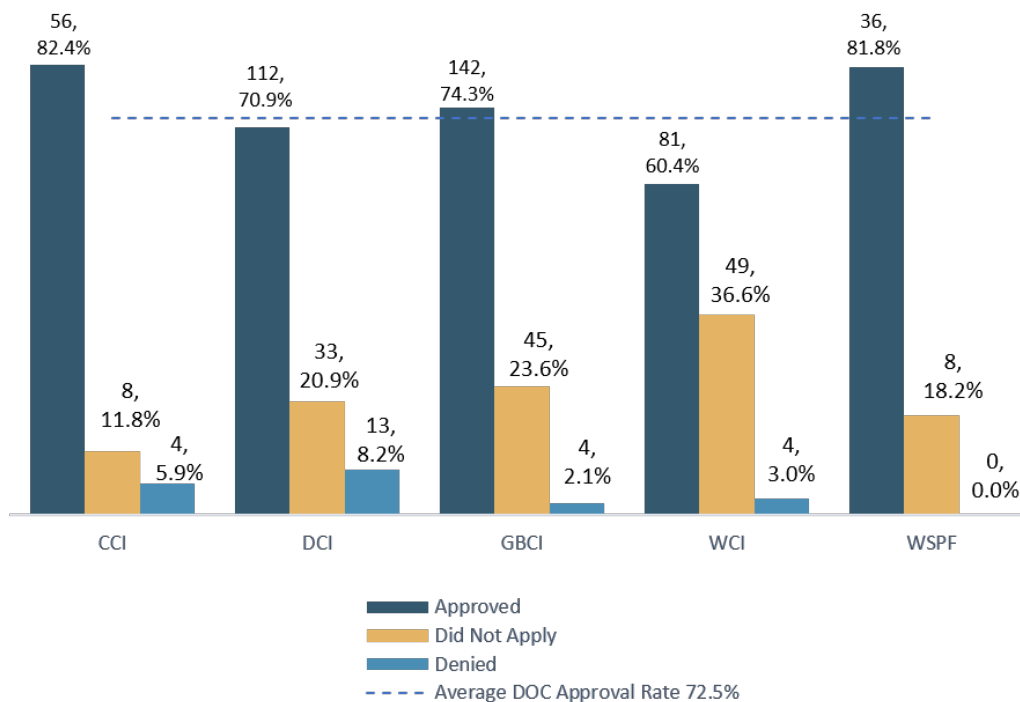


Figure 3: FY24 Men's Maximum Security Medicaid Eligibility Determination Totals and Rates by Institution



FACILITY OUTCOMES



MEN'S MEDIUM

Men's Medium Facilities include Fox Lake Correctional Institution (FLCI), Jackson Correctional Institution (JCI), 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) and Stanley Correctional Institution (SCI). The men's medium security classification saw an eligibility decrease of 4.68 percent since FY23 with an increase of individuals not applying or being denied, as illustrated in Figure 4. This change in trend is indicative of COVID unwinding in which Medicaid eligibility determination is required for all consumers annually. Despite the reverse trend from previous fiscal years, the men's medium security classification saw an approval rate above the DOC average approval rate of 72.5 percent in FY24.

Figure 5 indicates FY24 Medium Security Medicaid Eligibility Determination Totals and Rates by Institution. OSCI saw the highest approval rate of any medium security institution and exceeded the DOC average approval rate by 11.4 percent. MSDF exceeded the DOC average approval rate by 11.4 percent, while FLCI and NLCI exceeded it by 1.6 and 1.3 percent respectively.

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

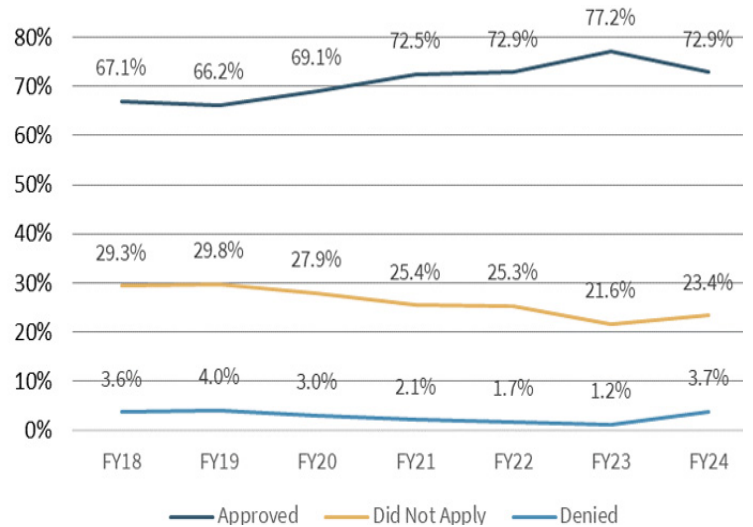
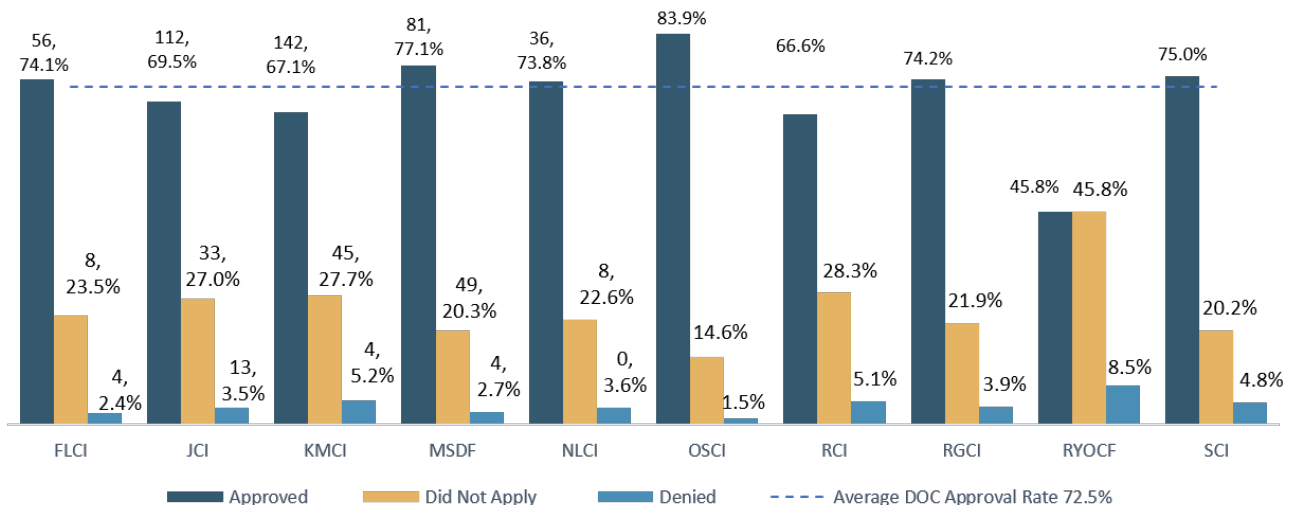


Figure 5: FY24 Men's Medium Security Medicaid Eligibility Determination Total and Rates by Institution



FACILITY OUTCOMES



MEN'S MINIMUM

Chippewa Valley Correctional Treatment Facility (CVCTF), Oakhill Correctional Institution (OCI), Prairie du Chien Correctional Institution (PDCI), and Sturtevant Transitional Facility (STF) are the men's minimum security facilities. In FY24, men's minimum security institutions increased Medicaid application approval rate to 80.1 percent which is 7.6 percent higher than the average DOC approval rate. Figure 6 indicates that approval rates in men's minimum security institutions continue to increase well past the DOC average and rates of individuals not applying has decreased consistently over the last two fiscal years.

Figure 7 indicates Minimum Security Medicaid Eligibility Determination Totals and Rates by Institution. CVCTF exceeded the DOC average approval rate by 14.8 percent and increased the institution-specific approval rate by 1.7 percent from the previous fiscal year.

STF did not exceed the DOC average approval rate of 72.5 percent, but did increase institution-specific approval rate by 12.6 percent from FY23. PDCI exceeded the DOC average approval rate by 5.6 percent in FY24.

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

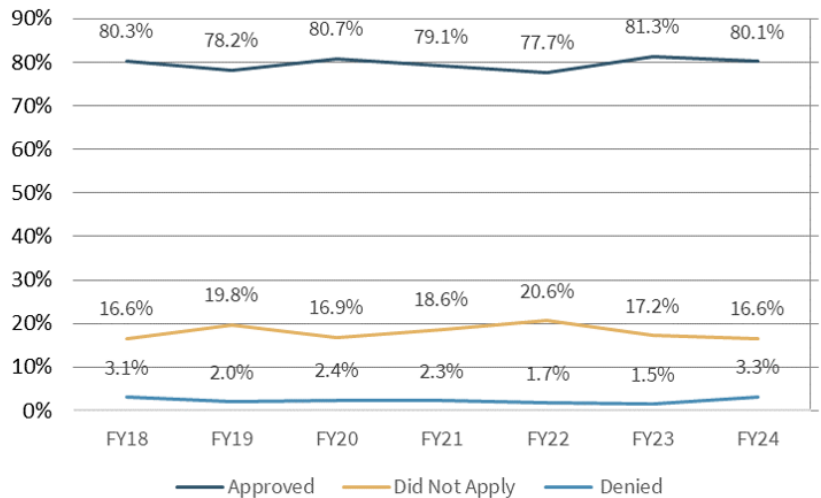
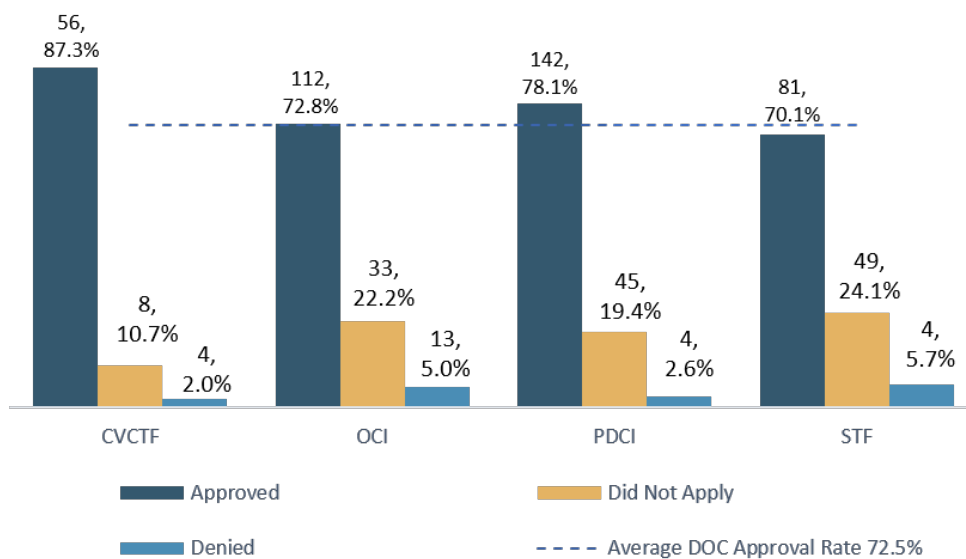


Figure 7: FY24 Men's Minimum Security Medicaid Eligibility Determination Totals and Rates by Institution



FACILITY OUTCOMES



WISCONSIN CORRECTIONAL CENTER SYSTEM (WCCS)

The WCCS facilities are Black River Correctional Center (BRCC), Drug Abuse Correctional Center (DACC), Flemlers 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), and Winnebago Correctional Center (WCC). FY24 data continues to show a stabilization of Medicaid application approval since the COVID pandemic.

Figure 9 indicates FY23 WCCS Medicaid Eligibility Determination Totals and Rates by Institution. The DOC average approval rate for FY24 is 72.5 percent. FCC exceeded the DOC average approval rate by 4.2 percent. DACC exceeded the DOC average approval rate by 7.6 percent. DACC is one of many Wisconsin Correctional Center System facilities offering substance use treatment programming. 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

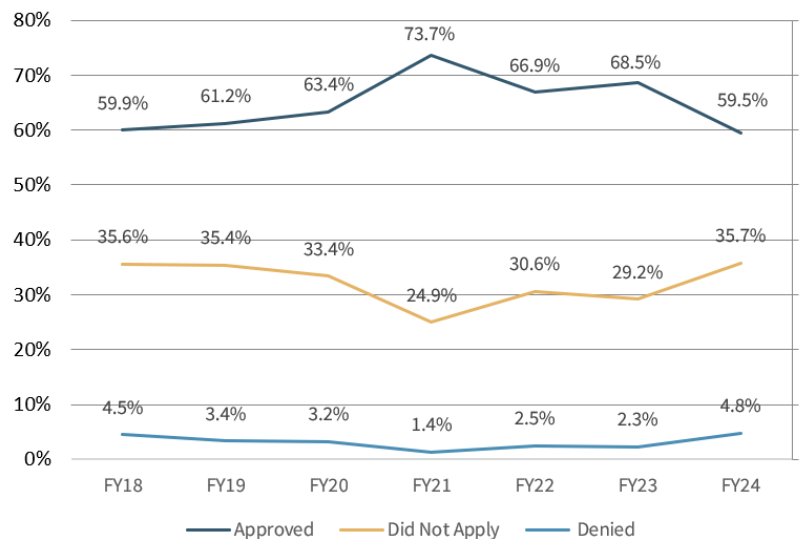
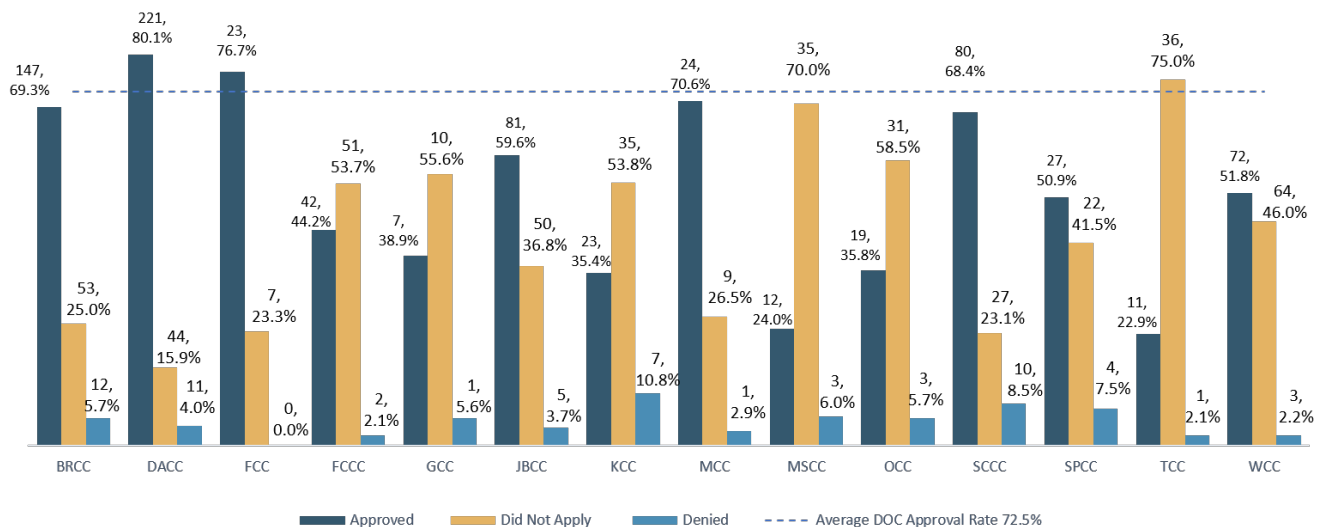


Figure 9: FY24 Wisconsin Correctional Center System Medicaid Eligibility Determination Totals and Rates by Center



FACILITY OUTCOMES

WISCONSIN WOMEN'S CORRECTIONAL SYSTEM (WWCS)

The Wisconsin Women's Correctional System (WWCS) includes Taycheedah Correctional Institution (TCI), Milwaukee Women's Correctional Center (MWCC), and Robert E. Ellsworth Correctional Center (REECC). WWCS showed the highest approval determination rate of DOC facilities in FY24 at 84.5 percent. In conjunction, the rate at which releasing individuals are not applying is 11.2 percent lower than the DOC average of individuals not applying.

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 FY24 Medicaid Eligibility Determination Totals and Rates by Institution. MWCC exceeded the DOC average approval rate by 11.2 percent. TCI exceeded the DOC average approval rate by 14.7 percent and MSDF exceeded the DOC average approval rate by 15.7 percent and increased facility eligibility by two percent since FY23.

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. Access to Medicaid is critical for the continuity of care, understanding female clients have the highest rate of serious mental illness in the DOC.

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

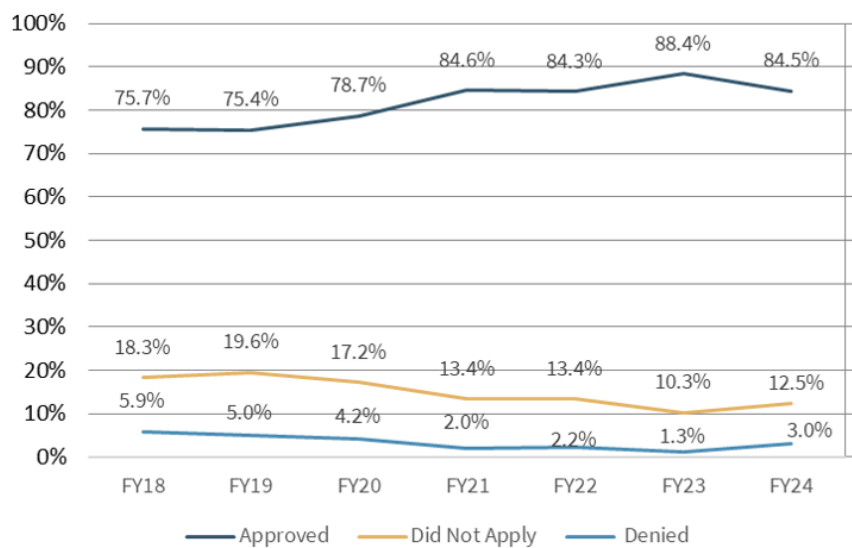
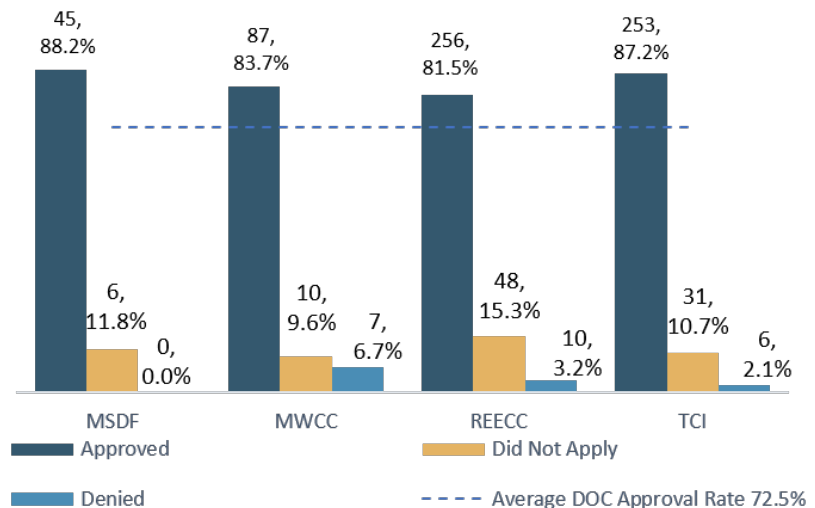


Figure 11: FY24 Wisconsin Women's Center System Medicaid Eligibility Determination Totals and Rates by Facility



FACILITY OUTCOMES



OTHER FACILITIES

The Division of Juvenile Corrections (DJC) houses a small population at two DOC facilities - Lincoln Hills School (LHS) and Cooper Lake School (CLS). As indicated in Figure 12, one youth from CLS and 17 youth from LHS were released in FY24. DJC staff work closely with after-care 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 and may remain on that plan until the age of 26, reducing the need for Medicaid coverage.

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 seven individuals of which one was approved for benefits, six 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 being 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 FY24 by 4.8 percent.

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

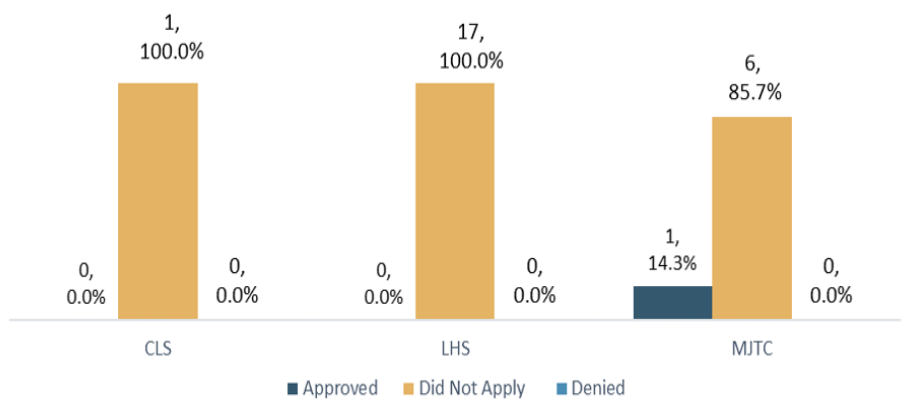
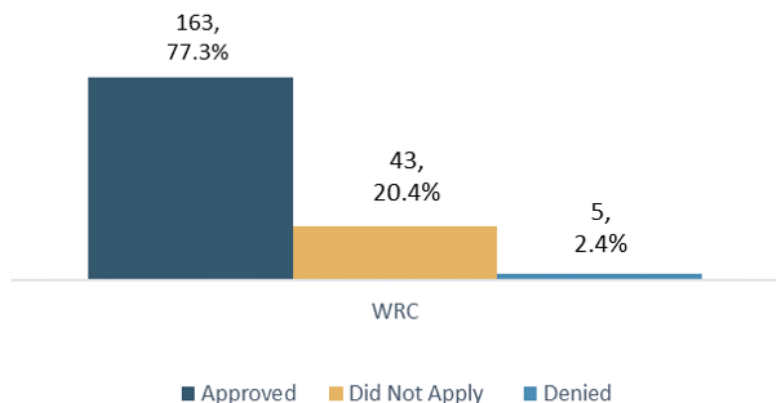


Figure 13: Wisconsin Resource Center (WRC) Medicaid Eligibility Determination Totals and Rates by Institution



DEMOGRAPHICS

GENDER AND RACE

This section of the report compares approval rates by demographic category. As shown in Figure 14, 4,558 males and 658 females were approved for Medicaid benefits in FY24. As indicated previously in this report, the Wisconsin Women’s Correctional System (WWCS) has the highest eligibility determination rates within the DOC.

Race is self-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 2.4 percent. The data indicates individuals who identify as black were 2.4 percent below the DOC approval average for Medicaid benefits in FY24. It should be noted that Native Americans can apply for healthcare coverage through tribal agencies. 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

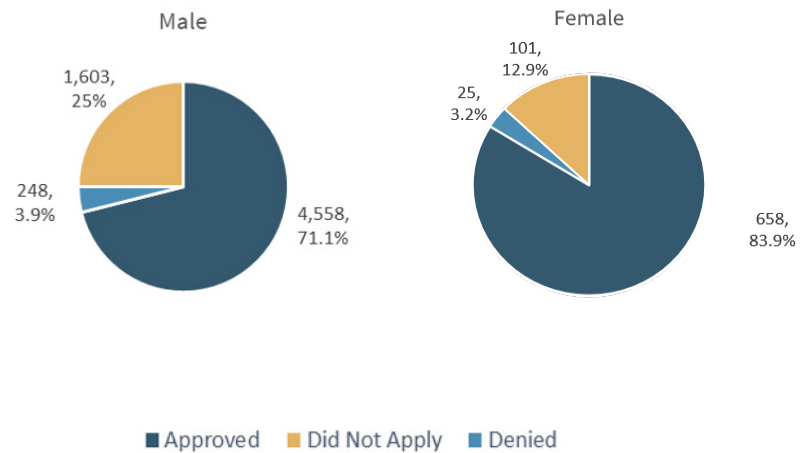
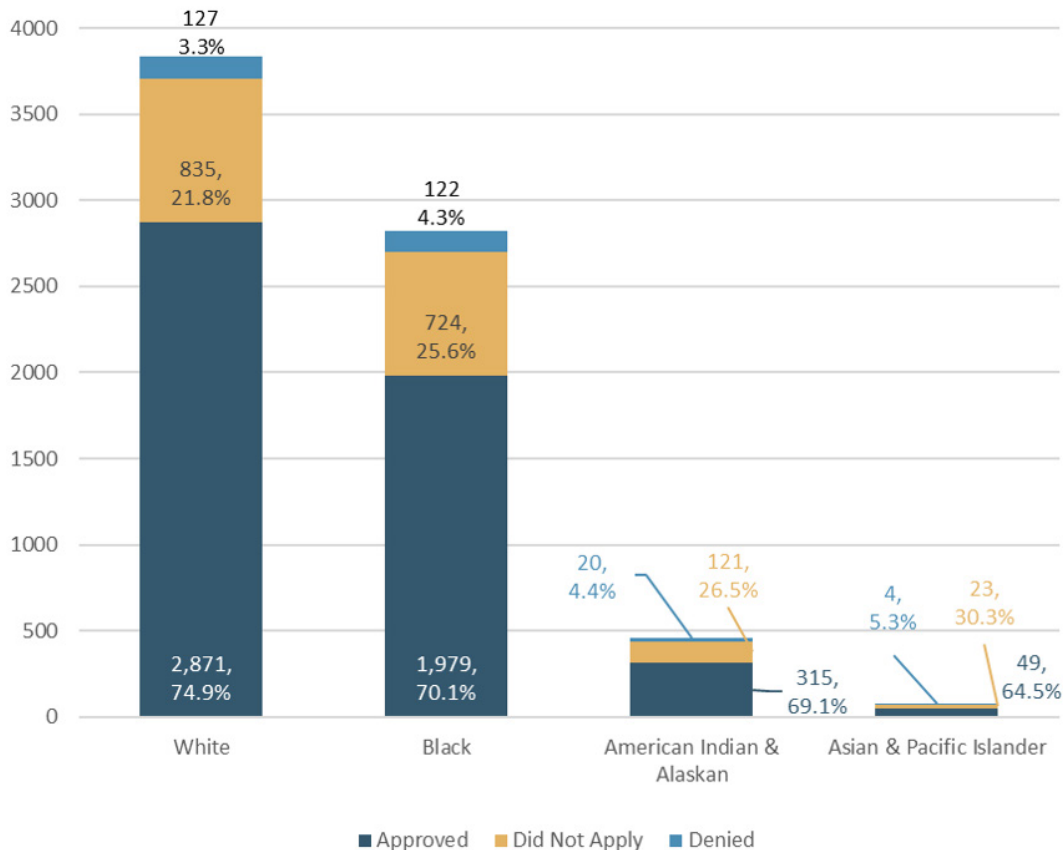


Figure 15: Eligibility Determination Totals and Rates by Race



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 6.9 percent, the Moderate Activity Classification exceeded the average DOC approval rate by 3.3 percent, and the No Work Classification exceeded the average DOC approval rate by 2.0 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 mental health needs increase.

The MH-1 Classification exceeded the DOC average approval rate by 6.5 percent, the MH-2A Classification exceeded the DOC average approval rate by 9 percent, and the MH-2B Classification exceeded the DOC average approval rate by 20.4 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 Institution (RCI)/Sturtevant Transitional Facility (STF). RLS assisted clients in completing 1,043 applications in FY24.

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

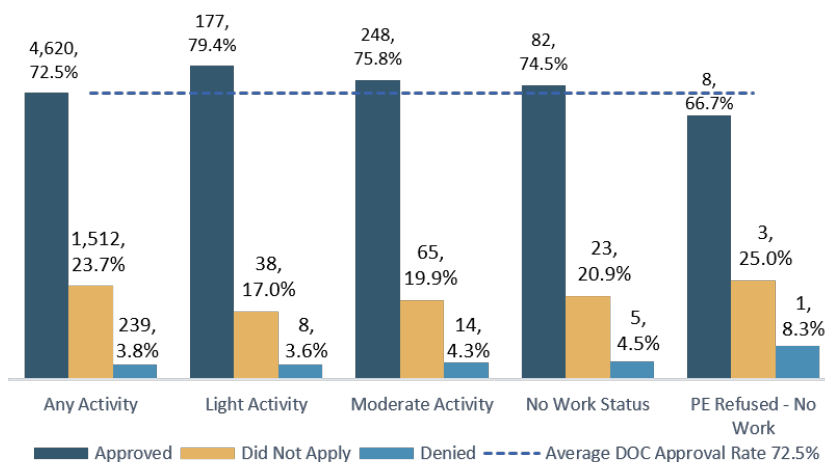
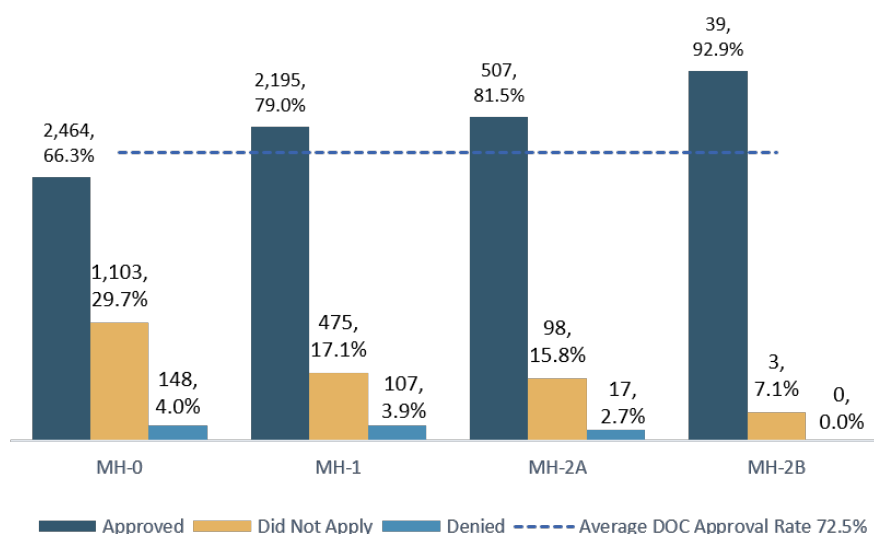


Figure 17: Medicaid Eligibility Determination Totals and Rates by Mental Health Classification



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 MiIES consortium in Milwaukee County processes the largest number of applicants with 1,655 individuals approved for benefits in FY24.

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

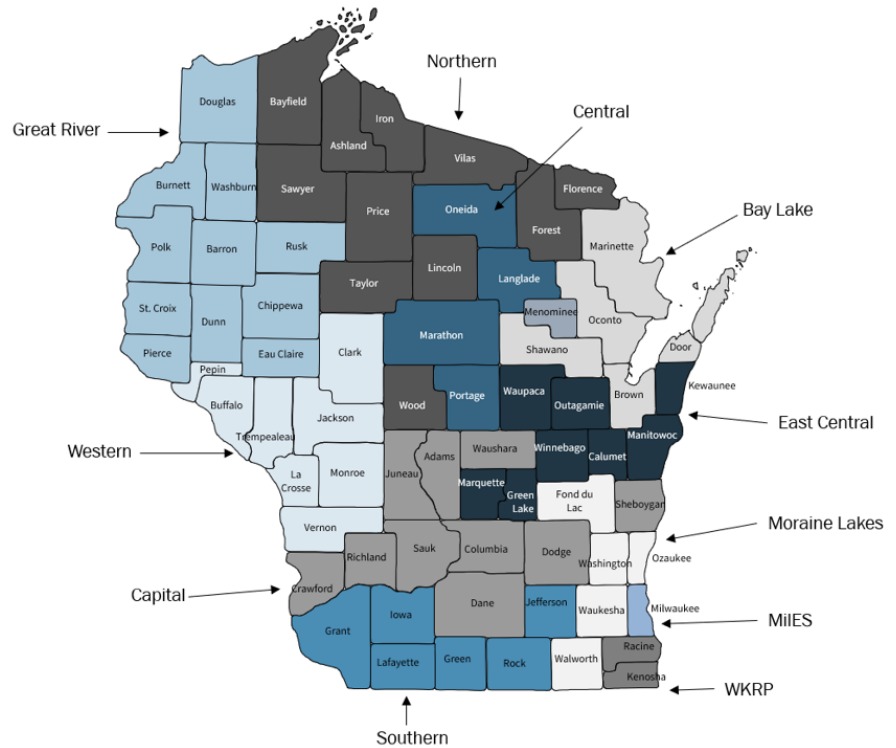
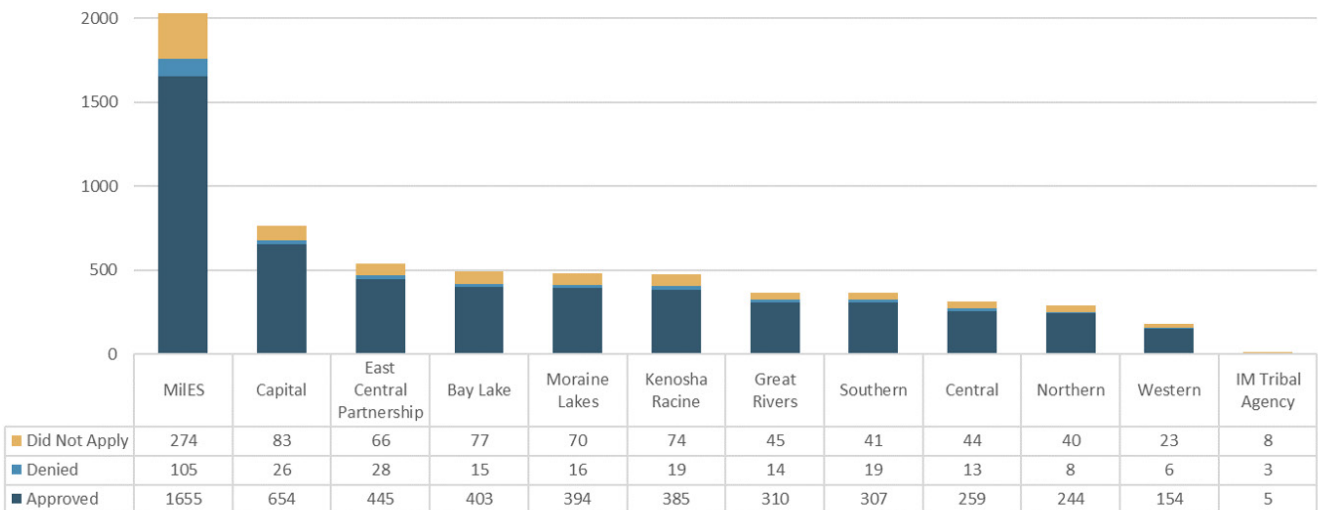


Figure 19: Medicaid Eligibility Determination Totals and Rates by Income Maintenance Agency



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 (PIOC) 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 2024, and includes individuals with actual release dates on or after July 1, 2023, through June 30, 2024.



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State of Wisconsin
Department of Corrections

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