

Thank you for having DVHA in the Joint Legislative Justice Oversight Committee to provide testimony on H.222 this week. We were happy to have the chance to speak to the bill as it relates to continuity of care in MOUD prescriptions for justice-involved individuals reentering the community.

During testimony, we received a few follow-up questions that I am happy to provide some insight into on behalf of the Department:

1. What is the waiver match for California, relative to what we're looking at in VT?

The waiver match for California is 50%, compared to the Vermont match which is higher at 56.75%

2. Are there data for Medicaid enrollment/utilization for individuals leaving incarceration and reintegrating into the community?

This need has been flagged and we are working to provide data. This will have to be a joint undertaking between DOC and DVHA to ensure our data is accurately reflecting utilization for Medicaid members reentering the community following incarceration. We will work closely with DOC to collect and analyze this data, but due to concerns of complexity and confidentiality, it may take some time to establish. We do not have a time frame currently, but this is an ongoing discussion and an identified concern.

3. What is the conversation around presumptive eligibility? Can we get an idea of feasibility for the next committee meeting (12/12)?

Presumptive eligibility is a narrow federal concept to do with when providers can determine Medicaid eligibility. It would not apply here. We are in discussions regarding whether Waiver While Waiting may be an avenue we can adapt to use here for individuals reentering the community. WWW is a DAIL program specific to LTC Medicaid.

4. Can we provide data on how long initial Medicaid enrollment takes on average following incarceration for a first time member?

When DVHA receives an application from DOC for an individual leaving incarceration, it is processed within 3 business days on average.

5. Are there transportation issues for members to access pharmacies?

This is part of what is covered in DOC's discharge planning process, including helping individuals set up appointments with community health providers, and maintaining prescription coverage for MOUD. DOC may be

able to speak in more detail. It should be noted that DVHA does administer the Non-Emergency Medical Transportation program (NEMT), which while not specific to individuals released from incarceration does provide benefits for members who require transport for non-emergency medical needs, including prescriptions.