

# Process and Evaluation Workgroup

## Meeting Minutes

June 3, 2021

In attendance:

**Janene Grigsby:** Alameda County Probation Department

**Bob Britton:** The Interfaith Coalition for Justice in our Jails

**David White:** The Interfaith Coalition for Justice in our Jails

**Rashad Eady:** Alameda County Behavioral Health

**Nancy French:** Alameda County Probation Department

**Jean Moses:** Interfaith Coalition for Justice in our Jails

**Sara Oddie:** Supervisor Wilma Chan's Office

**Shahidah Lacy:** Supervisor Keith Carson's Office

**Sophia Lai:** Alameda County Behavioral Health Care

**Charlie Eddy:** Urban Strategies Council

A summary of the presentation by the workgroup addressing the issue of enrolling people in Medi-Cal when leaving Santa Rita Jail is listed below:

- The Interfaith Coalition came into existence because of this issue.
- The Coalition submitted 1100 signatures asking the County Board of Supervisors to implement AB 720 and designate an entity to go into SRJ to enroll people in Medi-Cal.
- AB 720 addresses issues beyond Medi-Cal including other Affordable Care Act programs. The law encourages counties to enroll as many people as possible into Medi-Cal.
- According to a report done by the County's Health Care Services Agency, approximately 20,000 of the 25,000 people released from Santa Rita Jail in 2019 had

been released in less than 30 days; there is a presumption that these people did not lose their Medi-Cal benefits. County staff did not attempt to enroll these individuals in Medi-Cal; their eligibility and/or enrollment status was unknown. Members of our workgroup think people who are released before 30 days should not be ignored.

- Enrollment status is technically suspended when an individual becomes incarcerated.
- The law says people released from jail between 30 days and one year should have their benefits automatically reinstated. The reality is if a person makes it to a clinic Medi-Cal can be reinstated, but if they go to a pharmacy, they are denied medication, because benefits have been suspended and not resumed.
- We think four categories should be created:
  - Inmates released before thirty days.
  - Inmates released between thirty days and one year.
  - Sentenced inmates for a year or more.
  - The pre-trial population, some are inside for over a year.
- We think the Sheriff's Office should provide Social Services with a "heads up" 30 days prior to a sentenced inmates release so SSA (or designee) could enroll the inmate in Medi-Cal.
- Every inmate should be provided a packet of information informing them about Medi-Cal, the release time takes 6 hours, so we think it is possible.
- Since COVID, the Sheriff has been providing inmates with tablets; SSA or the designated entity could communicate with inmates via the tablet to enroll them in Medi-Cal.
- The law says, being incarcerated should not be a barrier to registering for Medi-Cal.
- People are entitled to have benefits turned on when they leave Santa Rita Jail.
- Individuals who are released pre-trial are eligible to be enrolled in Medi-Cal; according to our calculations pre-trial makes up 90% of the people incarcerated.
- The issue of negotiating with the union, and/or challenges with entering the jail are eliminated when the communication is done via tablet. AB 720 says being in jail will not be a barrier to enrolling people.
- Medi-Cal is a federal program, and the County is missing an opportunity, to get a significant number of people enrolled. Specifically, people with mental health issues; if enrolled in Medi-Cal there is a better possibility of getting them connected to their meds and recidivism may be reduced.

A summary of the discussion after the presentation is listed below:

- Can you add people who go to CDCR as a fifth category of inmates?
- If Social Services were to issue an RFP, do we know if there are entities who may be interested in doing the work? We would need to start this soon, since the RFP process is so slow.
- Social Services has said they are interested in enrolling people in Medi-Cal.
- The working group has done a great job addressing this issue. The tablets can also be used to educate inmates about health and wellness in addition to Medi-Cal or any other benefit programs.
- This issue should be brought to the CCP EC since all the relevant departments attend that meeting.
- Have you talked to Social Services or the Sheriff about using the tablets?
- The workgroup is proposing Social Services do the enrolling of the inmates, so we would not need the Sheriff's approval for them to do the work. In addition, if another entity would be the designee, Social Services will need to "turn-it on." We did not present this comprehensive proposal to Social Services. This is a County problem not a Social Services problem, which is why we want to bring it to CCP EC.
- It was confirmed that Social Services was not currently a member of the CCP EC, so bringing it there may not be the best option.
- At this juncture you need to go to Social Services and get them to say yes or no. Do we have an economic impact of not enrolling this population in Medi-Cal? If Social Services says no, then perhaps take it to the Social Services Committee.
- Social Services has suggested they are willing to RFP the service, once they know how many people they are dealing with.
- The workgroup agreed to make the full proposal to Social Services and report back on the response.

Next the group began to discuss issues they would take on in the future:

- At the Fiscal and Procurement meeting; and the CAB meeting, requests were made for funding, some very basic questions could not be answered. Perhaps we should develop some threshold questions for requesting funding.
- For contract renewals the questions are clear but for new contracts we don't want the inquiry to stifle innovation.
- We are giving away money we need to be transparent with the results.

- It was agreed to start looking at some basic ideas for recommending funding for approval.

The meeting adjourned at 11:39