Department of Corrections

Health Services Overview and Updates

Healthcare Contract

Contract Overview

- **Three-year contract** with Wellpath began July 1, 2023
- Cost based on **per member per month** (PMPM)
    - Set amount multiplied by an average daily population, includes all costs such as staffing, services, pharmacy, equipment, specialty care, etc.
- Year 1 – PMPM = **$2,253.33 → $33.8 million**
- Year 2 – PMPM = **$2,476.81 → $37.1 million**
- Year 3 – PMPM = **$2,636.74 → $39.6 million**

Structure

- Set using National Commission on Correctional Healthcare (NCCHC) standards as well as Vermont-specific standards, includes partnerships w/ VDH, DVHA, and AHS
- DOC philosophy is to hold our healthcare to the **community standard of care**
- Includes **comprehensive healthcare services:**
    - Clinic, infirmary level care, health, mental health, dental, on-site/off-site specialty

Intake & Screening

Facility Admission

Security booking begins process

Initial Receiving Screening

Within 4 hours of booking

Initial Health Assessment

Within 7 days of booking

Additional Mental Health & Substance Use Assessment

Within 7 days of booking and as determined appropriate by screening & assessment

Dental Examination

Within 30 days of admission

Current Priorities

Wellpath Strategic Action Plan

- Organizing and tracking major system changes.
- Redesigning operational workflows to improve clinical processes, and drive consistency across sites, better documentation, and better care.
- Enhancing analytical capabilities within the EHR for better reporting and population health analysis.

Medicaid Reentry Project

- Enhancing release planning including Medicaid enrollment, medications at release, post-release appointments, continuity of care, and collaboration with VCCI.
- Standing up claim submission.

Improving Trust and Communication with Patients

- Surveying patients annually about their health and experience of their healthcare.
- Streamlining medical records request processes.
- Implementing electronic sick calls.

Enhanced Substance Use Treatment

- Enhancing substance use disorder treatment services to offer additional counseling and therapy.
- Piloting at Northwest State and Chittenden Regional Correctional Facility.

Improvements in Care, 2 Years In

Staffing

- **88.2%** staffed, a **10% increase** year over year

Backlogs

- **78% reduction** in patients past due to see the medical or dental provider since high in February
- **97% reduction** in patients past due to see the psychiatric provider since high in January
- Even greater improvement compared to January 2024

Continuous Quality Improvement

- CQI studies of critical standards of care at each facility show consistent improvement of scores since January 2024

Enhanced Release Planning

- Will have a medical discharge planner at every site
- Effectively implementing medications at release
- Increasing collaboration between Wellpath, DOC Caseworkers, and VCCI to support continuity of care

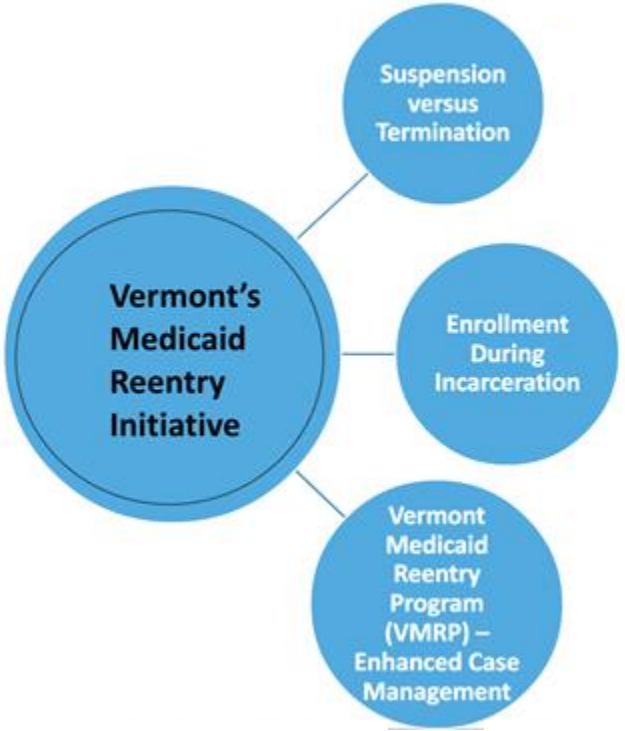
1115 Waiver: Medicaid Reentry Project

For Everyone:

- Suspension of Medicaid eligibility upon incarceration, re-activated upon release
- Medicaid eligibility verification and enrollment assistance

For Eligible Individuals:

- All Medicaid-enrolled people in correctional facilities who are post-adjudicated will be eligible for the new benefit 90 days pre-release



1115 Waiver: Medicaid Reentry Project

Medicaid Reentry Benefit Services:

- Vermont Medicaid Reentry Program (VMRP)
  - Care coordination lead by the VT Chronic Care Initiative (VCCI)– health care coordination and comprehensive reentry (NEW)
- Peer support services (NEW)
  - Beginning 2027
- Medication administration including Medication Assisted Treatment (MAT) (newly billable)
- 30 day supply of medications (newly billable)
- Screening and diagnostic services for common health conditions (newly billable)

System Initiatives

- Alleviating backlogs and sick call review
- CorrecTek (DOC EHR) improvements:
  - Formulary/medication reconciliation
  - Improved documentation
- Implementation of new internal MAT Policies and Procedures:
  - Handling aberrant use (from a clinical perspective)
  - Getting to therapeutic dose in a timely way
  - Treating withdrawal symptoms with buprenorphine, when appropriate
  - Onboarding new central MAT provider and creating mini "hub and spoke" model
- Fully implementing release medications and standardizing across all sites
- Standardizing and building out release planning through the Medicaid initiative

Questions?

Contact

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Constituent Services

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Appendix

Health System Challenges

- Technology:
  - Overly cumbersome and outdated EHR (upgrade planned)
  - Frequent connectivity issues
- Significantly increased ADP
- Access to tertiary hospital care
- Access to post-acute care (skilled nursing following hospitalization)
- Aging population with inflexible infrastructure unable to meet growing needs:
  - Infirmary space
    - Living unit space limited, challenge moving folks out of infirmary, no room for new patients
    - Using infirmary as long term care
  - Access to long term skilled and personal care, inside and outside facility