

1022 – JUSTICE SYSTEM REACH-IN PROGRAM

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I. PURPOSE

This Policy applies to ACC, ACC-RBHA, ALTCS E/PD, DCS CHP (CHP), and DES DDD (DDD) Contractors; and Fee-For-Service (FFS) Providers serving: the American Indian Health Program (AIHP), Tribal ALTCS, TRBHAs, and all FFS populations, excluding Federal Emergency Services Program (FESP). (For FESP, refer to AMPM Chapter 1100). [This Policy establishes requirements related to justice system reach-in activities, pre and post release care coordination, Consolidated Appropriations Act requirements, and AHCCCS Reentry Demonstration services. This Policy includes responsibilities related to member identification, outreach, referral, care coordination, continuity of care, and coordination with AHCCCS-approved providers delivering covered pre-release and reentry services. These activities support continuity of care for justice-involved members transitioning from carceral settings to the community.](#)¹ ~~This Policy specifies requirements for the Contractor to provide justice system reach-in care coordination activities that facilitates the transition of members transitioning out of jails, prisons, and detention facilities into communities.~~

II. DEFINITIONS

Refer to the [AHCCCS Contract and Policy ACOM and AMPM Dictionary](#)² for common terms found in this Policy ~~including~~³:

DESIGNATED REPRESENTATIVE (DR)	HEALTHCARE DECISION MAKER (HCDM)	INTERGOVERNMENTAL AGREEMENT (IGA)
MEDICATIONS FOR OPIOID USE DISORDER (MOUD)	MEDICATION ASSISTED TREATMENT (MAT)	MEMBER

[For purposes of this Policy, the following terms are defined as:](#)

CARCERAL SETTING

[A jail, detention facility, juvenile correctional facility, state prison, tribal correctional facility, or other public institution in which an individual is incarcerated.](#)

¹Expanded policy purpose to incorporate AHCCCS Reentry Demonstration services, post-release coordination requirements, and care coordination responsibilities beyond Consolidated Appropriations Act implementation.

² Revised to update dictionary name change.

³ Removing definition box of common terms, they can be found in the AHCCCS ACOM and AMPM Dictionary.

**REENTRY
DEMONSTRATION**

The AHCCCS 1115 Reentry Demonstration approved by Centers for Medicare and Medicaid (CMS) that allows specified Medicaid and Children’s Health Insurance Program (CHIP) services to be delivered to eligible individuals prior to release from a participating carceral setting.

**TARGETED
CASE MANAGEMENT (TCM)**

Case management services delivered in accordance with applicable federal and AHCCCS requirements to assess needs, coordinate services, facilitate referrals, support transition planning, and promote continuity of care.

PRE-RELEASE SERVICES

Covered services delivered prior to release from incarceration through the Consolidated Appropriations Act and/or AHCCCS Reentry Demonstration.⁴

III. POLICY

~~Justice system reach-in care coordination facilitates the transition of members transitioning out of jails, prisons, and detention facilities into communities.~~ Justice system reach-in and pre-release service care coordination requirements are designed to ⁵support members transitioning from jails, prisons, and detention centers back into the community to promote effective transitions, reduce recidivism, improve health outcomes, and ensure members receive timely access to medically necessary services.⁶ AHCCCS is engaged in a data exchange process that allows AHCCCS to suspend health plan enrollment upon incarceration, rather than discontinuing eligibility. Upon the member’s release, the member’s AHCCCS health plan enrollment is reinstated allowing for immediate care coordination activities. In addition, Centers for Medicare and Medicaid Services (CMS) requires states to provide certain pre-release services for Medicaid and Children’s Health Insurance Program (CHIP) eligible justice-involved youth under the Consolidated Appropriations Act further necessitating Contractor participation in coordination between carceral settings and community providers. During initial implementation phases, pre-release services required under the Consolidated Appropriations Act and AHCCCS Reentry Demonstration are delivered by AHCCCS registered providers, and coordinated with Contractor Justice System Liaisons, Justice System Partners and Carceral Settings.⁷ To support these initiatives the Contractor is required to participate in justice system reach-in and pre-release care coordination efforts.

For members eligible under the AHCCCS Reentry Demonstration, pre-release services may be delivered for up to 90 days prior to an anticipated release date.

~~The Contractor shall monitor and report justice system reach-in outcomes and shall submit Attachment A and Attachment B as specified in Contract. In addition, AHCCCS may run performance metrics such~~

⁴ Added definitions for reentry-related terminology to align with AHCCCS Reentry Demonstration implementation and improve consistency across policy and operational documents.

⁵ Added language for sentence clarification.

⁶ Revised for identification of objectives of reach-in responsibilities.

⁷ Addition of Centers for Medicare and Medicaid Services (CMS) and requirements for justice-involved individuals under Consolidated Appropriations Act and implementation of Reentry Demonstration services and transition from planning activities to operational service delivery.

~~as emergency room utilization, inpatient utilization, reduction in recidivism and other access to care measures for the population to monitor care coordination activities and effectiveness.⁸~~

~~Fee-For-Service (FFS) p~~Providers serving Fee-For-Service members⁹ shall collaborate with justice system stakeholders to provide care coordination activities for FFS members transitioning out of jails, prisons and detention facilities to the community. ~~The~~ TRBHAs and Tribal ALTCS shall coordinate with government agencies and justice system stakeholders as specified in their respective Intergovernmental Agreement (IGA) and coordinate the care of members involved in the justice system including but not limited to:

1. Working directly with justice partners and service providers involved with the Member.
- 1.2. Exchanging information regarding the Member's current needs or service plan, in compliance with all applicable laws and regulations.

A. REACH-IN, PRE-RELEASE SERVICE¹⁰ AND REENTRY SERVICE COORDINATION¹¹ PROGRAM ADMINISTRATIVE REQUIREMENTS

The Contractor shall maintain and implement the following administrative requirements related to justice system reach-in, pre-release service, and reentry service coordination as specified in Contract:

1. Designation of a Justice System Liaison as specified in Contract, who is the single point of contact for justice system stakeholders and is responsible for oversight and coordination of justice system reach-in, pre-release, reentry, and post-release care coordination activities.~~for justice system reach-in care coordination efforts.¹²~~
2. The Contractor shall maintain a documented process for engagement with participating justice system partners, including processes for maintaining current contact information and establishing routine communication with facilities, correctional partners, and AHCCCS-approved providers as applicable.¹³
3. The name(s) and contact information for all justice system partner(s).
4. ~~D~~Description of the process for identification of justice-involved members through coordination with AHCCCS, justice system partners, providers, members, and other available sources~~escription of the process for coordination with jails, prisons, and detention facilities for identification of members in probation status.¹⁴~~

⁸ Reporting Requirements relocated to end of policy in separate section.

⁹ Revised language to clarify that providers serve both Fee-For-Service (FFS) and Managed Care Organization (MCO) members as opposed to the provider being FFS.

¹⁰ Updated to include Consolidated Appropriations Act requirements for pre-release services.

¹¹ Updated section title to incorporate administration of AHCCCS Reentry Demonstration activities.

¹² Expanded Justice System Liaison responsibilities to include pre-release, reentry, and post-release coordination activities.

¹³ Added to AHCCCS expectations for a process to ensure consistent engagement with justice system partners.

¹⁴ Revised member identification language to align with AHCCCS incarceration and release notification processes.

5. Designation of parameters for identification of members requiring justice system reach-in, pre-release, or reentry care coordination including populations eligible under the Consolidated Appropriations Act and AHCCCS Reentry Demonstration.¹⁵ ~~(e.g., definition of chronic and/or complex care needs) through agreement with justice system reach-in partners.~~
6. Description of the process and timeframes for communicating with justice system ~~reach-in~~ partners, AHCCCS, and AHCCCS registered providers regarding incarceration, anticipated release, service referrals, transition planning, and continuity of care.¹⁶;
7. The Contractor shall maintain an escalation process for urgent care coordination situations, including time-sensitive release notifications, emergent medication needs, and other circumstances requiring expedited coordination.¹⁷
8. Description of the processes for monitoring and responding to information regarding member incarceration, enrollment suspension, anticipated release, release from incarceration, and reactivation of enrollment received from AHCCCS, justice system stakeholders, providers, members, or other available sources.¹⁸
9. Description of the process and timeframes for initiating communication with justice-involved members and members identified as eligible for pre-release or reentry services.¹⁹
10. Description of the Contractor's processes to coordinate with AHCCCS regarding members who require eligibility redetermination, enrollment reinstatement, or application assistance prior to release from incarceration.²⁰ ~~and timeframes for initiating communication with justice system reach-in members.~~
11. The Contractor shall maintain a provider network with sufficient capacity to ensure members have timely access to medically necessary services associated with justice system reach-in and pre-release coordination requirements. For Consolidated Appropriations Act pre-release services, Contractors shall coordinate with AHCCCS-approved providers designated to deliver these services.²¹

¹⁵ Expanded member identification requirements to include populations eligible for Consolidated Appropriations Act and Reentry Demonstration services.

¹⁶ Expanded communication requirements to include Reentry Demonstration coordination and referral processes.

¹⁷ Added to AHCCCS expectations for a process to ensure consistent engagement with justice system partners concerning time-sensitive circumstances.

¹⁸ Added notification requirements to recognize multiple information sources used to identify justice-involved members and support care coordination activities.

¹⁹ Expanded member communication requirements to include individuals eligible for pre-release and reentry services.

²⁰ Added coordination requirements related to member eligibility redetermination, enrollment reinstatement, and pre-release application activities.

²¹ Outlines network adequacy standards to ensure timely access per Consolidated Appropriations Act requirements and AHCCCS standards.

~~Description of the methodology for assessment of anticipated cost savings to include analysis of medical expense for these identified members prior to incarceration and subsequent to justice system reach-in activities and release.~~

~~B. REACH-IN AND PRE-RELEASE SERVICE PROGRAM CARE~~²² COORDINATION REQUIREMENTS
B.

The Contractor shall develop the following information as specified in Contract:

1. A process for identification of members that meet the established parameters for justice system reach-in care coordination, including which includes members with chronic and/or complex physical and/or behavioral health care needs, or both, and members in the adult correctional system who have a substance use disorder and/or who meet medical necessity criteria to receive Medications for Opioid Use Disorder (MOUD) and/or Medical Assisted Treatment (MAT), and members who may be eligible for pre-release, reentry, or post-release care coordination under this Policy. The Contractor shall utilize information provided by AHCCCS, including 834 enrollment transactions, as well as information obtained through justice system stakeholders, providers, members, family members, designated representatives, Health Care Decision Makers (HCDMs), community organizations, and other available sources to identify members requiring care coordination. The absence of incarceration, release, or pre-release notification information from AHCCCS does not relieve the Contractor of responsibility to conduct justice system reach-in activities when the Contractor becomes aware of a member's justice involvement through other available sources.²³ ~~the 834 file data provided to the Contractor by AHCCCS to assist with identification of members. The Contractor may also use additional data if available for this purpose.~~
2. The Contractor shall establish and maintain documented prioritization criteria for justice-involved members who present elevated transition risk or require enhanced care coordination. Prioritization criteria shall address, at a minimum, members with serious mental illness, substance use disorders, including members receiving or eligible for MOUD, pregnant individuals, individuals experiencing homelessness or housing instability, members receiving services through the Division of Developmental Disabilities, former foster youth, and other populations identified by the Contractor as requiring enhanced transition planning.²⁴
3. Policies and procedures to conduct justice system reach-in care coordination for members who have been incarcerated for 20 days or longer and have an anticipated release date. ~~Justice system reach-in care coordination activities shall begin upon knowledge of a member's anticipated release date.~~ ~~Justice system reach-in may take place independent of an anticipated release date if the Contractor Justice System staff is actively coordinating with the jail, prison, or detention facility transition planners to identify a release date as a member navigates the justice system.~~ Contractor reach-in responsibilities apply regardless of whether

²² Updated to include Consolidated Appropriations Act requirements for pre-release services.

²³ Revised to clarify identification requirements and recognize multiple information sources used to identify justice-involved members.

²⁴ Added prioritization guidance for justice-involved populations requiring enhanced care coordination and transition planning.

the member is incarcerated in a facility participating in the AHCCCS Reentry Demonstration or receiving services under the Consolidated Appropriations Act.²⁵

4. Policies and procedures for identifying, prioritizing, and conducting care coordination activities for justice-involved members who do not meet traditional reach-in criteria due to short periods of incarceration, unknown release dates, or unanticipated release. These policies and procedures shall include a process for responding to release notifications received with limited advance notice and facilitating timely connection to medically necessary services and supports following release.²⁶

- ~~1.5.~~ Policies and procedures to support provider referrals, coordination, and information sharing with AHCCCS providers for members determined eligible for pre-release services under the Consolidated Appropriations Act or AHCCCS Reentry Demonstration, as applicable. The Contractor shall support continuity of care and transition planning activities between pre-release providers and community providers.²⁷

- ~~2.~~ A process to collaborate with justice system stakeholders to identify justice-involved members and support justice system reach-in, pre-release, reentry, release planning, and post-release care coordination activities.²⁸ Justice system stakeholders include but are not limited to:

6.

- ~~a.~~ County and Tribal jails,
- a.
- ~~b.~~ County and Tribal detention facilities,
- b.
- ~~c.~~ Courts, including tribal courts,
- c.
- ~~d.~~ Correctional health service contractors~~contractors,~~
- ~~e.~~ Parole and probation departments,
- e.
- f. Arizona Administrative Office of the Courts,
- g. Arizona Department of Juvenile Corrections,
- h. Arizona Department of Corrections Rehabilitation and Reentry, and
- i. Community supervision agencies.

- ~~3.~~ A process to conduct pre-release care coordination activities for members transitioning out of juvenile detention centers, jails, detention facilities, jails²⁹ and prisons. These activities include justice system reach-in coordination responsibilities, and do not replace services delivered by approved providers under the Consolidated Appropriations Act. For facilities not participating

²⁵ Revised to clarify that reach-in requirements apply regardless of Consolidated Appropriations Act or Reentry Demonstration participation.

²⁶ Expanded care coordination requirements to include documented processes for members experiencing short-term or unexpected releases.

²⁷ Updated to include coordination requirements associated with Consolidated Appropriations Act and Reentry Demonstration implementation.

²⁸ Revised to reflect expanded coordination activities under Consolidated Appropriations Act and Reentry implementation.

²⁹ Revised to correct term.

in the Reentry Demonstration, Contractors shall continue applicable reach-in and transition planning activities.³⁰

7.

~~4.~~ Strategies for providing member/Health Care Decision Maker (HCDM) and Designated Representative (DR) for justice system reach-in care coordination, education regarding care, services, resources, appointment information and Contractor Care Management contact information.

8.

~~5.~~ Requirements and processes for scheduling of initial appointments with appropriate provider(s) based on member needs, including coordination with providers involved in pre-release services when applicable. Post release appointment shall to occur within seven business days of member release.³¹

9.

10. Strategies regarding proactive planning prior to, and ongoing follow up with the member/HCDM, DR after release from incarceration to assist with accessing and scheduling necessary services as identified in the member's care plan, including transportation, access to all ~~three~~ Food and Drug Administration (FDA) approved MOUD and MAT options covered under the AHCCCS Behavioral Health Drug List, and assignment to peer support services when appropriate, and coordination with pre-release service providers when applicable, to support the continuation of to help navigate and retain the member in MOUD and MAT when appropriate.³²

~~6.~~11. The Contractor shall maintain processes to support continuity of care for members receiving or clinically indicated for MOUD or MAT, including coordination with correctional health providers, Opioid Treatment Programs, AHCCCS-approved providers, and community providers as applicable. Processes shall address medication continuity planning prior to release and coordination needs associated with time-sensitive releases, including weekend and holiday releases when applicable.³³

~~7.~~12. Strategies to reengage the member and maintain care coordination for the member should re-incarceration occur.

~~8.~~13. Strategies to improve appropriate utilization of services.

~~9.~~ Strategies to reduce recidivism within the member population.

14.

³⁰ Revised to include Consolidated Appropriations Act requirements and clarify coordination requirements across participating and non-participating facilities.

³¹ Revised to support continuity between pre-release and post-release providers.

³² Revised to support coordination of pre-release and post-release services.

³³ Clarified continuity planning requirements for justice-involved members receiving or eligible for medication-assisted treatment.

15. Strategies to address Social Determinants of Health (SDOH)/Health Related Social Needs (HRSN).

16. The Contractor shall notify AHCCCS by emailing MCDUJustice@azahcccs.gov upon becoming aware that a member may be an inmate of a public institution when the member's enrollment has not been suspended or has not been reinstated 24 hours following release. The Contractor will receive a file from AHCCCS as specified in Contract. ~~—~~ In addition to the care coordination requirements, the Contractor shall also utilize the 834 file provided by AHCCCS to identify incarcerated members that may have missed their eligibility redetermination date while incarcerated causing a discontinuance of benefits and provide assistance with reapplication for AHCCCS Medical Assistance (MA) and other public benefits including but not limited to, Nutrition Assistance and Cash Assistance (CA) upon release.

~~10.~~17. The Contractor shall maintain processes to respond to incarceration, pre-release, release, and enrollment information received from AHCCCS, justice system stakeholders, providers, members, family members, or other available sources. For members incarcerated in facilities that do not participate in the AHCCCS Reentry Demonstration, Contractors shall continue applicable reach-in, eligibility coordination, and post-release planning activities.³⁴

C. PRE-RELEASE AND POST-RELEASE COORDINATION REQUIREMENTS UNDER THE CONSOLIDATED APPROPRIATIONS ACT AND AHCCCS REENTRY DEMONSTRATION³⁵

This section describes the requirements for coordination of services for eligible members as required under the Consolidated Appropriation Act and Reentry Demonstration —prior to and following release from carceral settings, including identification, referral, service delivery, and care coordination responsibilities. Pre-release services under the Consolidated Appropriations Act and AHCCCS Reentry Demonstration are in addition to, and do not replace or duplicate justice system reach-in care coordination requirements outlined in this policy. Members who are otherwise eligible for justice system reach-in activities but are incarcerated in facilities not participating in the AHCCCS Reentry Demonstration shall continue to receive applicable Contractor reach-in, transition planning, and post-release care coordination activities in accordance with this Policy.³⁶

1. Populations Eligible for Pre-Release Services:

~~a.~~ For purposes of pre-release services under the Consolidated Appropriations Act, eligibility includes:

a.

~~b.~~ Medicaid or CHIP eligible youth up to age 21, or

i.

ii. Medicaid eligible individuals up to age 26 who qualify under the former foster care children eligibility group.

³⁴ Revised to recognize multiple notification sources and clarify responsibilities for non-participating facilities.

³⁵ Added language to include the reentry demonstration.

³⁶ Section added to align with Consolidated Appropriations Act and AHCCCS Reentry Demonstration.

- b. For purposes of the AHCCCS Reentry Demonstration, members meeting applicable federal and state eligibility requirements may receive covered pre-release services when incarcerated in a participating facility.³⁷
- 2. Contractor responsibilities under the Consolidated Appropriations Act and AHCCCS Reentry Demonstration include: identification, referral, care coordination, and continuity-of-care activities and are not responsible for direct provision of pre-release services delivered by AHCCCS registered approved providers. The Contractor shall:
 - a. Identify members who may be eligible for pre-release services based on information received from AHCCCS, carceral settings, or other sources,
 - b. Initiate referrals for eligible members to AHCCCS-approved providers designated to deliver pre-release service,
 - c. Ensure referrals occur:
 - i. At least 30 days prior to release, when feasible, or
 - ii. As soon as practicable upon identification of eligibility.
 - d. Coordinate with justice system partners, AHCCCS, and community providers to support continuity of care, and
 - e. Maintain processes to track referrals and support post-release coordination.
- 3. Provider responsibilities for pre-release services under the Consolidated Appropriation Act. Covered pre-release services under the Consolidated Appropriations Act and AHCCCS Reentry Demonstration shall be delivered by AHCCCS registered providers authorized to provide such services. Pre-release service providers shall:
 - a. Initiate outreach to the member upon receipt of the referral,
 - b. Conduct screening, assessment, and service planning activities,
 - c. Coordinate with the member, HCDM/DR, justice system stakeholders and community providers to develop a post release transition plan,
 - d. Schedule post release service appointments to ensure continuity of care upon release, and
 - e. Coordinate with the Contractor, AIHP, TRBHA, AIMH, or Tribal ALTCS to support continuity of care following the members release³⁸.
- 4. Covered pre-release services available under the Consolidated Appropriations Act or AHCCCS Reentry Demonstration are intended to support early identification of needs, continuity of care, and successful transition from carceral settings to the community and may include:³⁹
 - a. Screening and diagnostic evaluations,
 - b. Behavioral Health and medical assessments,
 - c. Targeted case management and care coordination,
 - d. Development of a comprehensive post release service plan,
 - e. Coordination with family members, HCDM/DR, and involved systems (e.g. DDD or DCS),

³⁷ Added to reflect populations eligible for services under the Reentry Demonstration.

³⁸ Added in language to pre-release responsibilities for Fee-for-Service (FFS) members.

³⁹ Added language to include the reentry demonstration.

- f. Scheduling of post-release appointments and services, and
 - g. Practitioner office visits,
 - h. Medication Assisted Treatment (MAT), including counseling and behavioral therapies when clinically indicated,
 - i. Peer support services,
 - j. Medication planning and coordination to ensure access upon release.
 - k. Other AHCCCS-authorized Reentry Demonstration services.⁴⁰
- 5. Post-release Requirements: These post-release coordination requirements apply regardless of whether the member received Reach-In services only, Consolidated Appropriations Act services, Reentry Demonstration services, or a combination of such services. The Contractor and Provider⁴¹ shall ensure:⁴²
 - a. Members receiving pre-release services are connected to ongoing care immediately upon release,
 - b. At least one care coordination or case management service is provided post-release, with additional services delivered as clinically indicated, and
 - c. Care coordination aligns with the member's transition plan and identified needs.

D. REPORTING REQUIREMENTS

The Contractor shall monitor and report justice system reach-in and pre-release service coordination outcomes and shall submit Attachment A and Attachment B as specified in Contract Section F, Attachment F3, Contractor Chart of Deliverables:⁴³

- 1.
 - a. Reporting shall include distinct tracking of justice system reach-in activities, pre-release service referrals under the Consolidated Appropriations Act, pre-release services and care coordination activities associated with the AHCCCS Reentry Demonstration, and post-release care coordination activities.⁴⁴
 - b. Reporting shall include applicable justice system reach-in and post-release coordination activities performed for members incarcerated in facilities that do not participate in the AHCCCS Reentry Demonstration.
- 2. AHCCCS may monitor performance measures including emergency room utilization, inpatient utilization, access to care, continuity of care, reduction in recidivism, and other measures necessary to evaluate justice system reach-in, pre-release, reentry, and post-release coordination activity effectiveness.⁴⁵

⁴⁰ Added to reflect services available under the Reentry Demonstration.

⁴¹ Adding Provider to Post Release Requirements to cover Fee-for-Service (FFS) members.

⁴² Modified for clarity to include the Consolidated Appropriations Act and Reentry Demonstration.

⁴³ Revised to add location.

⁴⁴ Added to incorporate the Reentry Demonstration.

⁴⁵ Section moved from above.