

November 11, 2024

VIA ELECTRONIC SUBMISSION

Secretary Xavier Becerra
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Re: Louisiana Reentry Demonstration Section 1115 Waiver

Dear Secretary Becerra,

The Center on Budget and Policy Priorities and the Georgetown University Center for Children and Families appreciate the opportunity to comment on the Louisiana Reentry Demonstration section 1115 waiver request.¹

The Center on Budget and Policy Priorities (CBPP) is a nonpartisan research and policy organization based in Washington, D.C. Founded in 1981, CBPP conducts research and analysis to inform public debates and policymakers about a range of budget, tax and programmatic issues affecting individuals and families with low or moderate incomes. The Georgetown University Center for Children and Families (CCF) is an independent, nonpartisan policy and research center founded in 2005 with a mission to expand and improve high quality, affordable health coverage for America's children and families. As part of the McCourt School of Public Policy, Georgetown CCF conducts research, develops strategies, and offers solutions to improve the health of America's children and families, particularly those with low and moderate incomes.

We support Louisiana's request to provide Medicaid coverage to eligible adults (including some youth aged 17 and up) who are leaving correctional facilities, with a targeted package of pre-release services for up to 90 days prior to release. The request is consistent with CMS's guidance outlining parameters for similar demonstrations² and we support approval subject to the recommendations noted below.

As Louisiana details in its application, there are significant racial inequities in who is incarcerated in the state. The state notes that Black people make up 65 percent of the state's justice-involved population. The state also highlights research showing that complex health conditions, such as mental illness and SUD, are disproportionately common in justice-related settings, and that individuals face significant challenges during reentry, including accessing health care. Therefore, the demonstration holds the potential to advance health equity and reduce disparities in coverage, which

¹ Louisiana Reentry Demonstration Section 1115 Waiver, September 26, 2024, <https://www.medicaid.gov/medicaid/section-1115-demonstrations/downloads/la-renty-dmnrtn-aplctn.pdf>.

² CMS, "Opportunities to Test Transition-Related Strategies to Support Community Reentry and Improve Care Transitions for Individuals Who Are Incarcerated," State Medicaid Director Letter (SMDL) #23-03, April 17, 2023, <https://www.medicaid.gov/sites/default/files/2023-12/smd23003.pdf>.

is consistent with the goals of Executive Order 13985 and the strategic vision laid out by CMS Administrator Chiquita Brooks-LaSure and CMCS Director Dan Tsai.³

Targeted pre-release services during the last 90 days of incarceration would reduce gaps in coverage and care, supporting successful transitions back to the community.

We believe covering a targeted set of services (including case management, medication assisted treatment and SUD counseling, a 30-day supply of medications, prescribed drugs and medication administration, mental health evaluation and counseling, peer support services, laboratory services, and durable medical equipment), during the last 90 days of incarceration for justice-involved populations is appropriate. We appreciate the state's discussion of how this Medicaid reentry coverage will supplement the Pre-Release Enrollment Program and other state initiatives. We urge CMS to ensure the state integrates this proposal within existing efforts, as this will be critical to successful transitions into the community.

The state's application demonstrates consideration of both CMS's guidance and how to translate the guidance into practice, including starting with all state prisons but phasing in parish-operated jails that have demonstrated readiness with the goal of eventually including all parish-operated jails. The state indicates it is exploring the potential for expansion to juvenile facilities, and we encourage CMS to work with the state to accomplish this goal.

The state also requests capacity building funds to invest in enhanced data systems, equipment for telehealth, and staffing. We appreciate that the proposed activities align with the April 2023 guidance, but the proposal does not fully document how all of these activities are new spending. We encourage CMS to request further information on these expenditures to ensure they are not offsetting expenditures that were already existing or planned, as required in the guidance.

As with other recent demonstration approvals, we urge CMS to 1) establish a clear, limited set of covered pre-release services that are tailored to the goal of improving continuity of care as people return to the community, 2) prioritize the use of community-based providers to deliver the services, and 3) require a Reentry Initiative Reinvestment Plan to ensure that Medicaid funding doesn't simply replace other current funding sources.

Conclusion

Our comments include citations to supporting research, including direct links to the research, for HHS's benefit in reviewing our comments. We direct HHS to each of the studies cited and made available to the agency through active hyperlinks, and we request that the full text of each of the studies cited, along with the full text of our comments, be considered part of the administrative record in this matter for purposes of the Administrative Procedure Act.

³ Executive Order No. 13985, 86 CFR 7009 (2021), <https://www.federalregister.gov/documents/2021/01/25/2021-01753/advancing-racial-equity-and-support-for-underserved-communities-through-the-federal-government>; Chiquita Brooks-LaSure and Daniel Tsai, "A Strategic Vision for Medicaid and the Children's Health Insurance Program (CHIP)," Health Affairs Blog, November 16, 2021, <https://www.healthaffairs.org/doi/10.1377/forefront.20211115.537685/full/>.

Thank you for consideration of our comments. If you would like any additional information, please contact Joan Alker (jca25@georgetown.edu) or Allison Orris (aorris@cbpp.org).