Medicaid and Behavioral Health Status of Youth and Young Adults Exiting Juvenile Rehabilitation Facilities

Calendar Year 2022

About this Report

This report provides information on Medicaid enrollment and behavioral health service receipt among youth and young adults (YYA; ages 12 to 25) exiting Washington State Juvenile Rehabilitation (JR) facilities. YYA released from a JR facility were followed over a three-month period using state administrative data to estimate post-release Medicaid coverage, mental health and substance use disorder treatment, and homelessness rates. A description of exiters' demographic characteristics is also provided. These analyses inform the Department of Children, Youth, and Families (DCYF) and Health Care Authority's collaborative effort to connect YYA to Medicaid-funded services following release from a JR facility.

Summary of Findings

From January 1 to December 31, 2022, 255 YYA were released from JR facilities. Roughly nine out of ten exiters were male (n = 225; 88 percent), and half were ages 16 to 18 at the time of release (n = 130; 51 percent). White, Non-Hispanic YYA made up 31 percent of the total exiter population (n = 80), followed by Black or African American (n = 71; 28 percent), Hispanic or Latino (n = 68; 27 percent), American Indian or Alaskan Native (n = 52; 20 percent), and Asian or Pacific Islander YYA (n = 31; 12 percent). In the year prior to admission, 84 percent (n = 214) of exiters were enrolled in Medicaid coverage. Of those with Medicaid coverage, 71 percent (n = 153) had some indication of a mental health treatment need, and 48 percent (n = 102) had some indication of a substance use disorder (SUD) treatment need.

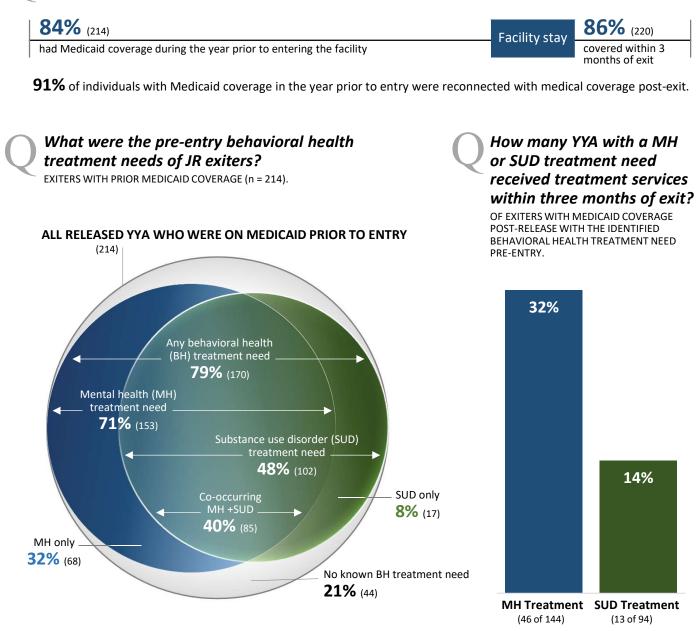
The majority of exiters had Medicaid coverage within three months of being released (n = 220; 86 percent), and 91 percent of YYA with Medicaid coverage in the year prior to admission re-established coverage after exit. Asian or Pacific Islander YYA had the highest rate of coverage post-release (94 percent) followed by Black or African American YYA (89 percent). Post-exit coverage rates for YYA who identified as White, Non-Hispanic (88 percent); American Indian or Alaskan Native (87 percent); and Hispanic or Latino (84 percent) were all within two percentage points of the post-exit coverage rate for the total exiter population (86 percent).

Despite high rates of mental health conditions and SUD prior to admission, treatment rates among exiters enrolled in Medicaid were low. Only a third of exiters with some indication of a mental health condition received treatment in the three months following release (32 percent), and one out of seven of those exiters with some indication of a SUD received SUD treatment (14 percent). Due to small population sizes and volatility in treatment rates over time, treatment rates for mental health conditions and SUD by race/ethnicity are not shown. However, Asian or Pacific Islander, Black or African American, and Hispanic or Latino YYA had consistently lower mental health treatment rates compared to American Indian or Alaskan Native and White, Non-Hispanic YYA. For SUD treatment rates, American Indian or Alaskan Native, Asian or Pacific Islander, Black or African American, and Hispanic or Latino YYA had consistently lower SUD treatment rates compared to White, Non-Hispanic YYA.

About one of four (n = 33; 13 percent) YYA were homeless in the year prior to entering a JR facility. Twelve percent (n = 32) of all YYA released during CY 2022 became homeless within three months of exit. Homelessness rates following release were substantially higher among youth of color.



How many youth and young adults (YYA) released from Juvenile Rehabilitation (JR) facilities had Medicaid coverage before or after exit? TOTAL RELEASED IN Calendar Year 2022 = 255



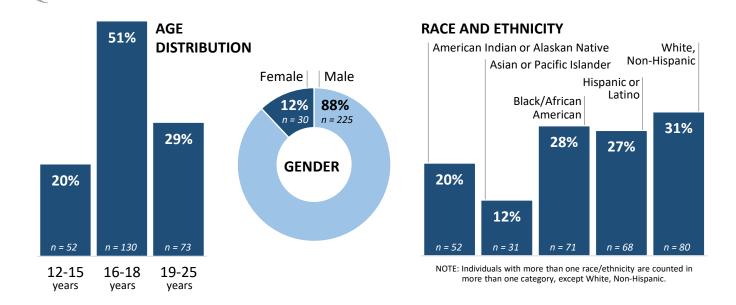
How many YYA released from JR facilities were homeless before or after exit?

TOTAL RELEASED IN Calendar Year 2022 = 255





What are the demographic characteristics of YYA released from JR facilities in CY 2022?



What percentage of YYA have Medicaid coverage pre-entry and post exit?

PRE-ENTRY

12 months prior to entering a facility

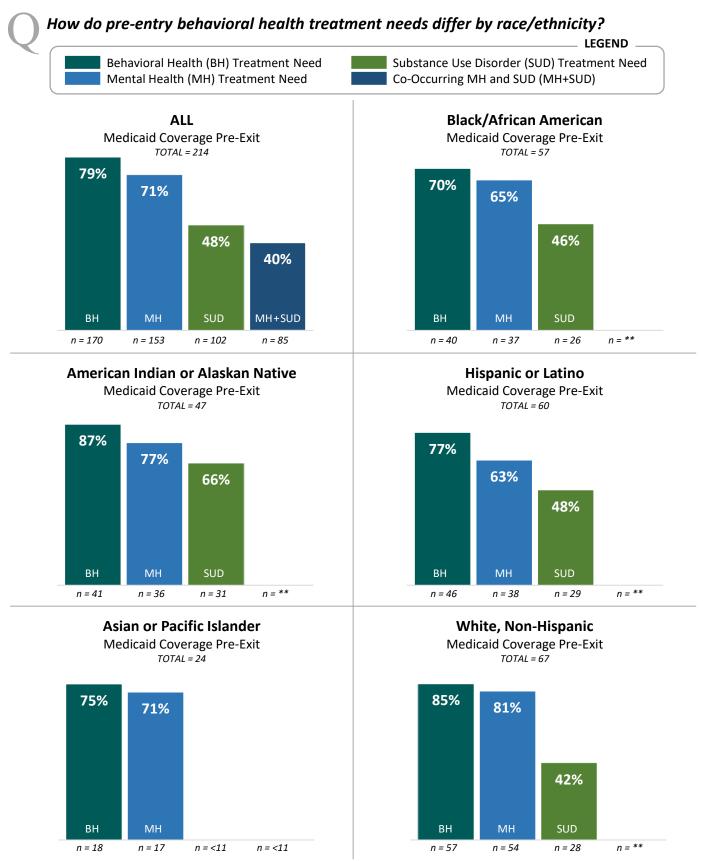
ALL	84%
American Indian or Alaskan Native	90%
Asian or Pacific Islander	77%
Black/African American	80%
Hispanic or Latino	88%
White, Non-Hispanic	84%

POST EXIT

3 months after exit

ALL	86%	
American Indian or Alaskan Native	87%	
Asian or Pacific Islander		94%
Black/African American	89%	, b
Hispanic or Latino	84%	
White, Non-Hispanic	88%	

Washington State Department of Social & Health Services Transforming lives

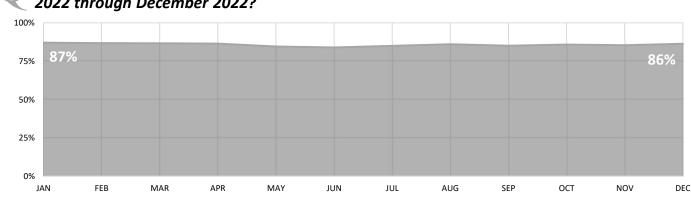


Note: Bar chart denominators are based on the total number of exiters with prior Medicaid coverage within the subgroup. A value of "< 11" indicates that a count was less than or equal to 10 and suppressed in accordance with the Health Care Authority's suppression rules. A count of "**" indicates that a value was suppressed to prevent the recalculation of counts less than 11.

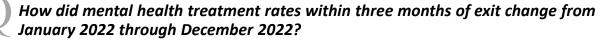


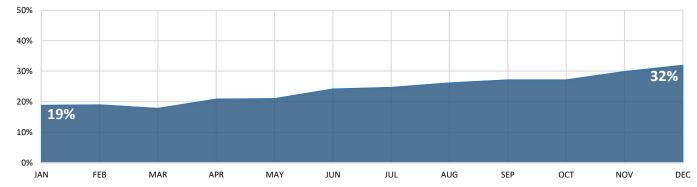
EXITER ENROLLMENT AND TREATMENT RATES

The following charts provide information on trends in post-release Medicaid coverage, mental health treatment, and substance use disorder treatment rates. Because monthly treatment rates are volatile due to the small number of YYA released from a JR facility in a month, we calculated and presented the treatment rate for all individuals released in the month in question *and* in the 11 months prior. For example, the post-release Medicaid coverage rate for January 2022 includes all YYA released from February 2021 through January 2022, the rate for February 2022 includes all YYA released from March 2021 through February 2022, etc. This minimizes the impact of monthly fluctuations on the overall trends over time.

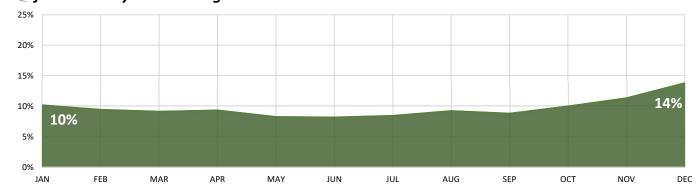


How did Medicaid coverage rates within three months of exit change from January 2022 through December 2022?





How did substance use disorder treatment rates within three months of exit change from January 2022 through December 2022?



Note: Presence of substance use or mental health disorders were based on diagnoses, prescriptions, services, or arrest records in the 24 months prior to facility stay for YYA who were Medicaid recipients 12 months prior to entry. Treatment rates are based on those with a behavioral health (BH) disorder and Medicaid coverage post-exit.



Technical Notes

Calendar Year 2022

Data Sources

Identification of the study population was based on Department of Children, Youth, and Families (DCYF) Juvenile Rehabilitation (JR) admission and discharge information obtained from the Automated Client Tracking (ACT) data system. Information on homelessness, Medicaid coverage, mental health and substance use disorder treatment needs were based on information from the Integrated Client Databases (ICDB) developed and maintained by RDA. The ICDB combines measures derived from several state administrative systems, including: ProviderOne (medical coverage, medical claims, diagnoses, and homelessness), the Behavioral Health Data System (mental health and substance use disorders), the Automated Client Eligibility System (economic services and homelessness), and the Homeless Management Information System (housing services and homelessness).

Population

Youth and Young adults (YYA) aged 12 to 25 who exited a Washington State Juvenile Rehabilitation (JR) facility during calendar year 2022.

Measures

Homeless Status: This was determined based on the following: 1) client living arrangement (Homeless without Housing, Emergency Shelter, Battered Spouse Shelter, Inappropriate Living Situation) from the Automated Client Eligibility System (ACES); 2) address information in ACES indicating that a youth or young adult was listed as homeless (e.g., a youth's or young adult's address was "homeless"); 3) housing service information recorded in the Homeless Management Information System (HMIS); or 4) information from ProviderOne medical claims data. An individual was considered homeless if they had any indicator of homelessness in the measurement period.

Medicaid Coverage: Medicaid coverage data was obtained from eligibility codes recorded in ProviderOne.

Behavioral Health Indicators: Information about mental health diagnoses and services, substance use disorders diagnosis and services was retrieved from Behavioral Health Data System (BHDS) and ProviderOne.

- Mental Health Treatment Need (*MH Tx need*): A mental health treatment need was indicated for any individual who, in the 24 months prior to facility admission, 1) was diagnosed with a psychotic, mania/bipolar, depressive, anxiety, attention deficit and/or hyperactive, disruptive/impulse control/conduct, or adjustment disorder; 2) had an antipsychotic, antimania, antidepressant, antianxiety, or ADHD prescription filled; 3) received mental health services; or 4) received behavioral rehabilitation services from the Department of Children, Youth, and Families.
- Substance Use Disorder Treatment Need (*SUD Tx need*): Substance use disorder (SUD) treatment need was indicated for any individual who, in the 24 months prior to facility admission: 1) was diagnosed with an SUD; 2) had a prescription filled for medication for opioid or alcohol use disorder treatment; 3) received any SUD treatment services; or 4) was arrested for a substance-related offense.
- Behavioral Health Treatment Need: Any indication of either a mental health OR substance use treatment need in the 24 months prior to admission to a JR facility.
- **Co-occurring Treatment Needs:** Presence of an identified mental health *AND* substance use disorder treatment need in the 24 months prior to admission to a JR facility.
- Mental Health Treatment: Based on service encounter records in ProviderOne and the Behavioral Health Data System were used to track outpatient mental health services. Specific service modalities were identified using the Division of Behavioral Health and Recovery's (DBHR) Service Encounter Reporting Instruction (SERI) categories and Healthcare Common Procedure Coding Systems (HCPCS) codes and/or Current Procedure Terminology (CPT) codes.
- Substance Use Disorder Treatment: Based on service encounter records in ProviderOne and the Behavioral Health Data System were used to track substance use disorder treatment services. These include outpatient and inpatient residential treatment services, opioid substitution (e.g., Methadone), medication for opioid and alcohol use disorders, and—prior to April 2016—case management services.

