

MINUTES

June 21, 2007

**Income Maintenance Advisory Committee
Division of Health Care Financing
Department of Health and Family Services**

County Attendees: Sheila Drays, Dodge County; Christy Duhr, Richland County (by phone); Joanne Faber, Washington County; Cece Fishnick, Grant County (by phone); Tim Gessler, Winnebago County; Liz Green, Dane County; Linda Halvorson, Dunn County (by phone); Barb HERNSMAN, Crawford County (by phone); Jane Huebsch, Marathon County; Kara Jenkins, Jackson County; Ed Kamin, Kenosha County; Shirley Kitchen, Dodge County; Chris Machamer, Waupaca County; Liz Mahloch, Sheboygan County; Susan Moeser, Milwaukee County; Lorie Mueller, LaCrosse County (by phone); Luann Page, Waukesha County; Chris Parkansky, Marinette County (by phone); Jan Place, Polk County; John Rathman, Outagamie County; Amy Roland, Outagamie County; Cindy Sutton, Rock County (by phone);

State Attendees: Sara Edmonds, DHFS; Theresa Fosbinder, DHFS; Jason Helgerson, DHFS; Pamela Lohaus, DHFS; Bob Martin, DHFS; Amy Mendel-Clemens, DHFS; Julie Milleson, DHFS; Scott Riedasch, DHFS; Jodi Ross, DHFS; Eden Schafer, DHFS; Joanne Simpson, DHFS; Melissa Wilson, DHFS; Eduardo Zarate, DHFS

Introductions

Joanne Simpson

There were introductions by all, including Jason Helgerson the DHCF Administrator and Wisconsin's Medicaid Director.

Jason Helgerson, DHCF Administrator Jason Helgerson

- Jason expressed appreciation for people attending and participating in the IMAC.
- Jason described his background and experience with DHFS and things like BadgerCare +.
- Jason mentioned the budget process as related to BadgerCare +, and the desire to get the program up and running by 1-1-08. Outcomes will include coverage of more citizens and reduced workload for the local agencies.
- BadgerCare + for "childless adults" is also proposed in the budget, and includes the idea of central administration so workload is not added to the local agencies.
- Jason also mentioned the new MMIS implementation (interchange) and Family Care expansion.
- Jason talked about the objective of reducing the administrative barriers that exist in trying to access health care and nutrition, and the fact that "we never want paperwork to be an impediment to a child getting "services)."
- Jason opened the floor for questions:
 - Q.** Please comment on the state senate's comprehensive health care bill.
 - A.** There are 3 competing plans – they are trying to create 1 comprehensive plan from these, however nothing has yet been formally submitted. There are challenges with the cost – how can employers take on these costs.
 - Q.** There will be no WisconsinCare since the SeniorCare waiver was renewed. However, there were things in WisconsinCare that don't exist in SeniorCare, like prescription coverage for those under 65 and disabled. Are those things still being considered?
 - A.** Since SeniorCare was approved, there is not additional state match funding to cover this. There are still some thoughts about modifying to try to cover other populations, but – the waiver stipulates that everything has to be done the same way it has been. So modifications to the program could cause problems with the waiver.

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Q. Income limits have not been raised and some eligibility requirements have not changed for the EBD Medicaid population since 1985. This seems inequitable and it also creates a workload to even try to explain some of these policies and issues to customers.

A. Jason agreed that this issue needs attention – we have spent time in the areas of families and long term care and need to address this population as well.

Administrative Items

Ed Kamin & Joanne Simpson

May 2007 minutes were approved.

Update on “IMD/HMO kids”

From the May 2007 minutes:

Ed Kamin requested that an issue regarding children moving from an HMO to a fee-for-service IMD placement be addressed at a future IMAC meeting. If a child is placed in an IMD, the HMO has 72 hours to approve the placement. If the placement is not approved, the HMO will only pay for 72 hours of care and then the county must pay the balance until the fee for service eligibility kicks in. This is especially problematic if the placement occurs near cutoff and the county ends being liable for many weeks of care. Counties would like a way for eligibility to switch from the HMO to fee for service immediately instead of being linked to adverse action logic in CARES. This is becoming more of a problem since HMO enrollment is mandatory in many areas. A small group will convene to discuss options to resolve this issue.

A group met on this on June 20, led by Vicki Jessup.

- They found that there are a lot of counties who now have HMOS, who did not when the original documentation and communication was issued. We may need to send reminders or re-issue old Operations Memos.
- It was discovered that there is a requirement for an MOU between the counties and the HMOs. Some IM agency representatives were not aware of this requirement, or whether the MOU existed in their county. More research will be done on this issue.
- State institutions have been made aware of what they need to do in the process.
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- This was a meeting to get everyone on the same page about this topic – there will be more meetings and this group will report back. If anyone is interested in being part of these discussions please contact Vicki Jessup.

Cancellation of August 2007 IMAC meeting

There was a motion to cancel the August meeting. Motion approved that the August IMAC meeting is cancelled – if issues come up out of the budget process or other areas, a teleconference will be scheduled as appropriate.

WisconsinCare

It was clarified that Medicare Premium Assistance cases will not be moved to central processing, since there will not be a WisconsinCare program.

2007 Food Stamp Program participation Grant

A 2007 proposal was submitted based on the concepts of strategic adaptation and modernization. We will find out the results in August.

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Budget Update

Joanne Simpson

The week of June 8, the Joint Finance Committee passed the following items. However they are not to be implemented until the budget passes and agencies are notified

- Requirements for MA recipients to enroll on Medicare Part B
- Family Planning Waiver for males (no additional IM funding)
- BadgerCare + “childless adults” – the provision passed with high level language.
- Wisconsin Medicaid Cost Reporting provisions included in the Governor’s budget
- A 90 day Medicaid extension for parents after the death of the only child that made them eligible
- Long term Care insurance – if an LTC insurance policy pays out and then ends and the person goes on MA, policy will state that the paid amount of the insurance is disregarded from their assets.

Ed provided updates on some DWD related items in the budget bill.

There was discussion of the move of FSET from DWD to DHFS, the provision to make FSET voluntary, and associated planned changes.

Representatives from the local agencies stated that they need to know details about this and other budget items as soon as possible so that they have adequate time to plan for implementation.

COR Waiver

Scott Riedasch

The Division of LTC let us know about 1 month ago that they got approval for a Nursing Home relocation Waiver. This is the Community Options and Recovery (COR) waiver. The effective date is July 1, 2007. The first relocations will take place in late August or early September. Statewide there are 50 slots in year 1, 150 in year 2, 250 in year 3.

These cases will look a lot like COP waiver cases. People will be in a nursing home, will have a mental illness and be disabled or over 65, will have a NH level of care and will have to meet existing waivers eligibility criteria. There will be no CARES or MMIS changes.

More details will be communicated via and operations Memo.

Q. Can these people be eligible for Partnership?

A. No. When Managed LTC expansion comes to a county, the waivers go away, including this one.

Q. In terms of the number of slots, how have people been identified?

A. Self, family, county, institution. Sheboygan, Manitowoc, Dane, Milwaukee, and Rock have expressed interest in this.

Q. How is this different from the relocation that has already been available?

A. From an operational perspective it is the same, it is just a different target population (mental health population).

1/1/08 Changes – Communication Plan Amy Mendel-Clemens

Handout: IM Communication Plan

<http://dhfs.wisconsin.gov/em/imac/minutes/2007/06Jun/IM-COMMUNICATION-PLAN-6-21-07.pdf>

Following are questions, issues and suggestions raised while walking through the IM communications plan for upcoming initiatives – primarily those that will become visible 12/14/07 and have an official start date of 1/1/08.

BadgerCare +

Local agency representatives suggested that a video – like the QUEST video – be made available to explain co-payments, premiums, etc. for clients.

Q

Other suggestions included:

- * printed materials that explain the different plans at a high level

DHFS/DHCF/BEM/TF

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* send a letter to clients ahead of time. DHFS indicated this was already planned, but requested recommendations about the Medicaid population to send this to. IMAC recommended just the Family MA population, because the EBD population wouldn't be affected, and it could just cause confusion for them.

CWW 3.0

Clarification: When SFEX goes to the web, there will not be the ability to run it on the mainframe anymore.

Notices

There was discussion of a poster for use in local agencies that would explain changes to the notices. Need to consider if this can be done in Spanish too.

Other ideas for client communications: Radio ads, stuffer, mention on both the old and the new notice. Use COLA notices to communicate with EBD population about this.

Q. What are we doing to educate the advocates?

A. There are plans underway to work with them, local agencies will need to assist. For BadgerCare + there are advocates on the committees – part of this includes money for mini-grants for CBOS to assist in outreach. Per Amy we will have a plan for each audience, including advocates, providers, etc..

FS Policy Changes

Agencies stated they want the break in service and the face-to-face waiver implemented 1/1/08 even if they have to do this manually.

Suggestions for Communication and Training

- There was discussion of “pre-training” – DHFS will create materials – with as much detail as possible - that can be used in the fall prior to training. There was also discussion of how we can ensure that people do this pre-training step. **IMAC made and passed a motion that it strongly recommends that all local agency staff access and work with these pre-training materials. IMAC representatives agreed to discuss this with WCHSA.**
- There was discussion about how training should be presented. The first recommendation was face to face training by state staff in each local agency.
- Given that resources will not support that other suggestions were:
- Come north of the “Mason-Dixon” line
- Conduct training for managers/supervisors using the new BC + handbook in October
- Make the training as short and simple as possible
- Get people ready to get through December and January
- Rely on managers and sups – train them early/have a forum for them?
- Leave it up to the agency to decide who has to take the training, and in what order. DHFS agreed that the training could be available through February. It would be mandatory, but agencies could decide that key staff would take the training earlier, and some staff could take it later.
- Consider different modules for different people - like we have done for CWW training on the past
- Train the coordinators – create an in house expert

There was also discussion about the Family Care expansion training, and that the proposal is for it to consist of a FC implementation guide and an on-site state team to provide technical assistance.

Agencies indicated that they would like for us to re-publish the IM Communications matrix each time we update it.

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Payment Accuracy

Joanne Simpson

The error rate is 5.87% as of June 18.

Local Agency Discussion Items

Local Agencies

Discussion tabled due to lack of time.

Other Issues

- Adverse Action in August is August 16 – why not the 17th? Bob will check
- Susan Moser stated that in Milwaukee, “the inbox is full”, that is the limitation of seeing 250 is causing issues with their processing. There was discussion about the fact that as we push to have more and more applications through ACCESS, agencies need capacity to see more. They want to know the total number of all the applications in the inbox. Bob will check into this.

Minutes respectfully submitted,

Theresa Fosbinder