

Draft CARES & Other Systems Projects Implementation Schedule as of: 03/14/08

Note: All dates and content are tentative for planning purposes and subject to change

January 2008

- **BadgerCare Plus** – BadgerCare will be expanded to cover all Children and Pregnant Woman. The following items are included in the BadgerCare Plus project:
 - The current Medicaid family cascade will be collapse to one program which will be BadgerCare Plus (sub-programs may be included). BC+ eligibility rules and processing will be simplified. This will allow for more efficient and accurate processing of benefits. BC+ will expand coverage options for children, pregnant woman, youths existing out of home care, child welfare parents, and self-employed and NLRR relative parents.
 - BadgerCare Plus will include a new premium structure. The premium collection process will remain the same as BC.
 - Most all mainframe pages prior to confirmation will be converted to CWW pages. Running eligibility will be initiated through CWW.
 - This included a conversion run to convert current Family Medicaid recipients to BadgerCare Plus. (500,000+ individuals converted)
 - ACCESS AFB, CMB, and RMC will be revised to reflect the new BC+ program.
- **Electronic Verification of Earnings Process changes (EVFE)** – Minor changes will be made to the existing EVFE form. This form will now be returned to counties and will not be sent to EDS for scanning.
- **Notice Re-Engineering** – Client Notices are being totally reengineered to meet the goals of user readability, user understandability, meet policy/legal requirements, reduce calls, and to reduce extraneous notices. New software will be utilized to meet these needs. The new Notices will be accessed via CWW. This first phase will address notices and the second phase will look into letters.
- **Healthy Birth Outcomes Presumptive Eligibility** – HBO PE will implement an automated way for providers to determine presumptive eligibility for children and pregnant woman. This information would be automatically sent to EDS MMIS.
- **FoodShare, Medicaid, and BadgerCare+ Eligibility and Benefits handbook mailing** – A mass mailing to all existing FoodShare, Medicaid (EBD), and BadgerCare+ (formally Family MA) is targeted to occur just prior to conversion. The new handbooks will contain general information that was removed from notices.

February 2008

- **Medicaid Federal Poverty Level Updates** – The new FPL values will be coming out late January. Medicaid limits and values were updated accordingly for March benefits.
- **BC+ and Related Projects Post Implementation Work**
 - **Set FamilyCare Cost Share correctly** – For FC/Community Waiver cases, the cost share/spenddown from the Waivers AG is now correctly carrying forward to the FC ag. All data was cleaned up and cases triggered to run through batch eligibility. CMO/MCO Cost Share reports were reran.
 - **Fix SFU Exceptions** – A couple different SFU exceptions set when running eligibility and these were fixed.
 - **BC+ Free Month issue** – When free month is determined and confirmed for the recurring month and then eligibility was reran, the recurring month was requiring a premium. This was fixed.
 - **Fix when MCW and FC running in intake for months before and after Feb** – There were problems confirming Community Waivers and FamilyCare when eligibility months were before and after BC+. This was fixed.

- **Issue setting BCPC deductible for 02/08** – Issue fixed.
- **Review page requires checking FTF for BC+** - Fix done to allow non-FTF to be checked.
- **FS budget page system error** - fixed
- **Data Cleanup to fix 9 month live edit** – A data cleanup was performed to clean up old BC filing dates that were setting the 9 month live edit when running eligibility.
- **CWW Issues** –Individuals names now not displaying twice on BCP Premium Summary page, FS Budget now showing recoupment correctly, BC request page scheduling issues related to ACCESS apps, Employment page detailed wage exception resolved, Empl Verif due dates page not displaying FS Verif due dates for CX/CT empl verif pages, access for query users to Correspondence pages resolved, simulation issues resolved, verification Checklist systems error resolved , system error querying Non-Financial History page resolved, fixed system error setting when running eligibility caused by HealthCare request storage issue, resolve looping situation on AG Composition Details page
- **Notices** – Enhanced/clarified some notice text (RRP, none payment closure, Benchmark plan, ... premium payor now always shows in premium box, passing dates didn't show premium if reduced, unit field & PO BOX display issue corrected, phone number updates, page 1 display issue for expedited FS, Empl income override amount displaying as monthly now
- **ACCESS** – minor issues addressed, updated 2008 FPL limits,
- **DDB interface** - issues resolved and now interfacing daily
- **Add BCP to IMQA** – This will allow for manual adds to be done for cases containing BC+.
- **Complete clean up of CARES/MMIS interface issues** –Cleaned up any old med stats and any premium issues. Some premium updates didn't reach MMIS originally, but have since been sent.
- **Ongoing BC+ Statistics** – Created a report of BC+ statistics by AG and FPL level from CARES data. This runs weekly.
- **Add BC+ to IMQA** – BC+ was added to IMQA
- **Timeliness and Workload Analysis Reports** – Add BC+ to extract for Timeliness and Workload Analysis Reports.
- **Family Care EM CAPO** – Adjust caseload validation to allow EM CAPO staff to perform central processing of Family Care enrollment statewide using one id.
- **Ongoing Process for Central Mailing of E&B Handbook** – A temporary process was created to mail E&B handbooks out centrally for new Medicaid, BC+ and FoodShare applications.
- **ACCESS AIE Premium range updates-** Adjust premium ranges to be more specific/smaller in the Am I Eligible ACCESS component.
- **Child Support Non-Cooperation** – Child Support Cooperation is no longer a requirement for FoodShare. Changes made to CWW to support this policy effective 3/1/08.

March 2008

- **BC+ and Related Projects Post Implementation Work**
 - **Notices** – Enhanced/clarified some Spanish notice text, add sequence number to notice to prevent/monitor multiple cases notices being stuffed in single envelope, notices no longer show '99' individual's
 - **Fix Abend** – Perform batch deletion of unconfirmed premium rows to prevent abend

- **Fix EDBC System Error** – When confirmed BCPT and FPL decreases to build BCPA/BCPT at <200% FPL, a systems error is setting during premium table insertion. This will be fixed.
- **NoPay/LatePay Premium process enhancements** –Enhancements made for BC+ nopay/latepay process to correctly default rows on Premium Tracking page
- **Report of AFDC BC+ Pregnant Woman** – Create report of BC+ Pregnant Woman who used to be AFDC for capitation claim adjustment.
- **ACCESS Health Needs Assessment** – Optional Health Needs Assessment added to ACCESS Apply For Benefits. Data will be sent to HMO Contract Monitor group.
- **EVHI** – Complete EVHI testing and system changes prepared for implementation.
- **FSET Voluntary** – FSET is no longer mandatory for FoodShare. System changes to AIWP and Work Programs subsystems being done to support change in policy.
- **IMQA** – Adjust display to show BadgerCare+
- **BC+ CAF updates** - Adjust CAF to reflect new BadgerCare+ program
- **Mailing to FSET Sanctioned Individuals** – A mailing will go out to individuals that were were in FSET sanction to notify them they can reapply for FoodShare.

April 2008

- **CARES Extract for MEDS** – A CARES extract is being created to send BC+ data to the MEDS data warehouse for reporting needs.
- **Client Scheduling Extract for Milwaukee** – An extract from the CARES Client Scheduling system is being developed and will be posted for Milwaukee daily. This will be used in Milwaukee's Q'Matic project for handling/routing in-person appointments.
- **Deductible Start Date** – The deductible start date is currently sent to MMIS as the first of the month. Changes being made to send the actual date deductible is met to EDS MMIS.

May 2008

- **Implement EVHI** – EVHI functionality to interface with CWW turned on 5/1/2008. The Electronic Verification Form process for Health Insurance will be revamped. A database of Employers and their health coverage for employees will be developed. A vendor will manage the collection and update of employer health insurance information. When processing a case in CARES, this health insurance information will be available to the worker in an automated fashion. The EVFH form will not longer be sent through CARES. Note: Mass mailing sent to Employers on about 3/21/08 requesting Health Insurance information. Employer Health Insurance data entered into EVHI system in March and April.
- **Confirmation (AGEC) passing date enhancements** – Enhancements made to allow confirmation of BC+ when passing dates for an increase in benefits including a reduction of premium.
- **Remove Face-To-Face Requirement** –
 - The face-to-face requirement for FoodShare applications and reviews is being removed. System changes include a way for workers to identify how an application/review for FS is done and track any hardship reasons.
 - A data element(s) will be added to enter whether a signature was received on an application/review. Eligibility changes will be done to allow for pend and failure due to signature requirement. (Research being done as to whether this will be applicable for MA, W-2, and CC also.)
- **Expedited FoodShare Edit added to AGEC** – When expedited FS benefits are opening for initial month(s) and FS benefits are failing for ongoing month, an edit will be displayed on AGEC to instruct the worker to rerun eligibility to pend for the ongoing month.

- **Automation of E&B Central mailing** - The E&B handbooks will be mailed centrally, be tracked on the CWW Client Correspondence pages, and allow the worker to issue a duplicate mailing via CWW Correspondence pages
- **Q?/QV changes for Medicaid** – Most verifications are now mandatory for BC+ however some still remain self declared. The items that are mandatory will be change to remove the Q?/QV and pend/fail using the ?/NV verification codes.
- **Medicaid QC changes** – MA QC requires implementation of a new process. CARES process will be created to pull samples for central review.
- **Electronic Case File Scanning with ACCESS app number or RFA number** – Currently, a case must be created to scan in documents. Enhancements will be made to ECF to allow scanning and cataloging using the ACCESS application number or the RFA number. The documents will link to the case file automatically when the case is created.
- **EVHI Assessment** – A process will be put in place to issue and track requests to employers for health insurance information. The tracking of assessments will also be included.
- **CWW Field Level Intelligence BC+ updates** – The page and field level intelligence in CWW will be adjusted to reflect the change in items needing to be gathered from the old Family MA programs to the new BC+ program.
- **Notice Enhancements/Fixes** – Some notice enhancements based of feedback from state, counties and customers will be implemented.

June 2008

- **MMIS interChange Completion (not go live)** – The new MMIS system interchange has set a date of June 2008 for completion of the system, without the new BC+ program changes incorporated. The system will no go live in June. After the June 2008 system completion, BC+ will be added to the new interChange system. The go-live date will occur after BC+ is added. The go-live date is not yet set, but will be sometime after June 2008. The likely go live date will be in the early fall of 2008.
 - **MMIS interChange - Tentative - CARES Interface and other Changes related to interChange system-** Many interface changes will be done in CARES to correspond with the new EDS interChange system. These changes should make the interface process more accurate and more efficient. This is linked to the EDS interchange implementation date.
 - **MMIS interChange –Tentative - ACCESS Client Portal project** – ACCESS Check My Benefits will be enhanced to display EDS only eligibility and HMO enrollment information. Common questions will be enhanced. Clients will also be able to request replacement Forward cards and REOMBs though ACCESS. This is linked and contingent upon the EDS interchange implementation date.
 - **MMIS interChange – Tentative - MCI as Index for MMIS** – Changes will be made for MCI to interact with EDS interChange system and for the interchange system to identify people by their MCI id. This is linked and contingent upon the EDS interchange implementation date.
 - **MMIS interchange – Tentative - HBO PE & Newborn** – Enhance process implemented 1/1/08 to include real time interfacing and query of eligibility information on the interChange system. This is linked and contingent upon the EDS interchange implementation date.
- **Community Waiver FPL updates** – FPL updates will be made to amounts used by Community Waivers and Spousal Impoverishment.

July 2008

- **BENDEX File Change** – React to BENDEX file layout changes and streamline process within CARES job cycles.

August 2008

- **FoodShare FPL** – The annual Federal Poverty Level changes will be implemented for FoodShare.

September 2008

- **Internet SOLQ solution - tentative**– Use webservice from CWW to link to federal SOLQ webservices to pull and display SOLQ data in CWW. This also includes security reports. The date is contingent upon federal timelines.

October 2008

- **MMIS interChange including BC+ Go-Live** – The new Go-Live date for MMIS interChange is scheduled for October.
 - **MMIS interChange - CARES Interface and other Changes related to interChange system**- Many interface changes will be done in CARES to correspond with the new EDS interChange system. These changes should make the interface process more accurate and more efficient. This is linked to the EDS interchange implementation date.
 - **MMIS interChange –ACCESS Client Portal project** – ACCESS Check My Benefits will be enhanced to display EDS only eligibility and HMO enrollment information. Common questions will be enhanced. Clients will also be able to request replacement Forward cards and REOMBs through ACCESS. This is linked and contingent upon the EDS interchange implementation date.
 - **MMIS interChange –MCI as Index for MMIS** – Changes will be made for MCI to interact with EDS interChange system and for the interchange system to identify people by their MCI id. This is linked and contingent upon the EDS interchange implementation date. The MCI id will be used as the MAID and replace the SSN based MAID.
 - **MMIS interchange –HBO PE & Newborn** – Enhance process implemented 1/1/08 to include real time interfacing and query of eligibility information on the interChange system. This is linked and contingent upon the EDS interchange implementation date.

November 2008

- **MMIS interChange including BC+ Post-Implementation**

December 2008

- **Annual COLA update**
- **BC+ Expansion for Childless Adults and BadgerChoice** – BC+ will be expanded to provide low cost medical insurance coverage to a new population of childless adults (approx 71,000).
 - Transform ACCESS into BadgerChoice, including CLA application, HMO selection and enrollment, Health Needs Database and tool for Enrollment Broker.
 - An enrollment broker will assist with HMO selection and application
 - CWW will be enhanced to allow for central processing of this population
 - A new coverage plan structure is being developed for this population
 - Conversion of GAMP recipients
 - Centralized Enrollment for CLA
 - Process enrollment fees

- Possible other large projects tied to this: Implement mini IM CAF in CWW, add pre-eligibility determination to ACCESS AFB, Online electronic payment of fees, ACCESS Add A Program (ACCESS Review My Benefits and Preprinted Review Form to follow shortly after CLA implementation)

January 2009

- **BC+ Expansion for Childless Adults and BadgerChoice Post-Implementation work**