

MINUTES
July 17, 2008
Income Maintenance Advisory Committee
Division of Health Care Access and Accountability
Department of Health Services

County/Tribe Attendees:

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| Joanne Ator, Door Co. | Liz Mahloch, Sheboygan Co. |
| Jackie Bennett, Racine Co. | Susan Moeser, Milwaukee Co. |
| Clara Blackconn, Monroe Co. | Lorie Mueller, LaCrosse Co. |
| Sheila Drays, Dodge Co. | Luann Page, Waukesha Co. |
| Sheila Falb, Polk Co. | Jan Place, Polk Co. |
| Liz Green, Dane Co. | Amy Roland, Outagamie Co. |
| Linda Halvorson, Dunn Co. | Patsy Rolo, Langlade Co. |
| Barbara Hernesman, Crawford Co. | Sue Schweichert, Washburn Co. |
| Jane Huebsch, Marathon Co. | Cindy Sutton, Rock Co. |
| Jill Johnson, Jefferson Co. | Sandy Torgerson, Jefferson Co. |
| Ed Kamin, Kenosha Co. | Marilyn Trayler, Waushara Co. |
| Shirley Kitchen, Dodge Co. | Roxanne Vega, Dane Co. |
| Chris Machamer, Waupaca Co. | |

State Attendees:

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|------------------------|-------------------------|
| Melody August, DHS | Barb Honsa, DHS |
| Jeffrey Brikowski, DHS | Vicki Jessup, DHS |
| Angie Dombrowicki, DHS | Pamela Lohaus, DHS |
| Ken Dybevik, DHS | Pam Kiern, DHS |
| Brian Fangmeier, DHS | Audrey Koehn, DHS |
| Kathy Gugel, DHS | Amy Mendel-Clemens, DHS |

Administrative Items – Angela Dombrowicki and Ed Kamin

- Agenda for this meeting was changed: interChange (iC) moved to second agenda item.
- Meeting Minutes from June 2008 were not available.
- Workload and Finance subcommittee in Appleton was tabled.
- FSET subcommittee also tabled.

interChange – Ken Dybevik

- Forward cards will be issued with a new ID number – changed from Social Security Number (SSN) to non-SSN.
 - Every member will be assigned a Master Customer Index (MCI) number, which is administered through iC.
 - MCI is a randomly generated number converted in CARES.
 - MCI will be used throughout the Department.
 - SeniorCare, Wisconsin Well Woman Program, and Wisconsin Chronic Disease program will receive their own cards.
- The State is working on provider education.
 - Providers given extra time to use old numbers.
 - System is set up so that providers do not need to use card.
 - Pharmacy providers will be seeing new cards immediately.
- Feedback/concerns about card issuance schedule:
 - Not every member has received a Forward card.
 - Concern about Member Services calls
 - High volume of returned mail from EDS
 - Special insert with basic instructions will accompany new card.
 - County recommended adding to insert, “Please do not call case worker.”
 - County suggested notice should also be in Spanish and Hmong (equity issue).
- County Worker Training
 - Upcoming webcast
 - Some partners, providers, members, and counties have audio issues in webcasts.
 - Information is conveyed through the training center.
 - Workload issues (the ability to do 3070’s) will be available through iC.
 - Customers can request their cards through the web portal.
 - Provider directory search available on member portal, but only for Fee-For-Service.
 - BadgerCare Plus Childless Adults is being built now and effective April, 2009; HMO’s required to submit data.
 - This could be populated into iC; members look for information on ACCESS.
 - County recommended a work group for improving ACCESS, because ACCESS is causing many problems for county workers.
- Target date for iC implementation is October 13, 2008.

Premiums – Improvement and Streamlining – All

- Three goals of premiums:
 - Collect and save money.
 - When people pay for part of their health care, it makes them more of a participant in the health care system. This creates personal responsibility.
 - To differentiate people with higher from lower incomes.
- It's cost-effective to correct premium errors.
- Problems with premiums:

- Premium information is often incorrect: enrollees usually do not understand the difference between gross and net income.
- County report of difficulties obtaining money order refunds
- Customer complaints about premium collection:
 - Premiums asked for too early
 - Late premium cycle is restrictive (75% of cases are paid late).
 - Premium process is confusing. For example, customers are placed on a late cycle when there is a late premium payment.
- New design of BC+ screen has too many places to look and is awkward to navigate through.
- BC+ premiums are more complicated.
- Language barriers make premium payments difficult, even when translated into written language due to literacy issues.
- Most customers pay with money orders. Therefore electronic payments are not an option. Many customers have difficulties getting a checking account.
- Counties do not receive consistent notification from EDS when payment is made.
- Solutions for improving premium problems:
 - Two month grace period should be given. This would simplify the process, and restrictive re-enrollment would be prevented.
 - iC should have the capability to override premiums in CARES.
 - Recommendation of making law change before policy is changed.
 - Premiums should be more flexible, such as creating a sliding fee scale and flexible pay schedule.
 - Recommendation that ES not collect the money.
 - Wage withholding for premium payments is an option.
 - When overpayment occurs, the money order or refund check should be sent to EDS immediately, or a credit could be applied to future premiums.
 - Case comments:
 - Anybody handling a case, whether EDS, CARES, or the State should have access to case comments and be able to explain it to a member or provider.
 - Everyone should be held to the same standard for case comments. State staff should add case comments, like county workers do.
 - It can be used to notify which month the premium is applied to.
- Next step involves state and county staff forming a think-tank.
 - Theresa Fosbinder is working on this. A retreat will be held in Madison. County representatives will be invited.
 - Topics of discussion:
 - What is policy?
 - What is the process?
- Angela Dombrowicki has been directed by Jason Helgerson to work on premium reform. This is a high priority, because complaints are heard by many.

FS Error Rates

- In simulation and production
- CARES using 30% of net income
- Simulation problems:

- If a female is already on BC+ and pregnant, it will deny the pregnancy
- Deletion of person
- Outstanding program
- Telephone interview adding FS
- Employment page (wants to hit verify button)
- What are the counties responsible for in error rates? This needs to be addressed in a future meeting.

FoodShare Disaster Process and Outcome – Jeff Brikowski and Angela Dombrowicki

- “Wisconsin FS Disaster Report” handed out (see IMAC web page) and discussed.
- QC will need to review a percentage of these cases.
- Thirty counties were informed that they would have FEMA natural disaster status.
- Due to late notice from FEMA, Monroe County was not given an operations memo. They are not included in the Disaster Report.
- Fair Hearings issue for FS denials: Increase in application volume leads to an increase in denials.
- Eight counties were commended for their assistance in processing the large number of Milwaukee County affidavits.

Updates

- FoodShare and Medicaid Quality Control- Brian Fangmeier and Melody August
 - “PERM Findings” handout discussed (see IMAC web page).
 - Clients failing to accurately report income is a predominant source of errors (p. 5).
 - Expected percentage is 3% for the federal payment error rate.
 - Methodology required by the Federal government will be used beginning October 1.
 - Issues/Impact on error rates:
 - Technical errors will turn into eligibility errors (SCHIP).
 - Administration period errors
 - This will increase the error rate.
 - These errors will be tracked separately.
 - Federal methodology does not allow for _____
 - Recommendation to communicate these errors as an administrative memo.
 - Stratified in three areas
 - Applications
 - Reviews
 - Ongoing- higher potential
 - Third year cycle- nationwide average
 - No financial sanctions in place
 - Liquidated damages now apply.
 - QA does not agree with federal guidelines for error designation.
 - FS Error handout (see IMAC web page) distributed and briefly discussed.

- Top areas of error and reasons for these errors were focused upon.
 - Directed to error type amount (wages and salaries) on page 7.
 - To determine the cause of high error rates, QA would need to investigate whether it's related to workload or policy.
 - As caseloads increase, the error rate also increases; but it's important to examine causation and variables.
 - Analyzing the workload, instead of caseload will help decrease the error rate.
 - Not much impact from BC+ during the review period (10/06-2/08).
 - Priority cases that come through ACCESS are part of sample, but not exempted.
 - How to fix this?
 - Learning curve 4-6 months from the policy change implementation may eliminate some errors.
 - Recommendation that change not occur until ES workers are caught up
 - Federal guidelines do not allow this
 - Informing consumers of large caseloads as a reason for delays is not acceptable.
- System Changes and EVHI Updates- Pam Kiern and Audrey Koehn
 - EVHI Update and CARES Schedule handed out (see IMAC web page).
 - Poor returns from EVHI investigated by Koehn.
 - Issue of search function, "Find Find", and business names discussed.
 - Business name is different than "known" name.
 - Misspellings problematic
 - Employer may be listed under umbrella business name.
 - Clients may not know business names.
 - Cross-referencing paycheck stub suggested.
 - Further discussion on EVHI business names needed.
 - Missed Ops Memo described as biggest issue (Ops Memo 08-31).
 - Question about whether standard letters could be translated into Spanish discussed.
 - Civil Rights compliance issue
 - Need for follow up
 - How can free formatted letters be translated into another language?
 - Public translation website considered; not universal though
 - Look into wording of letter regarding phone interview vs. face interview (future agenda item).
 - Please send suggestions to Amy Mendel-Clemens at Amy.MendelClemens@wisconsin.gov

Next meeting will be held August 21, 2008 at Fen Oak.