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State of Wisconsin

Department of Health Services

INCOME MAINTENANCE ADVISORY COMMITTEE (IMAC)

Thursday, November 20, 2014

1:00 – 3:30 p.m.

Dane County Job Center, 1801 Aberg Avenue - Ballroom, Madison, WI 53704

Or online at <https://connect.wisconsin.gov/imac/>

For audio, dial 888-808-6929, access code 468-5307

MINUTES

Non-State Attendees:

Jenny Hoffman, Bay Lake / Brown Co.	Bonnie DeBauche, Bay Lake / Brown Co.
Carol Wautlet, Bay Lake / Door Co.	Kris Parkansky, Bay Lake / Marinette Co.
Melissa Duane, Capital / Columbia Co.	Amy Mendel-Clemens, Capital / Dane Co.
Tony Sis, Capital / Dane Co.	Amy Beranek, Capital / Dodge Co.
Stephanie Ronnfeld, Capital / Sauk Co.	Julie Arendsee, Capital / Sauk Co.
John Rathman, East Central / Outagamie Co.	Lynn Brenner, East Central / Calumet Co.
Amy Roland, East Central / Outagamie Co.	Tim Gessler, East Central / Sheboygan Co.
Chris Machamer, East Central / Waupaca Co.	Kate Surprise, East Central / Waushara Co.
Ann Kriegel, East Central / Winnebago Co.	Kathy Welke, Great Rivers / Eau Claire Co.
Linda Struck, Great Rivers / Eau Claire Co.	Jane Huebsch, IM Central / Marathon Co.
Amy Mayo, IM Central / Oneida Co.	Mandy Mayek, IM Central / Portage Co.
Rachel Pantaleo, Moraine Lakes, Ozaukee Co.	Mia Anderson-Inman, Moraine Lakes / Walworth Co.
Brenda Zweck, Moraine Lakes, Walworth Co.	Sandy Potter, Moraine Lakes / Waukesha Co.
Doreen Lang, Northern / Wood Co.	Marlin Harms, Southern / Iowa Co.
Marjean Sutherland, Southern / Lafayette Co	Lorie Graff, Western / LaCrosse Co.
Hope Otto, WKRP / Racine Co.	Charles Friedrich, CMS
Roger Ingebritson, CMS	Audrey Mattison, CMS
Lauren Cnare, UW Health Care Literacy	Allison Espeseth, UW Health Care Literacy

State Attendees:

Linda Alexander, DHS	Autumn Arnold, DHS
Emily Carlson, DHS	Jamie Christianson-Fawcett, DHS
Sara Edmonds, DHS	Tonya Evans, DHS
Judy Johnson, DHS	Elizabeth Jungers, DHS
Hannah Knouse, DHS	Julie Milleson, DHS
Tiffany Orcholski, DHS	Susan Pfeiffer, DCF
Allison Shabino, DCF	Debbie Waite, DHS
Rachel Witthoft, DHS	Daniel Yang, DCF

1. Administrative Issues – Debbie Waite & Amy Mendel-Clemens
Because of the full agenda, summaries of agenda items not covered will be sent post-meeting.
Attendance recording - on-site attendees, the sign-up sheet in the room; remote attendees, email your attendance to Linda Alexander.
Consortia requested clarification for signatories on REN coordinator contract – only lead agency signs
2. Approval of September 18, 2014 and October 16, 2014 Minutes – Debbie Waite
 - September 18, 2014 meeting minutes – motion to approve, seconded and passed by voice vote.
 - October 20, 2014 meeting minutes – motion to approve, seconded and passed by voice vote.
3. Improving Health Insurance Literacy in Wisconsin – Allison Espeseth & Lauren Cnare, UW Health Care Literacy Group (Handout)
 - Please see handout (“Engaging Consumers through Improved Health Literacy”) for contact information and details.
 - John Rathman welcomed presenters and indicated that the consortia had identified this topic as of great interest.
 - As background for Allison and Lauren, Debbie Waite gave a brief description of the IMAC group, its composition, function and the purpose of the monthly meetings.
 - UW Health Care Literacy Group is located on the UW campus; it serves as the licensed-navigator entity for southern Wisconsin.
 - Goal is to help consumers understand various choices and resources for becoming a more informed and capable health care users. The group focuses on connections and serves as assisters in this goal.
 - The pilot program began about two years ago with funding provided through the Wisconsin Health Information Organization (WHIO). Since the inception, the scope and the areas served have expanded.
 - Purpose of the presentation to IMAC is to raise awareness and to gather feedback on how the group might improve, including identifying barriers and potential solutions. IM agencies and the Health Care Literacy Group can share experiences on what has been effective and what issues are most challenging to consumers.
 - Handout is targeted not only to those new to health insurance but also to those who may not have the necessary knowledge to make good health care insurance decisions (e.g., definition of ‘deductible ‘ or ‘co-payment’).
 - WHIO website (MyHealthWI) has a provider report card feature that enables consumers to make better health care choices.
 - Group’s focus:
 - To increase consumer understanding, knowledge.

- How best to reach consumers with the highest need – what is/are the best time(s), location(s), and format(s)? Primary audience is the consumer with less education, understanding and perhaps lower reading skills.
 - To adapt national materials for Wisconsin use. Reference “BadgerCare” plans instead of Medicaid; include contact information for resources and local agencies, including the consortia.
 - Certified Application Consultants (CAC’s) feel pressure to help consumers complete the application but feel that they lack the right information or education in assisting in the selection and the completion of the application.
 - Project activities highlighted on the handout follow a UW academic process.
 - Partnering is taking place between literacy-improvement agencies and those that focus on increasing understanding and knowledge of Wisconsin’s health care systems.
 - Train the trainer activities - any of the IM agencies are welcome to attend the spring conference that Health Wisconsin Literacy will lead.
 - Comments / discussion:
 - Per Charles Friedrich (CMS), this is good timing in view of the upcoming enrollment period. CMS considers this a best practice that can be shared with other states; also helps CMS augment its own strategy to improve consumer understanding of health care system choices.
 - Consortia questions/discussion on level of responsibility providers have for educating consumers / enrollees about their plan. Comment that some providers and Medicaid HMO’s are doing a good job and could be a good resource (e.g., Molina Healthcare in Southeast Wisconsin).
 - Question on a resource for consumers before they enroll in the HMO. Dane County has a program that is working well, especially a program working with jails to address prescription needs for prisoners. This is critical due to a potential 4-6 week delay before the prisoner is enrolled in the HMO.
Action Item: **Debbie Waite** will identify a Bureau of Benefits Management (BBM) employee to work with both Dane County / Amy Mendel-Clemens and with Covering Kids & Families Wisconsin (CKF) to share ideas.
 - Discussion occurred on Newly-insureds on dealing with co-pays and deductibles, leading some to seek medical attention at free clinics. Creates a dilemma for free clinics as they determine whether to serve this population with insurance through a private provider or through the Federally Facilitated Marketplace (FFM). Recent studies are indicating that even people with high incomes and/or are insured by a private insurer may be forgoing preventative care.
 - CKF realizes the need for additional resources and has recently posted a new staff position.
4. Planning for March, 2015 Renewals – Autumn Arnold
- DHS is working with CMS on extending certification periods for March, 2015 renewals, for certain childless adults. Initially, estimated about 89,000 March renewals; recently increased to 97,000. While still a large number, the renewals will be spread over March, April and May.

- DHCAA is attempting to align FoodShare renewals with BadgerCare renewals; estimate about 4,000 renewals.
 - Next priority is childless adults without FoodShare.
 - Concern / question about the segment that renews in March and also has FamilyCare.
 - A variety of options were explored; this is the one plan that seemed feasible.
 - Important: DHS will apply for CMS approval within the next few weeks.
 - Statistics: Average renewal level each month: 53,000 renewals / per month. For January, February and March, 2015, expecting 65,000 renewals / month.
5. Update on Real Time Eligibility – Autumn Arnold, Emily Carlson & Rachel Witthoft (Handout)
- Implementation of Real Time Eligibility capability continues to move forward.
 - CARES is being updated to advise BadgerCare applicants whether they are eligible for coverage right at the time of application. Applicants for Elderly, Blind & Disabled (EBD), ChildCare or FamilyCare will not be included at this time.
 - With the understanding that pre-application preparation (assembling, accessing all relevant documents and sources of information, finding answers to questions in the application process, etc.), is extensive, expect that a low number of applicants will be able to successfully complete the cycle/process, at least initially, to enable a real-time determination. CARES will include instructions and suggestions early in the process so applicant knows information needed before beginning.
 - Once approved, applicant's case is assigned to a consortium.
 - Noted that may be delay due to IC enrollment running overnight – this is being explored.
 - CARES will not do verification post eligibility determination.
 - Rachel Witthoft noted that a “program add” feature will be added to CARES in June of 2015. A feature requested by consortia to eliminate the need to re-populate data into the CARES system /reduce redundancy of CARES information.
 - No real time data will be used for program add.
 - Consortia questions: Can document submission and process be viewed to see status of application? Answer: Not in scope for this release.
 - Where will RTE applications be assigned? Consortia prefer that cases be sent to transfer coordinator marked as an “RTE.”
 - Health Care and Family Planning (either individually or in conjunction with other programs such as ChildCare or FoodShare) will require more information. If only FoodShare, previous process applies.
 - No need for worker intervention if RTE is ‘yes,’ but a low percentage of cases will be in this category. If eligibility is ‘no,’ the application goes to the consortia, following the usual process.
 - On Day 1, if applicant's income is over the limit, he/she will not be eligible.
 - What about FoodShare Priority Service? This results in a delayed interview; will need to consider impact.
 - How to determine a ‘closed case?’ If closed fewer than 30 days, it is still considered open; DHS needs to fully explore break-in-service.

6. Parent Pay & ChildCare Performance – Susan Pfeiffer, Department of Children & Families (Handout)
- See handout “Wisconsin Shares Electronic Benefits Transfer (EBT) Basics” for details.
 - Benefits of EBT Card for Parents: reinforces that Wisconsin Shares child care subsidy program is a financial benefit for working parents. Parents are more fully engaged in selecting and managing their child’s care (vs. when the benefit is sent to the provider).
 - Benefits of EBT Card for Providers: eliminates the need for attendance-keeping, an administrative time saver.
 - Because the parent initiates the payment to the provider, more closely resembles a private-pay arrangement. Card cannot be used for cash, but only for child care benefits.
 - EBT Implementation Timeline – Fidelity National Information Services (FIS) was vendor selected, experienced because it is the FoodShare EBT administrator. Western Region Consortium is interested in Phase I of the rollout in October, 2016. Statewide rollout is February, 2017.
 - Analysis showed that WREA and Sheboygan County were best sites for Phase I based on criteria of stable populations (less chance of moving from the pilot of the new process, pre-payment, to/from an area operating under the current process, post-payment) and in/near an urban center. Additional reasons are that LaCrosse County had experience with a pilot program, had fewer staff to train and also has a large number of providers.
 - Question: Why is the rollout not on a calendar year, starting in January?
 - Answer: Rollout at the start of a calendar year would result in burdens on providers, agencies as workloads are heavier and holiday scheduling would not provide the maximum service levels for answering questions, getting support. Timeline was developed to avoid/minimize these issues.
 - Other payment and administrative issues that will need to be addressed: provider gives care for a portion of a month and another provider for the remainder (Example was that a provider has been shut down for fraud or for a fire which causes the children to be cared for at another facility for the rest of the month. Further, is the substitute facility immediately authorized?).
 - Point of Service (POS) payment with a card reader device – usage will likely diminish as most users use the phone now and will likely use FIS website as the program matures.
 - Communication Plan – training and outreach for parents is scheduled for 2016-17.
 - Susan asked for IMAC feedback on:
 - EBT vendor performance (FIS)
 - Authorizations, especially how to handle unused benefits on the card.
 - Process for EBT card replacement, although this may not be an issue since transactions can be done by phone or at FIS’ website vs. swiping the card at the providers.

7. 2014 Management Evaluation Review (MER) Results and 2015 MER Planning – Sara Edmonds & Judy Johnson (Handout)
- See handout “FoodShare Management Evaluation Review” for details.
 - Most of the following was discussed the prior day at the Performance Management Sub-committee meeting. Nearly all MER reports have been sent / are closed out for 2014.
 - MERs provide a continuing flow of information among project areas, DHS, consortia staff and Food and Nutrition Service (FNS).
 - Wisconsin “Project Areas” are the 10 consortia, Milwaukee Enrollment Services (MilES), Tribal IM agencies (which are reviewed on a triennial basis). Last MER visits to the lead agencies were in 2012, so visits will be scheduled for 2015.
 - For 2014, FNS had designated four priority areas: 1) Program access; 2) Recipient integrity (fraud); 3) FoodShare Employment and Training (FSET) referral process to establish baseline information and 4) Case and Procedural Error Rate or CAPER, formerly known as Negative Error Rate.
 - FS applications and how to apply – ‘ghost calls’ to agency evaluated as if a new resident was accessing the agency for the first time.
 - Monitored level of customer service via Call Center Anywhere (CCA) by randomly selecting call; if related to FS, listened more fully to determine if the call was handled appropriately.
 - Recipient Integrity – based on questions recommended by the Office of Inspector General (OIG).
 - CAPER – goal is to identify the detail by agency to address what improvements each can make, using cases already identified.
 - Summary of Findings:
 - Setting file date not explained – explaining importance of getting name, address in order to gain eligibility.
 - Items needed to establish filing date and issue expedited benefits
 - Four options for applying not always given
 - All questions not asked during the interview, especially during re-certification (example: asking about changes in household composition or a change in address)
 - Non-discrimination statement updates – much less of an issue in 2014 due to link to DHS site
 - Lobby hours of operation not posted
 - Recommendations:
 - Standard CCA greeting – identify what agency and briefly explain how calls are answered.
 - Ongoing refresher trainer for workers
 - Consortium-wide meetings – both staff and management
 - One-touch philosophy
 - Continue to use CCA, ACCESS, wi.gov, Central Document Processing Unit (CDPU)
 - Investigative interview techniques review
 - Summary and wrap-up: Kudos for great strides made since inception /implementation of the consortium model. Grateful for all your efforts and continue

to raise suggestions, share information in the IMAC sub-committees to help improve the MER process.

- Planning for 2015 FoodShare MER's – FNS designated priority areas:
 - Program access
 - Employment and training programs (Income Maintenance only, not FSET vendors)
 - Able-Bodied Adults without Dependents (ABAWDs)
 - Electronic Benefit Cards (EBT's) – will be monitoring for the same behaviors adhered to by the Bureau of Operational Coordination (BOC), such as vaults, lock-up of cards, etc.

8. IM Funding Updates – Debbie Waite and John Rathman

- Debbie Waite noted that the final 2015 Income Maintenance base contract were circulating through DHS for final approval and should be sent to consortia contract signatories shortly.
- Consortia asked if executive summary of changes could be attached; DHS will create.
- Consortia also asked to be notified when their contracts are sent to their signatories.

9. Patient Protection Affordable Care Act (PPACA) Update / Issues – Debbie Waite (Handout)

- See handout “PPACA Update” for details addressing Regional Enrollment Network (REN) Coordinators and Contracts and 2015 Open Enrollment and Reporting Issues.

10. Consortia Feedback – Amy Mendel-Clemens

- REN contracts and coverage
 - Northern Consortium asked for clarification on how REN coordinator concept would work if a county vs. the consortia hosts. Response: An individual county can take REN coordinator contract but individual must provide support and service to all counties in the consortium.
 - REN Coordinator kick-off meeting date is December 3, 2014, per Craig Steele.
 - A recent ACA-CMS newsletter had an option to sign up for assisters, but the deadline has expired. The article highlighted important information for benefitting the consortia/agencies.

Action Item: **DHS** will investigate with Craig Steele if the consortia can still sign up for this service. Done.

Outcome/Result: Resource was intended for use by state MA agencies.

- Outreach for ABAWD and FSET Training – What is the status of training for partners? Response: Scheduled for January and February, 2015.
Action Item: **Adam VanSpankeren** will present at the January, 2015 IMAC meeting since he is the resource/contact for the consortia to advise which partners they would like invited.
- IMAC Sub-committees
 - Training – Consortia requested this meeting be held as scheduled in January.

- IMAC IT – Consortia were asked for and did provide lists of smaller items/requests that could be used as ‘filler’ work for March and June 2015 releases. Can consortia get these categorized by project size?

11. Operations Memos – Emily Carlson

- Published:
 - 14-45 Wisconsin’ 2013 Medicaid Eligibility Quality Control Project
 - 14-47 FoodShare Interview Policy and Systems Updates
 - 14-48 FoodShare: 60 Days Verification at Application
- In Process:
 - Implementation of Electronic Customer Correspondence
 - Streamlining Enrollment and Eligibility for Managed Long Term Care Programs
 - Processing Telephonic Applications from Offenders
 - Using Data Exchanges to Verify Earned Income for Health Care
 - 2015 Cost of Living Adjustment (COLA)
 - Private Pay Nursing Home Rate

12. Administrative Memos – Debbie Waite

- a) Fraud / Office of Inspector General (OIG)
 - Northern Consortium has raised question whether ACA funding could be used to support additional fraud activities arising out of the current caseload. BOC is evaluating and will respond.
 - Fraud agreements cannot be signed without the issuance of the Administrative Memo.
 - Have any changes been made to the draft based on the consortia’s feedback?
Response: No changes to the original draft. OIG will work individually with a consortium if they need an extension to develop work plan.

13. Sub-committee Sharing & Updates - Debbie Waite & Sub-committee Chairs (Handout)

- See handout “IMAC Subcommittee Update” for details.

14. Work Group Sharing - Chairs

- CDPU Facility Tour – What is the status of the proposed tour of the CDPU?
Attempts were made to schedule but difficult to make it happen.
- Should the tour be scheduled to coincide or complement the ESPAC / IMAC schedule? Consensus: No, too busy to do all of them.
Action Item: **Amy Mendel-Clemens** will work with Becky David to schedule CDPU tour.

15. Miscellaneous Updates / Other / Public Comment

N/A

16. December 18, 2014 Meeting Tentative Agenda Topics

- a. PPACA Issues
- b. D SNAP Overview
- c. Recognition Event