

CARES Worker Web (CWW) Changes to Telephonic Signature-April 2017



Paul Michael
Telecom Coordinator
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Background

- As part of the migration from Contact Center Anywhere (CCA) to Genesys, DHS is developing an Automated Telephonic Signature functionality which will allow the worker to play a portion of the CWW “Print Application Registration” and “Generate Summary” pages as a recorded prompt.
- Although the Automated Telephonic Signature will not be immediately available, changes will be made to the structure and text of the CWW pages to accommodate this functionality in the future. These changes will also clarify and streamline the overall process.



April 2017 Ops Memo

- ❑ The April Ops Memo will focus on any CWW page changes.
- ❑ There is no change to the policy or to the mechanisms used in collecting a telephonic signature (e.g. copy/pasting the interaction ID to CWW, pressing the record button in CCA).
- ❑ Specifics regarding the Automated Telephonic Signature functionality will be included in an upcoming Ops Memo, closer to the move to the Genesys Platform.



CWW Page Changes – April 2017

- ❑ Workers will continue to use the “Print Application Registration” and “Generate Summary” pages in CWW to collect telephonic signatures for FS, HC, and CC.
- ❑ Workers will continue to use CCA to record a telephonic signature and copy and paste the Interaction ID from CCA into the Telephonic Signature ID field for reference in the applicable CWW page.
- ❑ Workers will continue to read the telephonic signature to the member.



CWW Page Changes – April 2017

The following changes will be made to the Print Application Registration and Generate Summary pages:

- ❑ Removal of “Begin Recording” and “End Recording” buttons
- ❑ Text changes needed to support the future use of an automated audio prompt in Genesys



CWW Page Changes – April 2017

Telephonic Signature Id

• Telephonic Signature Id:

In order to set your date of application, we will record the next portion of this call and keep it on file.

Signing Your Application

I will now read a summary of the information you have provided and record your verbal signature. This is done to confirm what you said, and make sure you understand everything we have discussed. Please listen carefully and let me know if any of the information needs to be changed.

Summary of Your Requests

You have requested the following programs:

- Health Care
- FoodShare
- Child Care

You will now be read a list of statements. After all of these statements have been read, you will be asked to confirm that you agree to and understand each statement. If you have any questions or concerns with any of these statements, please feel free to interrupt at any time.

Automated Prompt

Prompt ID: 07

Use of Social Security Number

- Up front explanation of telephonic signature process provided to member
- Addition of the “Automated Prompt” section with a reference for the audio prompt to select in Genesys, when available



CWW Page Changes – April 2017

Telephonic Signature

- We will provide you with an Enrollment and Benefits book containing the full description of your Rights and Responsibilities and your reporting requirements for FoodShare and Health Care.
- We will also provide you with a written summary of your application. You are required to review it and notify us within 10 days if you see anything that is not correct. If you do not contact us, we will assume that you agree with everything recorded on the application.
- You understand the FoodShare program work requirements.
- You may need to provide proof of your answers. By signing this application, we are authorized to contact any person or organization to obtain needed information in order to determine if you can receive benefits.
- There are penalties for giving false information or breaking the rules.
- This agency cannot discriminate on the basis of race, color, national origin, sex, age, disability or religious or political beliefs. Your Civil Rights will be upheld.
- Your private information will be treated confidentially.
- If you have a disability, you may request information about your benefits in a different format.
- If you are found eligible for Health Care, you assign and give up your rights to payments from a liable third party to the Wisconsin Department of Health Services, up to the amount that was paid for your medical care.
- You will be required to cooperate with the Child Support agency if you are applying for Wisconsin Shares Child Care subsidy.
- By signing this application for Wisconsin Shares Child Care Subsidy, you are also applying for Child Support Services.
- You have the right to request a Fair Hearing if you disagree with the agency actions regarding your benefits.
- The Wisconsinjobcenter.org website is available to you and it is the largest source of job openings in Wisconsin. To find a Job Center location near you, call 1-800-256-0000.

Do you certify, under penalty of law and perjury, that you understand the questions and statements read to you, and your answers are correct and complete to the best of your knowledge?

Completing the Signature

A signature over the phone has the same legal effect and can be enforced in the same way as a written signature. Would you like to sign this application over the phone?

Please state your full legal name, today's date and the current time.

- A single affirmation from the member at end of all statements in Telephonic Signature section.





Questions?