

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF HUMAN SERVICES**

Economic Security Administration



Meeting Title: Medicaid Expansion and Eligibility (ME&E) Subcommittee Meeting

Date/Time: Thursday March 8th, 2012 / 10:00 AM to 12:00 PM

Location: Department of Human Services (DHS)
645 H St NE, 5th Floor Conference Room

Attendees:

Name	Agency	Phone	Email
Deborah Carroll	DHS/ESA	202-698-3906	deborah.carroll@dc.gov
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Agenda:

1. HRIC Update
 - a. Exchange Subcommittee
 - b. IT Subcommittee
 - c. Eligibility and Enrollment Work Group
2. Discussion
 - a. Charter Statement
 - b. Eligibility and Enrollment Business Process Flows
 - c. Responsibility to own and maintain the new eligibility system
 - d. Sister Agency and Community nonprofit survey
3. Next Steps

Responsibilities of the ME&E Subcommittee (Charter Statement):

- Communicate to agencies and organizations impacted by Medicaid changes
- Advise HRIC on policy recommendations, especially interoperability and State options available between Medicaid and Exchange Marketplace functions
- Focus on district populations impacted by Medicaid changes, for example:
 - Considering Basic Health Plan for population over 133% and under 200% of FPL that are not otherwise eligible for Medicaid
 - Population above 200% of FPL - currently on CareFirst Open Access
- Change Management Planning (new policies, training, etc) for Medicaid changes

IT Update:

Marina provided a status update regarding the IT Subcommittee and Work Group.

Business Process Analysis:

Alex provided an overview of the approach and results of recent business process work completed for Eligibility & Enrollment.

Sister Agency Survey:

Danielle provided a review of the survey and explained the purpose, the process for obtaining the responses and how the responses will be used.

- Non-profits and advocate partners believe the survey will be useful in understanding how these programs interface with eligibility programs and services
- Heather indicated we should review One City Performance Review - there may be opportunities to streamline

Closing/Questions:

Deborah closed out the meeting by asking what participants hoped to see in future meetings.

- Heather - agencies and organizations will need to see mockups of new applications
- Deborah - recommended the group assist with user testing and deployment of training

Questions from the Group:

1. Cheryl (Families USA): Care First provides Community Commitment funds to provide low cost insurance for the uninsured, not eligible for Medicaid. The ACA seems to eliminate the need for this to continue in 2014. Can the community commitment funding that is currently provided by CareFirst (~\$3M?) for low cost health insurance coverage be allocated to reduce the costs of the qualified health plans for customers?
 - a. DISB to follow up
2. Maude: Will recipients on fixed income need to recertify?
 - a. Claudia: Passive re-determination is required for MAGI only. But, we want the system to be as consistent for every beneficiary as possible. However, there are some populations, particularly waiver and demonstration groups, for which re-determination is more involved and may not be accomplished completely passively. The E&E Workgroup will be reviewing these areas to identify when and where pre-populated forms can be used for the non-MAGI population.
3. ULS P&A: Will the “ping” function of the new system work in both directions, so that families who provide data to an agency will find out what else they are eligible for?
 - a. Marina: The parent has to have the option to share data with other agencies, and system security and roles will control who can see what.
4. Maude: if an agency now has activities that are NOT their core function, should they indicate that in the survey?
 - a. Danielle – the survey is primarily interested in core functions, but agencies will be asked to also indicate (via the comments) if additional functions are being executed.
5. ULS P&A: It would be great to be able to check current Medicaid enrollment for returning citizens – sometimes they are in jail such a short amount of time that Medicaid has not been stopped, and the agencies don’t find out until they try to re-enroll the person. Heather: this is important, because the MMIS system does not have the ability to turn off eligibility.
 - a. Claudia: we’d like to be able to “suspend” coverage, not enrollment, and will work on that during system design. No policy check required, this is just a design consideration. Policy is different for Exchange vs Medicaid.
6. DDA – concerns about data confidentiality- Pauletter (DDS) voiced concern over consumers who may not want their information shared with multiple agencies and what securities will be in place for consumers.
 - a. Deborah answered regarding roles, security, and bank info analogy (banks have a lot of information about customers, but it is kept confidential unless the law requires an agency, such as law enforcement, access).
7. Jolly – currently, we cannot switch from an MCO to FFS. Will that change? Maude indicated that the reason’s beneficiaries cannot move back and forth within a month is based on the fact that MCOs get paid a capitated monthly rate and would expect payment if any services were provided by the MCO in a given month. In addition, the provider networks are different in MCOs versus FFS.
 - a. Deborah will follow-up regarding how MCO and FFS models will shift. This is also a design consideration for the new system – adding flexibility, but partial monthly payments are still an issue. ESA will provide more guidance to CFSA during the Sister Agency Survey process.

8. Funding stream issues – DDS said their clients use waivers in addition to traditional Medicaid services but recipients cannot be in more than one system and it causes payment issues.
 - a. Claudia will arrange follow-up with DDS and provide a copy of guidance memo on this issue. Client is to receive the service, provider is to bill Medicaid and pend the bill - subject to review and approval. Client should not be denied the waiver service.
9. Mental Health – EPD Waiver and loss of eligibility when the provider does not provide recertification prior to the end of the certification period.
 - a. Deborah: DHS and DHCF are addressing that now.

Action Items:

Group	Description	Assigned To	Target Date
ME&E	Follow up on questions above	All	4/12 (next meeting)
ME&E	Establish mechanism for reviewing questions and answers at ongoing ME&E Subcommittee meetings	Deborah Carroll	4/12 (next meeting)

Next Steps:

1. Next ME&E Subcommittee Meeting scheduled for April 12th, 2012