

**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 October 11, 2012 / 10:00 AM to 12:00 PM

Location: Department of Human Services (DHS)
645 H St NE, 4th Floor Conference Room

Attendees:

Name	Agency	Email
Deborah Carroll	DHS/ESA	deborah.carroll@dc.gov
Claudia Schlosberg	DHCF	claudia.schlosberg@dc.gov
Wes Rivers	DCFPI	rivers@dcfpi.org
Sarah Bagge	Families USA	sbagge@familiesusa.org
Cheryl Fish-Parcham	Families USA	cparcham@familiesusa.org
Andrew Berenato	AmeriHealth Mercy	drew.berenato@amerihealthmercy.com
Stephanie Akpa	Legal Aid Society of DC	sakpa@legalaiddc.org
Jennifer Mezey	Legal Aid Society of DC	jmezey@legalaiddc.org
Ron Swanda	Volunteer Advocate for Seniors	rswanda@earthlink.net
Charles Jackson	DC Public Schools	charles.jackson2@dc.gov
Tessa Haiden	OSSE	tessa.haiden@dc.gov
Jolly Atkins	CFSA	jolly.atkins@dc.gov
Heather McCabe	Board Liaison Health Benefit Exchange Authority Board	heather.mccabe@dc.gov
Keita Vanterpool	DC BOC	dr_keita@chirokei.com
Brendan Rose	DISB	brendan.rose@dc.gov
Lisa DeLoatch	DMH	lisa.deloatch@dc.gov
Erin Leveton	DDS	erin.leveton@dc.gov
Pauletter Hall	DDS	pauletter.hall@dc.gov
Mark Lassiter	DOH	mark.lassiter@dc.gov
Alex Alonso	DHCF	alexander.alonso@dc.gov
Danielle Lewis	DHCF	danielle.lewis@dc.gov
Miriam Straus	DHCF	miriam.straus@dc.gov
Lawrence Jenkins	DHCF	lawrence.jenkins@dc.gov
Lucy Wilson-Kear	DHCF	lucy.wilson-kear@dc.gov
David Baker	DHS	davidf.baker@dc.gov
Jeff Borkman	DHS	jeff.borkman@dc.gov
Garlinda Bryant-Rollins	DHS	garlinda.bryant-rollins@dc.gov
Richard Walker	DHS	richard.walker@dc.gov
Clyde Edwards	DHS	clyde.edwards@dc.gov
Michele Hudson	DHS	amichele.hudson@dc.gov
Sahr Nyandemoh	DHS	sahr.nyandemoh@dc.gov
Issa Barkett	DHS	issa.barkett@dc.gov
Rebecca Shields	DHS	rebecca.shields@dc.gov
April Waugh	DHS	april.waugh@dc.gov

Agenda:

- Introductions
- Updates from other HRIC Subcommittees
 - Insurance
 - IT/PMO
 - Operations
 - Communications
- Other Updates
 - D.C. Health Benefit Exchange Authority (HBX) Board Meeting
- Update on Exchange Verification
- Update on State Verification Plan
- Presentation/Discussion:
 1. Interoperability
 2. Income Conversion
 3. Policy Considerations for Renewals
- Q&A

Project Updates

- **Brendan Rose provided a brief update on the Insurance Subcommittee**
 - Continuing to work on development of Qualified Health Plan (QHP) certification requirements
 - Comment period for Essential Health Benefits (EHBs) Bulletin closed on 9/28/12; analyzing substantial feedback from stakeholders
 - EHBs to be submitted to the Center for Consumer Information and Insurance Oversight (CCIIO) on 10/10/12; review with CCIIO went well this week
 - A presentation on Essential Health Benefits was done at the 9/24/12 DC Health Benefit Exchange Authority Board Meeting
 - Refining Plan Management process flows and Employer selection for SHOP
 - Meeting with carriers to discuss Stop Loss Insurance/Self-Insured Plans
- **Issa Barket provided a brief update on behalf of the IT Subcommittee**
 - Public subcommittee meetings are still on hold while the System Integration (SI) RFP proposals are being reviewed
 - PMO is getting ready to on-board the SI vendor once selected
 - The ACEDS Transition Team is refining a work plan for legacy system modifications and continuing MAGI/Non-MAGI process flows for Release 1

(Continued)

- The PMO continues to coordinate an update of specific planning documents for CCIIO
 - **Lawrence Jenkins provided a brief update on the Local Data Hub**
 - The Local Data Hub work group is identifying points of contact at OCTO and sister agencies and are in the process of conducting a survey; continuing to work with the State Verification Plan team

- **Deborah Carroll provided a brief update on behalf of the Operations Subcommittee**
 - Continuing to discuss policies and processes for the Call Center and Navigator program
 - Comment period for the Navigator Report is open until 10/12/12
 - Reviewing and updating the Financial Sustainability Model for the DC Health Benefit Exchange Authority Board (HBX)

- **Deborah provided a brief update on behalf of the Communications Subcommittee**
 - A comprehensive strategic communications plan for the DC Exchange was presented at the 9/24/12 HBX Board meeting
 - Developing a separate website for the DC Health Benefit Exchange Board
 - On track with distributing ongoing newsletters as well as marketing RFP for DCAS roll out

Other Updates

- **D.C. Health Benefit Exchange Authority (HBX) Board Meeting**
 - Garlinda Bryant-Rollins gave a summary of the most recent HBX Board meeting held on Wednesday, September 24, 2012
 - The HRIC Communications Subcommittee did a presentation on the Strategic Communications Plan for the Exchange
 - The HBX unanimously adopted consolidation of the health insurance marketplace
 - The HBX approved opting into the Federally administered risk adjustment and reinsurance programs for the Exchange's insurance market
 - The District was awarded a Level II grant which will fund the operation of the Exchange through December 31, 2014 and pays for the IT systems
 - The next HBX Board meeting is scheduled for October 24, 2012

(Continued)

Update on Exchange Certification

- **Alex Alonso provided an update on certification of the Exchange**
 - HHS requires states to submit Exchange certification in the “Activity Areas,” which are listed below. The status of the District’s Exchange Certification to date is as follows:
 - **Legal Authority and Governance** *(Fully certified Sept. 2012)*
 - **Consumer and Stakeholder Engagement** *(Submitted early Oct. 2012)*
 - **Eligibility and Enrollment** *(To be submitted Oct. 19, 2012)*
 - **Plan Management** *(Submitted; Addendum submitted early Oct. 2012)*
 - **Risk Adjustment and Reinsurance** *(The District has opted into the Federal service)*
 - **SHOP** *(Submitted early Oct. 2012)*
 - **Organization and Human Resources**
(The staffing plan has been approved by the HBX Board; the Acting Executive Director will continue to serve until a candidate is selected to fill the position)
 - **Finance and Accounting** *(Pending)*
 - **Technology** *(Pending)*
 - **Privacy and Security** *(Pending)*
 - **Oversight, Monitoring and Reporting** *(Submitted early Oct. 2012)*
 - **Contracting, Outsourcing and Agreements** *(Pending)*
 - **State Partnership Exchange Activities** *(Optional; DC is not participating)*
 - The next “Activity Area” on Eligibility and Enrollment is due to CCIIO by November 16, 2012
 - The District has worked diligently, along with stakeholders, to complete this in-depth certification section on Eligibility and Enrollment; early submission to CCIIO is scheduled for October 19, 2012

Update on the State Verification Plan

- Danielle Lewis gave an in-depth update and presentation on the State Verification Plan to explain the verification process for several eligibility factors to include residency, pregnancy, incarceration status, citizenship, Indian status and income.
 - Residency: Due to the District’s porous borders and high coverage thresholds, the policy recommendation is to verify residency through the use of electronic data sources to confirm attestation.
 - Citizenship and Immigration Status: Self-attestation cannot be used to verify citizenship and Immigration Status.
 - Special Exchange Provision for Native Americans & Alaska Native: Self-attestation cannot be used to verify Indian status for special cost-sharing provisions and enrollment periods.
 - Pregnancy: Must accept self-attestation of pregnancy, unless the state has information that is not reasonably compatible.

(Continued)

- Incarceration: is not an eligibility factor for Medicaid, however, states cannot use Medicaid funds to pay for health services for incarcerated individuals, with the exception of inpatient care.
- Income: Eligibility determination should be based on self-attestation of income verified by information obtained from electronic data sources.
- Information obtained through electronic data sources is reasonably compatible with attestation of income, the attestation of income is considered verified.
- Federal Regulation-Reasonable Compatibility Standard: If electronic data match and self-attestation of income are both above, at, or below the applicable income standard, information is compatible. (42 CFR 435.945(1)).
- States have flexibility to define the reasonable compatibility standards not addressed in the federal rule.

Policy Recommendations for Income:

--Accept attestation if applicant attests information is above Medicaid Income Level (MIL), and data sources are below MIL.

--Accept attestation of zero income if electronic data sources are zero and no data match found.

--If attestation is below the MIL and the data sources are above, apply the HBX < 10% reasonable compatibility standard for Medicaid.

- The State Verification Plan draft has been finalized, including a thorough review of eligibility factors
- Miriam Straus gave an in-depth presentation on new MAGI-based Medicaid household composition rules and our verification plan for household composition; a substantial discussion ensued.
 - Under the new definition of “Household Composition,” the Medicaid rules generally follow the Exchange rules.
 - Under the Exchange rules, the taxpayer’s family includes all tax dependents.
 - Under the MAGI-based Medicaid rules, the Medicaid household is generally based on the tax household for families who file taxes. However, different rules apply for non-tax filers and in special situations, such as a child who is claimed as a tax dependent by the non-custodial parent.
 - For non-filers and in those special situations, the household consists of the individual, and, if living with the individual: the individual’s spouse; the individual’s natural, adoptive and step children under 19; and, in the case of individuals under age 19, their natural, adoptive and step parents, and the natural, adoptive, and step siblings who are under 19.

(Continued)

- In the case of a married couple living together, each spouse will be included in the household of the other spouse, regardless of whether they expect to file a joint tax return or one spouse expects to be claimed as a tax dependent of the other spouse.
- Generally, the custodial parent may claim the children as tax dependents. However, in some situations the non-custodial parent can claim the child. Today, this is done through a Form 8332, which relinquishes the custodial parent's right to claim the child, or with a similar statement.
- The custodial parent is the parent with whom the child lived for the greater number of nights during the year. **If the child lived with each parent for an equal number of nights during the year, the custodial parent is the parent with the higher adjusted gross income.** (This was misstated at the meeting; I apologize.)
- We are particularly concerned about cases where non-custodial parents claim the children as tax dependents because we do not want custodial parents to lose their Medicaid eligibility because their household size is decreased.
- Generally, we will accept self-attestation on household composition unless we have other information that is inconsistent with the attestation. For example, if two people attest that they expect to claim the same individual as a tax dependent, that is inconsistent because only one person can claim the individual as a tax dependent.

Discussion on Interoperability

- Deborah Carroll briefly discussed the definition, design and benefits of how interoperable systems will work

Discussion on Income Conversion

- The Center for Medicaid and Medicare Services (CMS) continues to work on refining a template for a MAGI conversion methodology to be used by States
 - Initially, the understanding was that States would have flexibility in defining their own MAGI conversion methodologies
 - However, CMS has directed otherwise, and the methodology for MAGI conversion remains undetermined to date
 - Rand Corporation was contracted by CMS to conduct a pilot in 10 states
 - Two methodologies were developed, including an "average disregard" and a "national disregard"
 - States were then given a template by CMS and told what disregards to use
 - Since family size could be greatly impacted, neither methodology will work as currently proposed by CMS.

(Continued)

Policy Considerations for Renewal

- Tabled due to time; this discussion will be moved to the November 2012 meeting.

QUESTIONS:

1. Re: State Verification Plan

Q: Will information regarding eligibility and enrollment also be shared with other programs like SNAP and TANF?

A: Yes. Information from both the Federal Data Hub and Local Data Hub will be pinged for verification purposes.

Q: How will the verification work if the data source(s) only shows the husband's information, but the wife is applying for public assistance?

A: All verifications are individualized. This type of application would fall out of the automated process and would require manual processing.

Q: How is the new definition of "Household Composition" different from what is currently defined?

A: Now, "Household Composition" is based primarily on tax rules, not living situations.

Q: Will other programs be able to "see" other household records in the DC Access System (DCAS)?

A: This is a design consideration.

Q: Do you need a special policy for grandparents for "Household Composition?"

A: This can definitely be added to the DHCF Issue Log for further policy discussion and analysis.

COMMENTS:

- **Household Composition**
 - It's important for the District to talk with representatives from the Family Bar for issues related to Household Composition
 - Stakeholders offered to provide contacts for additional policy discussion
 - Based on the new tax rules, this issue will be very complicated
 - A lot of children are being cared for by their grandparents; how will this impact household composition?
 - There was concern for potential domestic violence in instances where more than one parent attests that they will claim the child as a tax dependent

(Continued)

- **Foster Care**
 - Foster Care children are categorically eligible for Medicaid
 - Concern expressed for children who are taken out of foster care

- **RE: Communication & Messaging**
 - Stakeholders stated that the new rules on Household Composition, as well as other aspects of the Exchange are very complicated. It is important to articulate a clear message about the upcoming changes to existing customers and to potential new customers
 - The District will be reaching out to stakeholders to assist with messaging, especially regarding Modified Adjusted Gross Income (MAGI)

- **Re: General**
 - Basic Health Plan (BHP) – BHP Regulations will not be issued any time soon. There won't be a BHP in 2014.

Action Items:

Group	Description	Assigned To	Target Date
ME&E	Follow up on open questions above	All	11/8 (next meeting)
	Follow up from Stakeholders to provide contacts in Family Bar regarding Household Composition issue	Stakeholders	By 11/8
	Deborah recommended having a meeting on "Household Composition" with members from family law bar association and possibly family law judges	Deborah	November 2012 meeting

Next Steps: Next ME&E Subcommittee Meeting scheduled for November 8, 2012