DC HBX Authority ME&E Subcommittee Meeting

October 11, 2012



DCAP: Connecting District Residents to Health Care and Human Services Benefits

Agenda

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



Other Subcommittee Updates:

Insurance & IT Subcommittees

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
- 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

IT Subcommittee/PMO

- 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 IT vendor once selected
- The Local Data Hub work group identifying points of contact at OCTO and sister agencies, survey in progress; continuing to work with the State Verification Plan team
- The ACEDS Transition Team is refining a work plan for legacy system modifications and continuing MAGI/Non-MAGI process flows for Release 1
- The PMO continues to coordinate an update of specific planning documents for CCIIO



Other Subcommittee Updates: Operations & Communications Subcommittees

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 HBX

Communications Subcommittee

- A comprehensive strategic communications plan for the DC Exchange was presented at the 9/24/12 Exchange Board Meeting
- Developing a separate website for the DC Health Benefit Exchange Authority Board
- On track with distributing ongoing newsletters as well as marketing RFP for DCAS roll-out



Other Updates: HBX Board Meeting

HBX Board Meeting



Update: Exchange Certification

Update: Exchange Certification



Update: State Verification Plan

Update: State Verification Plan



Presentation/Discussion:

Interoperability * Income Conversion * Policy Considerations for Renewals

Presentation/Discussion:

- 1. Interoperability
- 2. Income Conversion
- 3. Policy Considerations for Renewals



Discussion: Interoperability

Interoperability



Interoperability

 The ability of two or more systems or components to exchange information and to use the information that has been exchanged.



How will the Interoperable System Work?

- Examples of how interoperable systems work:
 - Residents will put information in the DCAS one time for public benefit programs and interface with those systems
 - Verify MAGI or Exchange eligibility through the federal data hub
 - Verify eligibility in a newly created state data hub
 - Interface with various databases for eligibility and case management
 - Call center will interface with DCAS, HBX, and DHCF
 - DIMS will interface with DCAS and call center



What is the Benefit of an Interoperable System?

- Allows agencies to serve customers more effectively
- Streamlines business operations
- Services can be more customer focused
- Improves program integrity and accuracy of eligibility determinations
- Improves customer access and service
- Establishes the platform for service integration



Discussion:
Income Conversion

Income Conversion



Presentation/Discussion: Policy Considerations for Renewals

Policy Considerations for Renewals (TABLED – DUE TO TIME)

To Be Discussed at the November 2012 Meeting



Questions?



Appendix: Release Scope for DCAS

Release 1	Release 2	Release 3
 ACA Required Medicaid (MAGI only) QHP Subsidies/Credits Unsubsidized QHPs Functionality Deployed: Customer Portal Employer/Carrier functions Verification (Federal Data Hub integration and Local Interfaces) Eligibility & Enrollment Plan Management QHP/Medicaid Financial Management (Marketplace) Contact Center Consumer Marketing "Basic" Case Management "Basic" Case Management	 Federally Funded Remaining Medicaid (Non-MAGI) Supplemental Nutrition Assistance Program (SNAP, also known as Food Stamps) including Employment and Training Program and Disaster Food Stamps (separate application process) Temporary Assistance for Needy Families (TANF) including TANF Employment Program and TANF Diversion (one-time payment in lieu of ongoing benefits) Refugee Cash and Medical Assistance Locally Funded Program on Work, Employment and Responsibility (POWER) Interim Disability Assistance General Assistance for Children Immigrant Children Health Care DC Healthcare Alliance Burial Assistance Homeless "Intake" New Functionality Deployed: "Full" Case Management Human Services Financial Management 	 Federal/Local Homeless Services Program Strong Families Program (SFP) Adult Protective Services (APS) Family Violence Prevention Services Teen Parent Assessment Program Refugee Resettlement Services Parent and Adolescent Support Services (PASS) Emergency Rental Assistance Program (ERAP) Low Income Home Energy Assistance Program (LIHEAP) Non-DHS ("Optional") DOH: Women, Infants, and Children (WIC) OSSE: Subsidized Child Care New Functionality: N/A



Appendix: Release Schedule

