Medicaid Innovation and Reform Commission
Eligibility and Enrollment Update

April 7, 2014

Office of the Secretary of Health & Human Resources
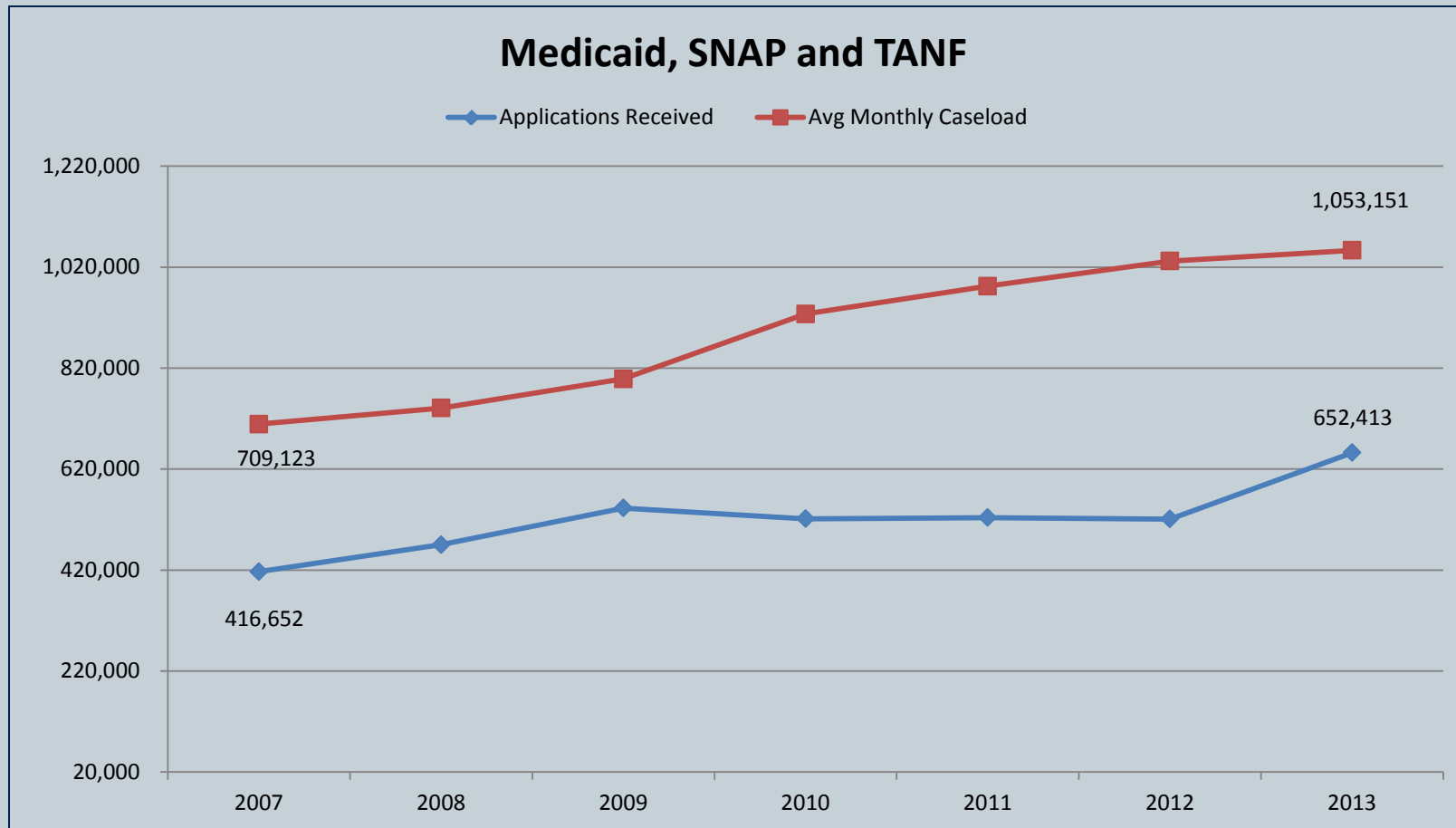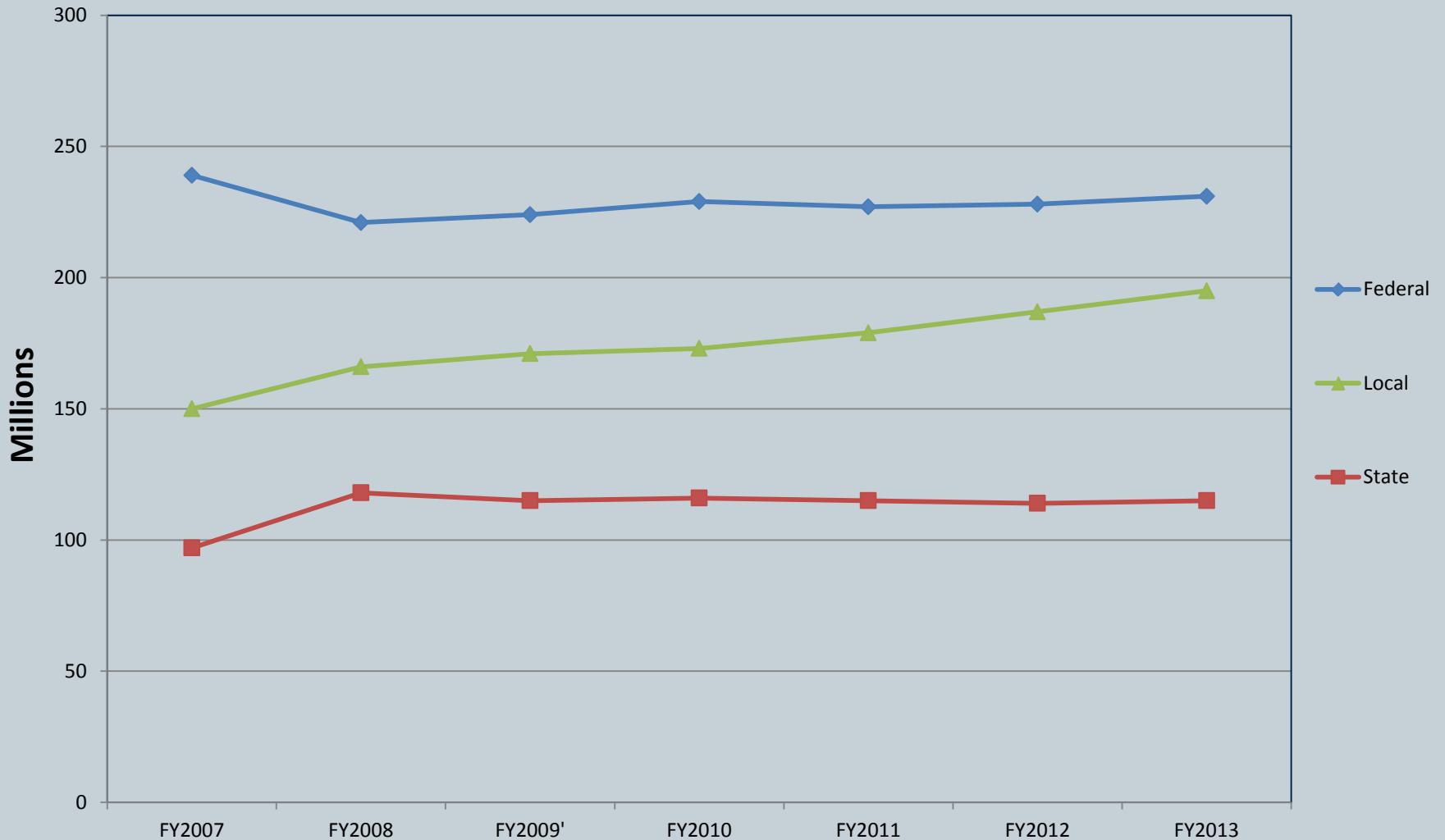
Commonwealth of Virginia

www.ehhr.virginia.gov

The Big Picture

Historical Program Growth

Medicaid, SNAP and TANF

Applications Received ◆ — Avg Monthly Caseload ■

Local Operations Funding by Source

Workload vs. Funding Summary

From FY2007 to FY2013

- Average Monthly Case Volume grew 49%

- Application Intake grew 57%

- Operations Funding grew 11%
  - Local share increased 30%

eHHR Technology Vision

- Streamlined, electronic application process for multiple public assistance programs

- Use federal and state data-matching sources

- Customer "self-directed" services

- Minimize human intervention

- Support "No Wrong Door" for services

MAGI Implementation

Eligibility Modernization now in phase 2
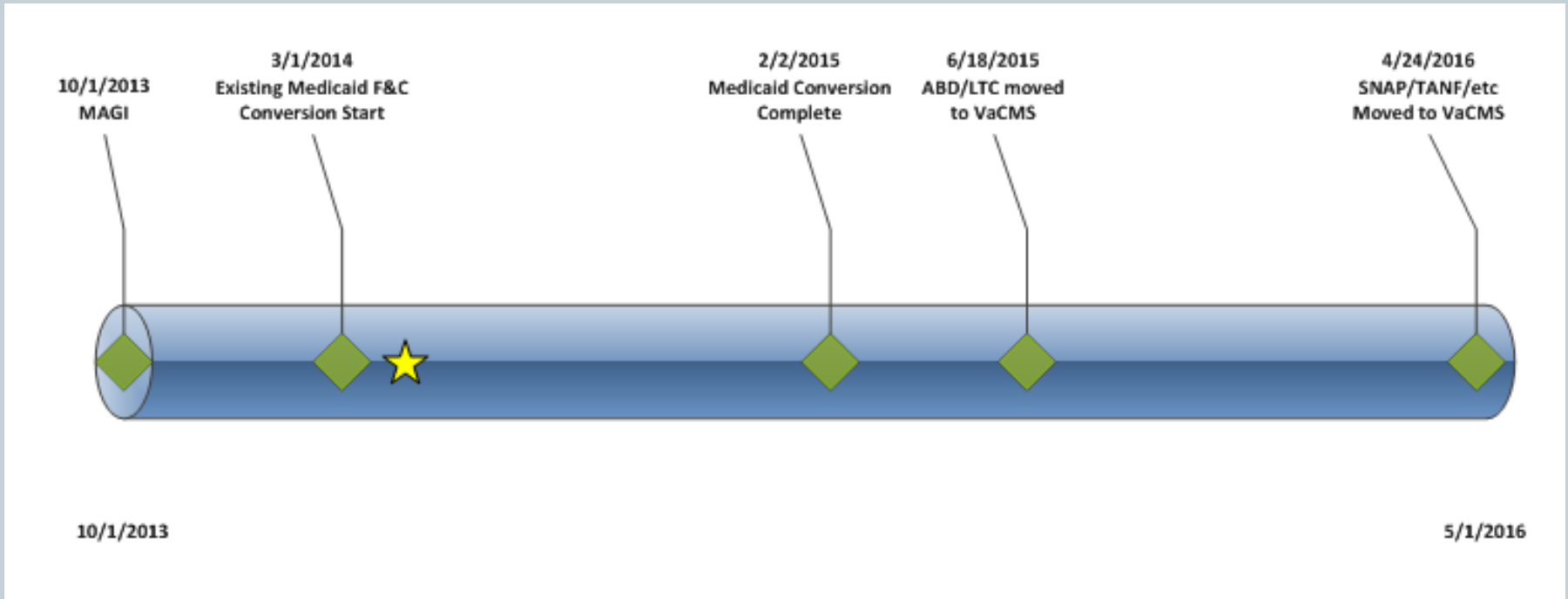
We are currently moving the existing Medicaid Families and Children cases from the old ADAPT system to the new VaCMS system.

MAGI Implementation

- System went live 10/1

- Cover Virginia Call Center went live (telephonic apps)

- New Modified Adjustable Gross Income eligibility rules

- Began leveraging the Federal Hub for electronic eligibility verification

- Started sending applications to the Federal Marketplace (FFM) – 1st week

- Started receiving applications from the Federal Marketplace (FFM) as they became available February 18th

MAGI Implementation

- Transitioning away from 15+ year old legacy system

- New system is now CMS certified

- Eligible to receive enhanced 75/25 match for Medicaid Operations (up from 50/50)

- Makes additional funds available to Local Agencies

Implementation Challenges

- Compressed timeframe for procurement, system design, development, testing and implementation

- Limited training window prior to implementation

- Fluid policy requirements from federal partners

- Staff resources stretched thin at both the state and local level

- Big change for local staff – policy, system, process (plus dual systems till 2016)

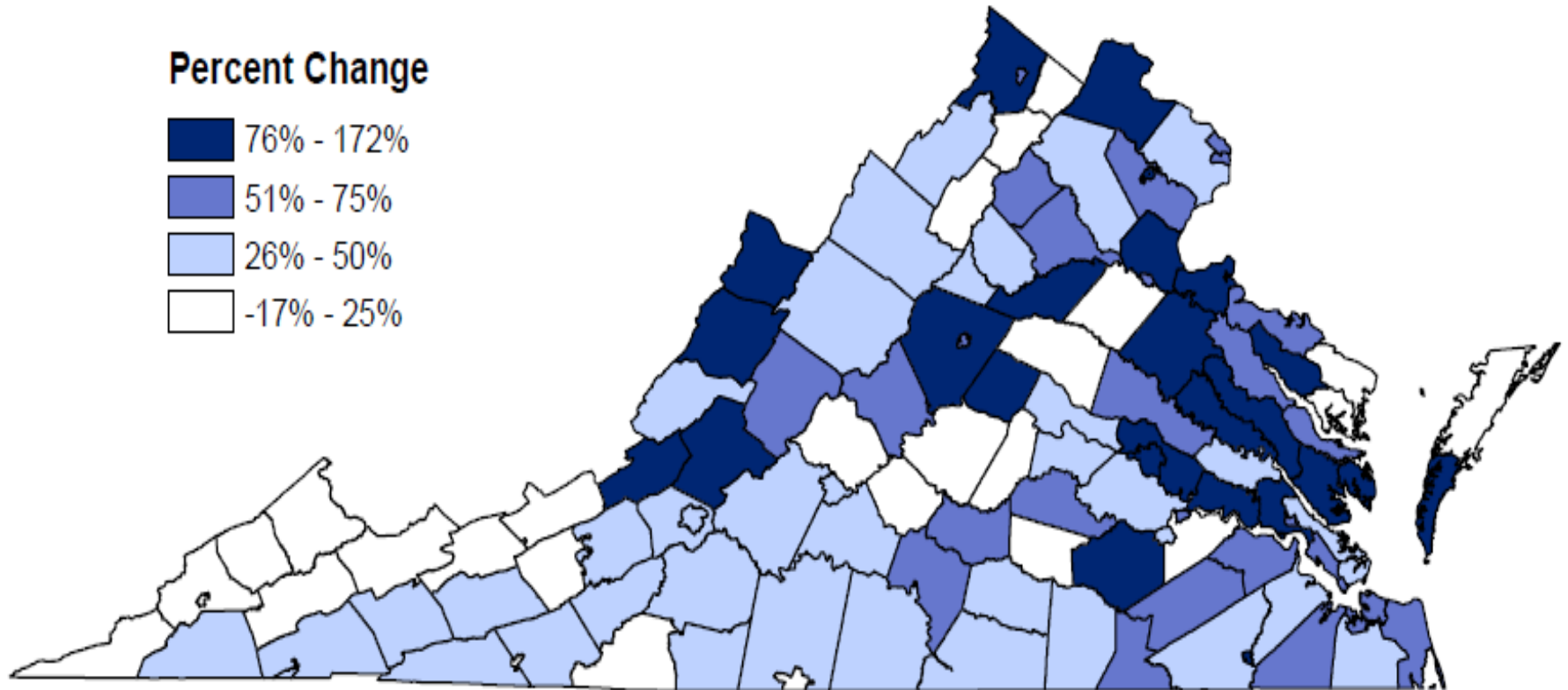# Medicaid Applications since 10/1
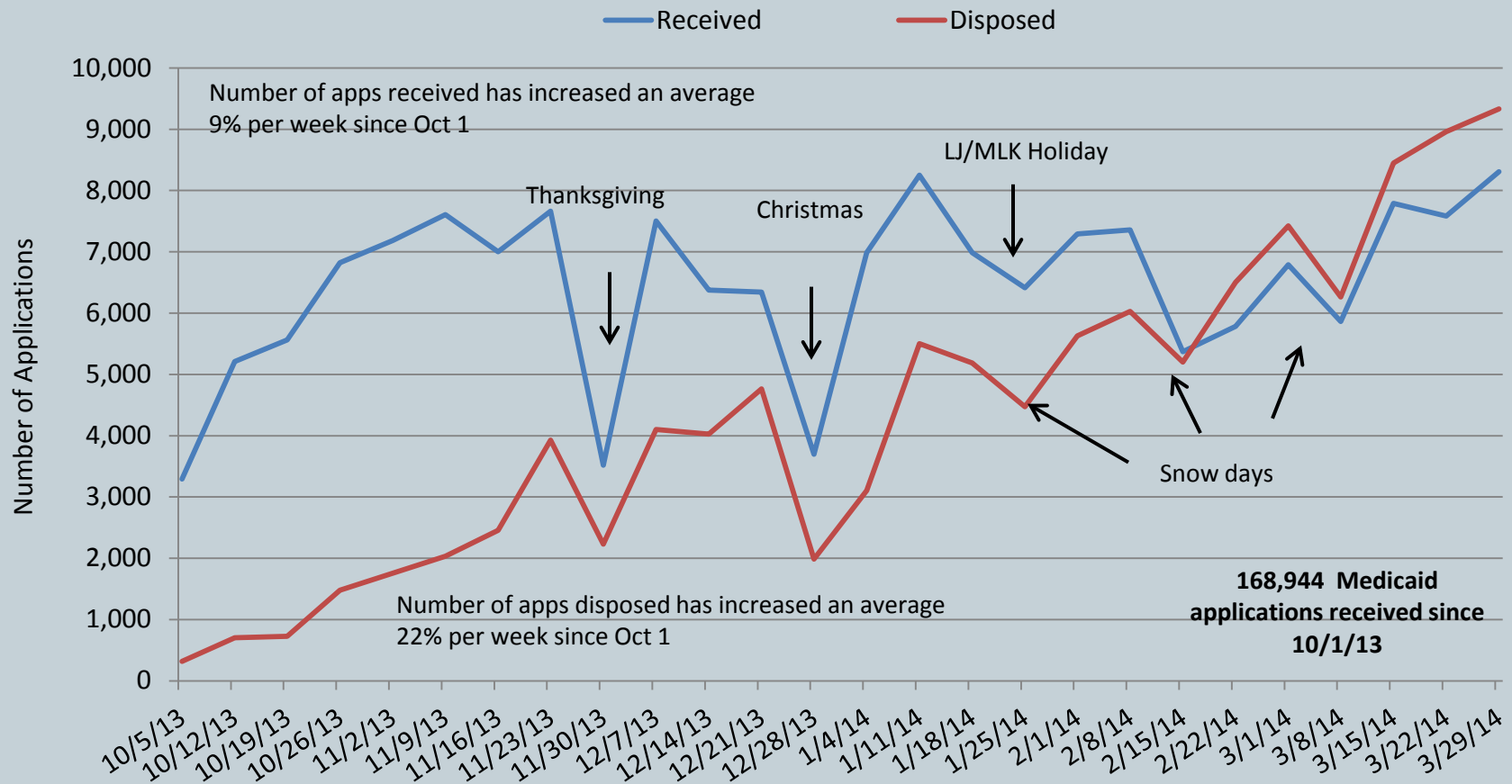
Data from VaCMS only (excl. MedPend).
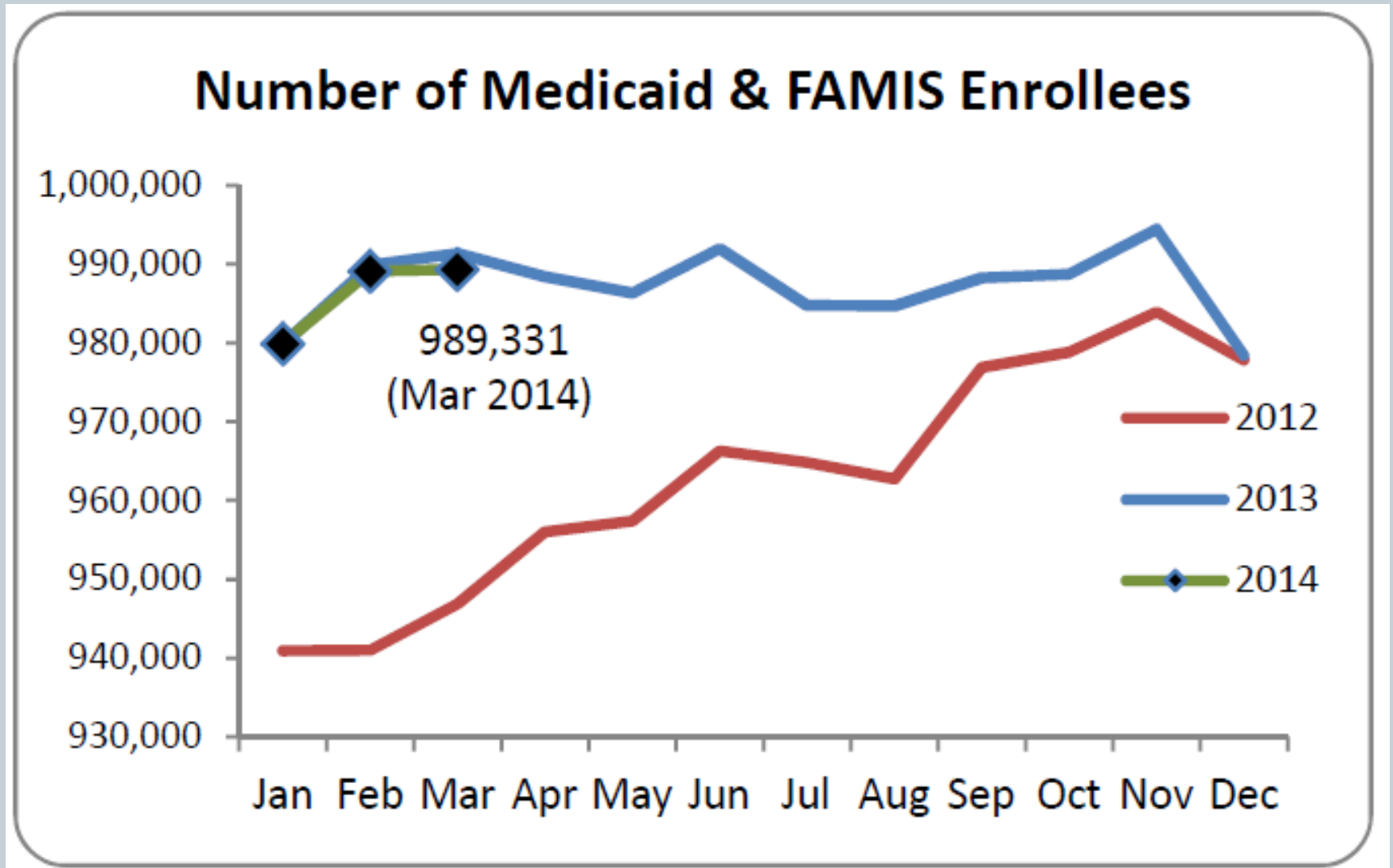
Pseudo Expansion

Medicaid Application Intake*

Percent Change

- 76% - 172%
- 51% - 75%
- 26% - 50%
- -17% - 25%

* Dec 2013 to Feb 2014 vs. same timeframe previous year

% Intake Change by Local Agency

Local Agency	% Change	Local Agency	% Change	Local Agency	% Change	Local Agency	% Change
King And Queen	172%	Winchester	69%	Carroll	44%	Wythe	27%
Orange	166%	Rappahannock	68%	Chesterfield/Colonial Heights	44%	Henry/Martinsville	26%
Manassas	149%	Newport News	68%	Pittsylvania	44%	Mecklenburg	26%
Dinwiddie	147%	Portsmouth	66%	Roanoke County/Salem	44%	Dickenson	25%
Highland	130%	Hopewell	65%	Southampton	44%	Clarke	24%
Henrico	122%	Charlottesville	64%	Powhatan	43%	Prince George	23%
King George	118%	Suffolk	63%	Manassas Park	43%	Russell	22%
Franklin City	112%	Norfolk	61%	Fairfax County/Falls Church	42%	Appomattox	20%
Richmond County	109%	Essex	60%	Greene	42%	Galax	19%
Loudoun	102%	Culpeper	59%	Halifax	42%	Accomack	18%
Fluvanna	100%	Virginia Beach	59%	Shenandoah	42%	Tazewell	18%
Botetourt	99%	Greensville/Emporia	58%	Campbell	41%	Warren	17%
Gloucester	97%	Hanover	56%	Montgomery	41%	Buchanan	16%
Bath	96%	Rockbridge/Buena Vista/Lexington	56%	Smyth	40%	Danville	16%
Charles City Co	96%	Fredericksburg	56%	Lynchburg	39%	Page	14%
James City	95%	Arlington	55%	Augusta/Staunton/Waynesboro	38%	Giles	12%
King William	93%	Sussex	55%	Bedford County/Bedford City	37%	Pulaski	11%
Caroline	90%	Amelia	54%	Goochland	37%	Louisa	9%
Richmond City	87%	Charlotte	54%	Radford	37%	Patrick	7%
Craig	86%	Westmoreland	53%	Petersburg	36%	Spotsylvania	6%
Frederick	86%	Nelson	51%	Floyd	35%	Bland	4%
Northampton	80%	Surry	51%	Alleghany/Covington	33%	Nottoway	4%
Albemarle	78%	Isle Of Wight	49%	Franklin County	33%	Cumberland	3%
Mathews	77%	York/Poquoson	49%	Madison	33%	Lancaster	3%
Stafford	77%	Chesapeake	49%	Rockingham/Harrisonburg	33%	Buckingham	-3%
Prince Edward	75%	Hampton	48%	Scott	28%	Amherst	-4%
Alexandria	73%	New Kent	46%	Washington	28%	Northumberland	-4%
Williamsburg	73%	Brunswick	45%	Roanoke City	28%	Wise	-5%
Prince William	72%	Fauquier	45%	Grayson	27%	Norton	-14%
Middlesex	70%	Bristol	45%	Lunenburg	27%	Lee	-17%

Medicaid Enrollment so far in 2014

Number of Medicaid & FAMIS Enrollees

989,331
(Mar 2014)

2012
2013
2014

Pseudo Expansion Breakdown

- Across the Commonwealth, submitted Medicaid application volume is up 51% since 10/1/13

- Northern VA is especially busy. Likely message confusion from DC and MD Expansion efforts
  - Fairfax is up 2423 applications in the last 3 months

Going Forward

Progress to date

As of March 28:

- 68% of all applications entered in VaCMS have been fully processed, up from 66% the previous week

- 13 localities have completed processing more than 90% of applications received

- 47 additional localities have completed processing more than 80% of applications received

- Sixth consecutive week that more applications were processed than received

- The application processing rate has increased by over 20% each week since October
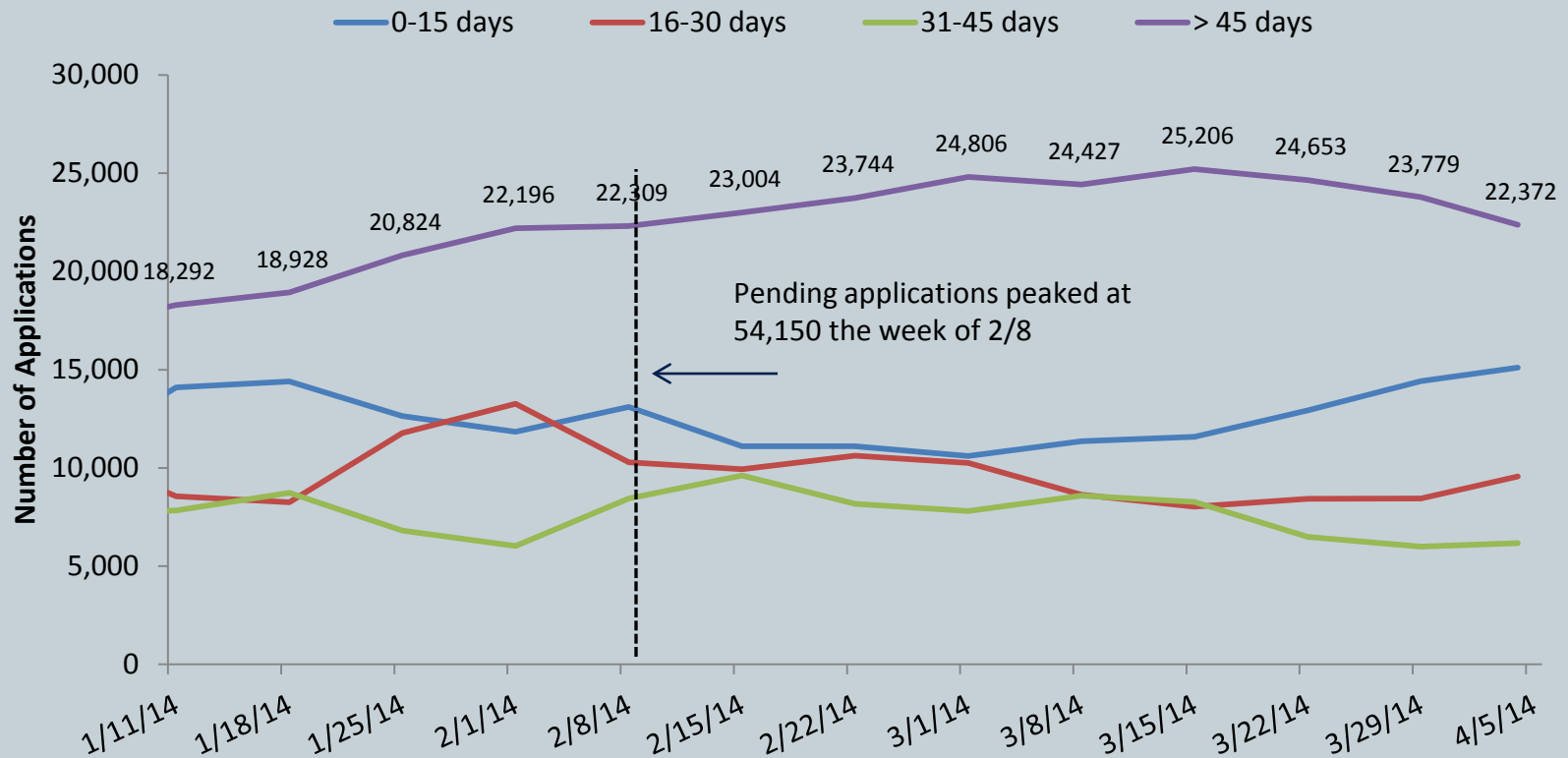
Challenges going forward

1. Building local agency adoption with new system
2. Backlog of submitted Medicaid applications
3. Trouble with applications transferred from the Federal Marketplace
4. The Continuing Pseudo Expansion Effect

Proactive System Support Plan

Plan defined and engaged starting in February:

- Embedded SME's

- Accelerated/Added training

- Software (VaCMS) improvements

- FFM Data clean-up

- MMIS improvements

- Help Desk Calls

- Local Support

Medicaid Applications Pending

0-15 days — **16-30 days** — **31-45 days** — **> 45 days**

Number of Applications

Pending applications peaked at 54,150 the week of 2/8

18,292 18,928 20,824 22,196 22,309 23,004 23,744 24,806 24,427 25,206 24,653 23,779 22,372

Cumulative count of pending applications received since Oct 1.

Eliminating the backlog

- Targeting 27 local agencies that have 80% of 45+ day application backlog

- Strategically-planned overtime to achieve this goal; funded by Federal and budgeted State sources

- Start overtime by April 12th; eliminate the backlog by May 30th

- Requirements, system schedule and instructions to access the funds will be released this week

- Plan embraced by agency management

- Several of the local agencies, including Fairfax, acknowledged the tremendous support and partnership being shared

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Stafford County Example*

- Local office proactively established a special team focused on 45 day or older Medicaid applications

- Team expressed comfort with the system

- Staff is overall positive and progressing in their VaCMS skills

* From a site visit last week

Working with the Federal Marketplace (FFM)

Transfers to the FFM

- We started sending applications to the FFM the first week of October

- 40,293 applications have been sent to the FFM to date

- Once an application goes into the FFM, VA Medicaid no longer has access

- HHR has raised this "customer service" concern to HHS Secretary Sebelius

Transfers from the FFM

- CMS continued development of the FFM outbound transfer through Q4 2013

- First transfer from the FFM was available Feb 18

- Problems with the Federal website rippled into data quality issues with outbound applications

- October/November/December data from the FFM is poor. VA's not the only state challenged.

- We're working with the Feds to get the data clean

Transfers from the FFM (stats)

- VDSS is pulling batches of FFM transfers
- Central resources @ VDSS are correcting the FFM application data; many times calling the citizen to fix issues
- Once the FFM application is ready, it will be sent to the appropriate Local Agency so eligibility can be determined (starting April 24th)
- 43,773 applications are pending on the FFM
- 70% of the FFM applications to date have been denied; many (~33%) are already existing in Medicaid

Medicaid Expansion / Closing the Gap

Next Steps for Current Processes and for Potential "Closing the Gap" Applications

1. Continue enhancements to VaCMS, MMIS, CommonHelp portal and the Cover Virginia Call Center to make Medicaid applications easier to process

2. Approval of Governor McAuliffe's Introduced Budget general language for centralized support

3. Already developing a integrated, cross agency work plan for working on existing applications and potential "closing the gap" applications

4. Evaluate and define potential processes for streamlined enrollment (Express Lane)

Questions