HCPF/Eligibility Site Monthly Touch Base Meeting - 2025/01/30 14:32 MST - Transcript

Attendees

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Transcript

00:10:00

Rebecca Ornelas - HCPF: Hi Carla.

00:20:00

Shawn Bodiker - HCPF: Good afternoon everyone. I'm going to give it a minute before we get started. because I show it's not quite 3:00 yet and I want to make sure we get everybody I'm kind of watching the tally of people joining go up. So just give us one minute.

Shawn Bodiker - HCPF: For those just joining, I'm just giving it a little bit more time to kind of allow everyone to come into the meeting room. so we'll get started here in just a few minutes.

Shawn Bodiker - HCPF: Okay, it's about a minute after three. and the number kind of slowed down, so I'll go ahead and get started. So, welcome to the Hickpuff eligibility, monthly touch base. again, I'm Sean Bodcker. I'm the eligibility policy manager for the department and I will be facilitating today. Rebecca, if you could go to the next slide. So, our agenda today again is welcome. we're going to cover the following topics today. the renewal requirements project. feedback on the renewal packet design. our long-term care supports and services 60-day extension project update. And then we will leave it some time for open forum there at the end. So with that, I am going to go ahead and have us go into our first presentation in regards to our renewal project that we have planned for June of 2025.

Shawn Bodiker - HCPF: and going to turn it over to Jennifer Garcia from our eligibility systems Anna Bordio from our policy unit, and Alicia Delhone from our Medicaid inbox operations staff.

Shawn Bodiker - HCPF: Whoever wants to take over

Ana Bordallo - HCPF: Thanks. Yeah,...

Ana Bordallo - HCPF: I could take over. Hello everyone. My name is Anna Bortio, the eligibility policy lead. Jennifer Garcia and I will be presenting on project 10595, MA renewals, CMS guideline updates. my role for this project is to ensure we implement federal requirements based on guidance the department has received from our federal partner CMS. before I jump into the presentation, I will give Jennifer and...

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Ana Bordallo - HCPF: Alysia an opportunity to introduce themselves. Jennifer.

Jennifer Garcia - HCPF: Thanks, Anna.

Jennifer Garcia - HCPF: So I'm Jennifer Garcia. I am the eligibility system analyst and myself along with Tracy Pillas were the project leads for this project in particular. Alicia. Okay.

Alicia Deleon - HCPF: Hi everyone. I work with the Medicaid inbox in the operations division. I am also one of the workstream leads for the

Ana Bordallo - HCPF: Thank you, ladies. next slide. All right. Policy summary. On March 15, 2024, the Centers for Medicare and Medicaid Services issued guidance to all states outlining important information for conducting renewals consistent with federal Medicaid and CHIP requirements. the department's goal is to comply with federal re renewal requirements to ensure that individuals eligible for Medicaid or CHIP can successfully renew their coverage. If the department fails to comply with these federal renewal requirements, the department anticipates that may place it on a corrective action plan until the renewal process is adequately addressed and brought into compliance.

Ana Bordallo - HCPF: Next slide. project implementation. The department will implement the CMS renewal requirements in different phases because of how big the scope of these changes are. The goal for completing all requirements is no later than June of 2027. Phase 1 project 10595 is scheduled for June of 2025 and will impact September 2020 2025 renewals. And next slide and I will pass it on to Jennifer Garcia to provide system updates.

Jennifer Garcia - HCPF: Thank so I'll go over some of these key system updates. First one is we have members who return their renewal forms or requested documentation by the end of their eligibility renewal period, they must maintain coverage until a final determination can be made. So CBMS will immediately and automatically reinstate coverage for individuals whose benefits were terminated at final review which is the 15th of the renewal month. for members who get terminated at final review and submitted renewal form or documentation by the end of the eligibility renewal period, CBMS will automatically generate a reinstatement notice to notify the member of their benefits being reinstated and that a final determine has yet to be made.

Jennifer Garcia - HCPF: In addition, CBMS is going to generate a system case comment upon the automatic reinstatement of the individual. we are also making some county dashboard updates. So, a new column with a indicator and the ability to filter the column is going to be added when a renewal is extended for a member who returns their renewal form or documentation by the end of the eligibility period. this indicator is going to help eligibility sites keep track of their timeliness and compliance with performance standards and the map dashboard will continue to be the data source that will be used to hold the eligibility sites accountable to meeting expectations. Next slide.

Jennifer Garcia - HCPF: for these changes we have children moving into a lower benefit category at exparte. So if a child is eligible in a lower benefit category, a renewal packet will be sent out to the household. at final re if they don't return the renewal packet, the child will be enrolled in the new benefit category. And this is such like CHP. the renewal V letter language updates are going to include new language to the renewal VCL cover letter that will be added to specify which members in the home are requesting renewal documentation In addition, we'll be making changes with the income interfaces at renewal.

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Jennifer Garcia - HCPF: So during the inmate exparte process, CBMS is not going to check the income interfaces such as FDA, Equifax and EES if there is income verified within the six-month look back period. And then one of our final updates is the peak enhancement at renewal. when a medical assistance renewal started status in CBMS, any changes reported in the Health First Colorado app or the Peak website should not cause the RTE to run for MA. These changes will go directly to the peak inbox for processing. Any questions on this project?

Jennifer Garcia - HCPF: All right,...

Ana Bordallo - HCPF: Thank you.

Jennifer Garcia - HCPF: I'll hand it back over to Sean.

Shawn Bodiker - HCPF: Yeah, thanks.

Shawn Bodiker - HCPF: Thank you ladies for presenting some of those changes. One thing I will add, Rebecca can go ahead and move forward in the slide deck. The one thing I will add is we have had county participation as we're working through this project. So, we really want to appreciate all of you that have been attending those meetings and kind of giving us your thoughts so that we are implementing this with that in mind. thank you for that. so we're going to move on to our next agenda topic. and I welcome Kristen Lundy and Sarah Davis from the department to go over feedback on the renewal packet design.

Kristen Lundy - HCPF: Hello, good afternoon. My name is Kristen Lundy. I am the member content strategy and compliance manager with the department. I am heading a team that is focused on improving the way the department communicates with our members. And part of that work has been supporting the renewal packet kind of redesign work that's being done in addition to all of the work that Jennifer just gave us as well. And so today I am reaching out to all of you or hoping to connect with all of you to solicit feedback on the renewal itself and give you some opportunities to engage with us on this topic and be involved as we plan out what it's going to look So next slide.

Kristen Lundy - HCPF: So, some of the questions that we're asking, we are wondering which parts of the renewal, do you find the most helpful or clear and why? Are there specific sections or terms in the renewal that are confusing or unclear? And then just what changes or improvements would make the renewal packet more user friendly? One of our goals through the renewal project is to I guess improve the quality of that. I'm blinking on the actual term right now, so my apologies. we want to make the user experience a little bit cleaner and as user friendly as possible is what I'm trying to convey. so please, we are hoping to get as much feedback as possible ahead of any of this work. We have a link that's in this slide and I will also drop it in our chat here as well along with my email.

Kristen Lundy - HCPF: go ahead to the next slide. So one of the things that we're doing along with this project is comparing the renewal with the I've done a crosswalk of the CMS verse what Colorado is doing with that. the center for Medicare and Medicaid services the model that they gave us to go off of for this work. I've compared that with the version that Colorado has. What I'm seeing is that a lot of our version is federally required, but the way that we're maybe presenting it is not necessarily required. We've taken some liberties in our own way to expand certain areas or elaborate in certain areas.

Kristen Lundy - HCPF: And we think this is an opportunity to look at that again and just make sure that we are being as clear as possible and making the renewal process as easy as possible for our members. so this specific slide is looking at attachment C of that CMS model. This is the document we call it the authorized representative form that we have in our renewal. I think it's like age eight or nine depending on the person's family size in our renewal. So it's pretty front and center for most people. in the CMS model version this is an attachment and so it's further down on the packet not front and center.

Kristen Lundy - HCPF: Some of the feedback that I've heard is that members have signed this page in lie of the signature page itself and so that's caused some confusion and maybe backlog of their case as well. so I'm curious if that's been something people have experienced. We would love to get insight on what you were seeing on the ground on that. So, slide. And then, I believe our next few slides are the way that Colorado has presented this authorized representative section. So, again, I think on this, it looks like it's page nine of 25. so pretty early in the packet, certainly possible that somebody could confuse it for the signature page.

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Kristen Lundy - HCPF: and we take a little bit more real estate in that document with this form itself. Go to the next slide. Thank you. And so, yes, this is just a continuation of that authorized representative information that Colorado shares. so this is one area that I'm looking for feedback on. we really are keeping it pretty broad right now. We feel like we've got an opportunity to get as much feedback as possible from our stakeholders and our members to incorporate into the future phases of this project.

And we're hoping to engage with all of you on this and collaborate in this work. So, I will make sure to drop our form in the chat as well as my email address.

Kristen Lundy - HCPF: And if you guys have any further questions or comments, I'm happy to speak to those or be in touch and take whatever feedback you have on the topic. I'm seeing with this page in Adams County. Yeah, that's the kind of information that we're hoping to hear from you all. what is confusing folks? what are you hearing that's the most confusing? So, if the form allows you to share that appropriately, great. Thank you so much. if you want to send me an email on that, that works as well. Any questions or comments? Okay. I will turn it back to Sean then.

Kristen Lundy - HCPF: Thank you.

Shawn Bodiker - HCPF: All right.

Shawn Bodiker - HCPF: Thank you and yes, we definitely want to hear from you. So, feel free you can add things to the chat. we'll try to take a screenshot of that so that we have all those comments. Thank you, ten. then moving on. We're going pretty quickly today. So, moving on to one of our last things that we're going to discuss today is our LTSS 60-day extension update. So, I welcome Cat CE from our systems team and Melinda Vanderu from our long-term care policy team.

Melinda Vanderkooy - HCPF: Thanks, I appreciate it. next slide. All right. thanks everyone for being here today. My name is Melinda Vander Vandercoy and I'm the long-term care policy advisor for the eligibility. I did want to share some exciting news. CMS has given the approval to allow for the 60-day extension to apply for 12 months. So through the December 2025 renewals. Previously, we only had the authority through June 30th of 2025. We do have an updated change though. CMS did clarify that we cannot apply the 60-day extension to individuals who are over income over resources.

Melinda Vanderkooy - HCPF: So with that, we will have some system changes that are needed and add these termination reasons to the list of exceptions. This will be done in the build currently scheduled for March 8th. As a reminder, the exceptions to the 60-day extensions are death of a Colorado resident, the member requests withdrawal from the program, incarceration, and as of March 8th, over income and over resources. The operational memo 24-056 has been updated to reflect these changes and will be posted to the website soon. and so now I'll pass it to Cat.

Kathleen Seese - HCPF: Hi guys. And Rebecca, if you want to go to the next slide, All right. So, the updates that Melinda was just speaking to, we are going to be making those updates through the March 2025 project in the KT release notes. You'll want to check for or refer to project 10867. We will have release notes specific to these one updates for these two new reasons. and our SDDD team will also be updating the existing trainings to ensure that they capture these two new reasons that we will not be applying the 60-day extension to them. If you do have any members you're processing right now who are granted that extension for over income or over resources, those extensions are going to continue to apply up through As of March 8th when the project goes in, we will no longer apply those extensions.

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Kathleen Seese - HCPF: But anybody who has been granted an exception extension, sorry, there's too many e in all of the words we say. So I get them a little confused. So anybody who is as has been granted an exception up extension up through March 7th will continue on that extension until the end of their 60

days. and just an update, I just realized we didn't have this covered on here. we found out about 5 days after we implemented the 60-day extension that CMS didn't approve us of granting these except extensions for these two population. So, that's why we have to go in and update it with a new project. that's everything I have and Lisa, I think you had some additional information you wanted to provide.

Lisa Pera - HCPF: Yeah, thank you so much. if I could have the next slide, please. So, a CDS communication came out this week that referenced that change that we're making to no longer include over income and over resources in the 60-day extension. So, wanted to make sure that everybody did see that CBMS communication. And then I wanted to call out just a couple more items related to that just for your information. There is a Cognos report available. It's called MAL LTC and buyin eligibility extension. as I said it's available in Cognos. This report is updated weekly and it will show you who in your county has received the LPC and buyin 60-day extension.

Lisa Pera - HCPF: And then once the extension is over and the members no longer in the extension period, they will drop off. But included in this report is what may be some really helpful information for you. In addition to having the member name, state ID, it has information around the case. So it'll tell you whether or not it's a combo case. It'll tell you what aid code they're in, what their contact information is. It will also show you the initial extension date and the extended termination date or rather the initial termination date and the extended termination and when the extension is going to end. And then it will also show you the termination reason for the extension.

Lisa Pera - HCPF: So, you may find this report to be helpful just as you're trying to work through these cases to work with the members to ensure that they remain covered. this will give you a sense on what your county volume is and maybe it's because verifications are missing and you have those verifications. You can do outreach to the member to get those verifications. I just wanted to make sure everybody was aware that report with that information is now available to you. The other thing that I wanted to let you know is I wanted to fill you in on what outreach the department is doing for these members.

Lisa Pera - HCPF: So, we have a couple of different avenues of outreach that we are conducting to these members and it's important that you're aware of them because you may get phone calls from members saying, "Hey, I got this voicemail or I got this email that said I have to do something in order to keep my coverage." And that way you will know that they got the phone call or the email from the department and you'll be able to pull up the member's case to see what it is they need to do in order to resolve the issues and maintain their coverage so they don't have a gap. two things that the department is doing directly is we are conducting an auto dialer campaign. So we will be sending We will be doing an automatic maybe voicemail we may reach the member.

Lisa Pera - HCPF: We're going to be doing an automatic phone call to everybody who receives their extension. And it will essentially say that you've someone in that I forget exactly what the language is but it's essentially alerting them to the fact that they received a communication and they need to take action on their case to avoid a gap in coverage and to please sign into peak or reach out to their county. We will also be sending an email and a text on the heels of that phone call. So about a week after the phone call goes out, we'll be sending a text and an email that says the same message that you need to take action on your case, please log into Peak or contact your county.

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Lisa Pera - HCPF: And at the end of the 60-day extension, if the member has not yet resolved their case and they are terminated, they will get another text and email letting them know that they have 90 days in which to resolve their case to avoid a gap in coverage and avoid having to reapply. That's an existing campaign that they will then fall into. We went over these outreach strategies with some of our community advocates and stakeholders because we recognize this is a lot of messaging going out to members.

Lisa Pera - HCPF: But made the decision based on the feedback that we got that it's important that we really do what we can to reach these individuals because we very much want to ensure that they keep their coverage and that they don't experience a gap in coverage. we also have the member contact center involved so they're prepared should members call them to say what does this communication mean so that they are armed with the appropriate information.

Lisa Pera - HCPF: Lastly, we are sharing the reports with our nursing facilities, PACE, ICFs, and CMAs so that they have the information in their case load or that they're responsible for, who has received the 60-day extension so that they can help do whatever they can from their end, either work with the member or ensure that they've done their pieces in order to help keep these members covered.

Lisa Pera - HCPF: So, it feels a little bit like a communication blitz, but we really want to do everything that we possibly can to help protect these members. I saw a question come in the chat. So, the first one, Tiffany says, "So, if we pull up the Cognus report and it gives us a message that we don't have access, does that mean that we don't have anyone on the report?" I would say not necessarily, Tiffany. And I would suggest opening up a ticket so that you can get access to the report. want to make sure that you're able to run the report. If you didn't have anyone on the report when you ran it,...

Lisa Pera - HCPF: it would just show as blank. Tiffany,...

Tiffany Watson - CDHS-CTY: ...

Tiffany Watson - CDHS-CTY: is that the MA ticket, not a help desk ticket?

Lisa Pera - HCPF:

Lisa Pera - HCPF: I would start with a help desk ticket unless anyone on the call any of my colleagues wants to correct me.

Tiffany Watson - CDHS-CTY: Okay.

Lisa Pera - HCPF: But that's the direction that I would go.

Tiffany Watson - CDHS-CTY: And secondly, that is a standard response from Cognos reports when there isn't anything on our reports. So that's why I was confused by that.

Lisa Pera - HCPF: And I will confess that I'm not as familiar with the Cognos reports. However, I do know that I have a colleague who has been pulling these reports for us for a while and before we had anybody in the extension, she was able to pull the report and it was blank. So, that's what led me to believe that you would see the report without anybody on it.

Tiffany Watson - CDHS-CTY: Okay. Thank

Lisa Pera - HCPF: And let us know, Tiffany, if you're not able to get that resolved for sure. And then Karen is asking, "When will those outreach phone calls happen so that we can prepare our lobbies and call centers?" That's a really good question. So, the campaign is going to start in February and the first phone calls will be occurring on February 18th and then a week later on the 25th is when the first texts and emails will be going out.

Lisa Pera - HCPF: Typically the phone calls will begin on the third Monday of the month. It's on the 18th because the 17th is President's Day in February, but we are typically targeting the third Monday of the month. And so the first round in February will catch all of January and may also have some folks from February as well. Any other questions about the outreach that the department is doing. All right, thank you so much for all your work that you're doing with this population, they really are our most vulnerable and we really want to do what we can to help ensure they retain coverage. Sean, I'll hand it back to you, I think.

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Shawn Bodiker - HCPF: Yeah, Thank you everyone for presenting Any other questions on any of that? Maravevel, did you want me to turn it over to you to bring up a known issue that you wanted to go over? Oh.

Marivel Klueckman - HCPF: Before we do that, Natalie snuck in a question in here. How often is a report updated, Lisa?

Lisa Pera - HCPF: Yeah, thanks for that question, The report is updated weekly. Welcome, Natalie. And then Lupe is seeing clients that have a termination reason for fail to pay premium. Lube, I would wonder if they have an additional termination reason attached because sometimes members can have multiple termination reasons. However, I would also ask that you share a couple of those examples with us so that we can look at them and make sure that everything is functioning appropriately. Thank you for checking that. Thanks.

Tiffany Watson - CDHS-CTY: So I went to put in a ticket about that Cognos report. I guess I'm needing some clarification on do I do that through as a CBMS question ticket or what kind of ticket or do you guys not know?

Lisa Pera - HCPF: I would recommend, I hit the wrong button there. Wasn't applauding your questions. Although questions are good. keep them coming. I would recommend CBMS ticket unless Jennifer you think it should be Jennifer or Cat. I'm looking at my systems folks on the calls.

Jennifer Garcia - HCPF: Yeah, I would agree. A systems ticket or a Yeah, excuse me.

Lisa Pera - HCPF: Yeah, that agrees too. Yeah, thanks Tiffany for the question.

Marivel Klueckman - HCPF: And as Lisa said, thank you all very much for your partnership and helping us take care of our vulnerable population and all of our members that need access to care. since we have a little bit time, we didn't prepare slides, but I thought I'd take advantage of the time that we have here. do we also have a known issue around this population and specifically around the LOC referral? So the referrals that are going that are generated from CBMS to the peak pro inbox in which our case

management agencies access so that they can do the assessment. so if you haven't seen we have sent out a CBMS communication on Friday making everyone aware that we identified that there is an issue where the referrals from CBMS were not consistently going over to peak pro.

Marivel Klueckman - HCPF: So the CAS were not getting those referrals. and I say consistently because it sounds like some instances they were maybe not. so there is a CBMS communication that is about to go out. I think we're still trying to target today because we're really trying to get you the information. where we've been able to identify a short-term fix as of last night. Wait. Yes. our deote partners are able to identify the referrals from CBMS and they're doing data fixes to make sure that those go over into the peak pro inbox and then the Cas's our case management agencies can access them.

Marivel Klueckman - HCPF: So, apologies and appreciate your grace as far as, just working with us through this process. Big new processes that we implemented and then just trying to take care of the hiccups. That data fix is for referrals as of yesterday going forward. We did identify that this issue actually was occurring retroactively prior to 127. So, we have a bucket of referrals that we're trying to do some analysis and trying to figure out what to do with those referrals retroactively. our goal is to make sure that members that need that referral that the assessment is done, but we also want to be thoughtful about not taking all that big bucket and just dumping it per se. so there's a lot of operations and strategy that needs to go into that.

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Marivel Klueckman - HCPF: So we will give more direction once we have more information on the retroactive but know that prospectively we have a fix in place a temporary fix a permanent fix will occur later but at least for your purposes it's happening and if for some reason you hear that it's not happening our infamous open up a help desk ticket statement comes in here as well. So, any questions or thoughts? And Claudia cat, my apologies. I just threw this in here. Anything I missed that might be important for them to know.

Kathleen Seese - HCPF: I think you covered it.

Marivel Klueckman - HCPF: Does it?

Kathleen Seese - HCPF: I don't have anything to add.

Marivel Klueckman - HCPF: Thank you, Heather.

Heather Wells: In addition to having submitted some help districts for this issue, which I'm so grateful that you guys are figuring out a fix for it. That's awesome. Thank you so much. we've also seen referrals being generated when clients turn in peak applications and where they say, "Yes, I am disabled, but I'm not requesting help with self-care activities." where referrals will automatically generate to send to RCMA even though that's not considered a long-term care request. And then today, one of my technicians found one where it was a SNAP only peak application. Medicaid wasn't even requested where the client declared a disability and our CMA still got a referral for that one as well. That just came straight from peak. It wasn't entered into the LOC screen or anything.

Heather Wells: And so I want to do a help desk ticket for it, but I also want to make sure I'm not like duplicating anything that might already be known.

Marivel Klueckman - HCPF: Did you see my reaction,...

Marivel Klueckman - HCPF: Heather? I was like, "no." That means yes, please do a help desk just ticket. Unless team, you guys have heard of that that I haven't, but definitely not what should be happening.

Heather Wells: All Sounds good. I will do that. Thank you.

Marivel Klueckman - HCPF: Okay, Cat, am I correct?

Kathleen Seese - HCPF: We are.

Kathleen Seese - HCPF: Yeah, that's one of the things we're looking into. we know there are some instances where referrals are going through when they should not be. So, we are looking into that and we're actually going to be working with our OUCL and our peak team to look at the overall process with peak and referrals and try to iron that out a little bit.

Heather Wells: I don't know. So, we can do a ticket on the snapple new one for sure.

Marivel Klueckman - HCPF: please. Yes,...

Marivel Klueckman - HCPF: because that one I don't think we've seen yet. So, like Cat said, we're definitely trying to streamline the front the other process as well.

Marivel Klueckman - HCPF: Thank you, Heather. Appreciate the feedback.

Heather Wells: Okay, thank

Marivel Klueckman - HCPF: Any other thoughts or questions? No. Okay, I'll hand it over to Sean here in a minute. But I just do want to call out in case you haven't seen the weather forecast, I'm looking for positive here. We have 60s coming here soon. So, I don't know how many of you are excited about it, but I am. So, some good vitamin D and outdoor weather and get the kids out the doors. They're going store crazy. So, wish you all I'm going to hand it over to Sean.

Shawn Bodiker - HCPF: open forum. So, an opportunity for you all to ask any questions and hope that my colleagues on here are listening as well. the one thing I want to give one last update. I know it wasn't on our agenda either. but from a policy perspective, we have received the increase to the federal poverty limit. my team is currently working on those updates. keep an eye out. we will be getting those memos updated with the new amounts as well as getting them into the system. so just want to give you a heads up before because I know it's this time of year that you guys know that those change and usually we get a lot of questions to the med inbox. So just want to give you a heads up that we have them and that we are working towards getting them updated into the system as well as those memos. So keep an eye out. We will put out a CBMS communication in regards to once those memos are posted to our website.

Shawn Bodiker - HCPF: So that's my one policy announcement that I wanted to make. So with that, I'll turn it over. do you guys have Any open form that you would like to ask of us before we close out for today? Christina.

Christa McGavin: Can you hear me now?

Shawn Bodiker - HCPF: Yeah, go ahead.

Christa McGavin: I have a question regarding CAP and the med sites, which I know is a little bit of a hot topic, sometimes. So, when CAP or the med sites in general get applications, we've been seeing in case comments that there is a application received in the NES portal. I have no idea what that is. And we cannot see those applications as a county. They're not in EDMS. so they're getting applications processing up to the point of sending the VCL, but then they're expecting the clients to turn in the VCL's to the county of residents and just let it be finished there.

01:00:00

Christa McGavin: This is kind of a problem because we have no idea what was reported on that application. So, we have no idea if what we're updating is how it was reported to them, what we were looking for. Also, we don't know to be looking for these DCLs. we're not the ones generating them. We're not putting them on our calendar to keep an eye out for it because we never got the application. We never worked it. and I guess I'm just trying to figure out what are we supposed to be doing here because I just don't understand why the med sites are treated differently than another county can't transfer a case while it's still pending DCL, but GMAP does.

Christa McGavin: So, I don't know. I'm just trying to figure out what is the correct process here and how are we supposed to be handling these cases.

Shawn Bodiker - HCPF: That's a really good question.

Shawn Bodiker - HCPF: Lisa, do we have anyone from our MA sites here that can help with that or our contract team? No.

Lisa Pera - HCPF: I don't know if we have anyone from the contract team, but we have Lupe on from CAP. I have some thoughts, but I don't have an answer right now for you, Christa, but Lupe, did you want to hop on

+1 303-***-**00: last week and this week itself, I think Delta County, I'm not sure where Krista is from, but Delta County, I actually myself reached out rejecting some of those applications and that is because the applications that they're being referenced are applications that are being processed through our call center. Cap does not hold cases that are not watched. So unfortunately we initiate the application and if it does pend for BCL the correspondence that goes out it says that verication should be turned into county of resident and I think please correct me if I'm wrong Christ but I think that's what she's referencing on

Christa McGavin: Yes, and that's why the issue came back up again is because we've been told by surrounding counties that's how they were handling it is just sending those VCLs back verifications back to ZAP.

Christa McGavin: So, we just had been doing that and yeah, that's why it's re brought up as an issue

- +1 303-***-**00: And based off of the case load workload that we have,...
- +1 303-***-**00: it looks the flowchart, it looks like we wouldn't need those cases to prompt the verification,...
- +1 303-***-**00: but it does indicates that they go to county of residents, especially But they're not water cases.

Lisa Pera - HCPF: Yeah. ...

Lisa Pera - HCPF: just and I see Gabrielle and Tiffany both have their hands raised, but I just want to make sure Christa I'm understanding. what is happening is cases are being transferred to your county. and they're not complete because a VCL was generated and the VCL directs the applicant to return the verifications to you, but you're not aware and to wait for this VCL because you don't know it was generated and b you don't actually have a copy of the application to understand for that background information. Is that correct?

Christa McGavin: Yes, correct.

Lisa Pera - HCPF: And are you seeing these specifically for CAP or are you seeing it for all of the MA and EAP sites?

Christa McGavin: I want to say it's probably all of them. I can guarantee there definitely are some specifically from CMP, but I believe it's probably all of them if I went to

Lisa Pera - HCPF: And I saw a couple of other thumbs raised as well. So I think I understand the situation. Gabrielle, did you have something you wanted to ask contribute? Okay. Okay.

Gabrielle Fischer- Douglas County: not specific to this but I would echo that we are also seeing that. I have other questions.

Lisa Pera - HCPF: Hang on a sec. Tiffany, is your question related to this?

Tiffany Watson - CDHS-CTY: No, it is not.

Lisa Pera - HCPF: It is not as Okay. So, Christa, I made some notes. Let me follow up on this with our contract managers to understand the flow and really clarify what the expectations are. Ordinarily, you're correct that applications should not be transferred before they are complete, but we do have some limitations with our MA and our EAP sites that I just want to better understand. and...

01:05:00

Shawn Bodiker - HCPF: Yeah. Heat.

Lisa Pera - HCPF: with that, Gabrielle, I know you had your hand up. Did you want to ask your question?

Gabrielle Fischer- Douglas County: I've got two. We are seeing an increase of calls related to billing issues where when we review the case on our side, everything's correct. There's nothing wrong. There's nothing pending. There's no soups or anything, that members are reporting that providers are not able to get a hold of Hickpuff for billing issues or the dates don't match. So, their services are being denied even though they're approved the first of the month, and they keep getting sent back to the county to resolve it. Do you guys have guidance or something other than call the member contact center and ask for billing because that's getting hard and the anger is getting put on our specialists. And then I have a second one.

Shawn Bodiker - HCPF: That might be something.

Gabrielle Fischer- Douglas County: And then...

Shawn Bodiker - HCPF: Do we need to take that back?

Shawn Bodiker - HCPF: Marbel, I see you came on camera.

Marivel Klueckman - HCPF: And Gabrielle,...

Marivel Klueckman - HCPF: my apologies that you guys are kind of stuck in the middle there. So, I would say instead of So, I don't know to if you're referring them back over to the Medicaid call center. I will say that we just sent out another what we were hoping was a helpful communication,...

Marivel Klueckman - HCPF: CBMS communication on January 22nd to help try to redirect the providers over to the resources. So, we've created a whole page on resources for providers and there's been a lot of work that's been done to help them get their claims paid. So, I don't know if that's helpful or are you thinking we need something more than that?

Gabrielle Fischer- Douglas County: So we are providing that...

Gabrielle Fischer- Douglas County: but the problem is that the providers are leaving it up to the members to resolve the issue. So the members are calling both billing, they're sending in escalations to Hickpuff through the Hickpuff thing. They're calling us saying, "I need you to transfer me to a person that can help me fix this billing issue." And the only thing that we have is to direct them back to, "Hey, here's resources for your provider to do and here's resources for you to do because we can't even see... who you are seeing." it's very specific. They'll say, "Hey, can you tell me when I last went to this provider?" And I'm like, "That's not something that we can do." and they're wanting us to make that connection. And I've been seeing an increase of that.

Gabrielle Fischer- Douglas County:

Marivel Klueckman - HCPF: ...

Marivel Klueckman - HCPF: that's definitely within the expertise and whale has of our Medicaid call center to see. So, Gabrielle, if you wouldn't mind sharing maybe a couple examples and I'm happy to help try and make connections and then we can also connect with our MCC...

Gabrielle Fischer- Douglas County: Do you want me to send them to you directly,...

Marivel Klueckman - HCPF: if they've seen the trend, if there's other tips and tricks that may be helpful as well and apologies that our members are being put in that kind of situation.

Gabrielle Fischer- Douglas County: Marbel? Okay.

Marivel Klueckman - HCPF: Sure, that'd be great. Thank you.

Gabrielle Fischer- Douglas County: And then the second issue that I have, I did email the inbox just to get clarification for the EES discrepancies where members are being denied for not reapplying. if they call in within that 30 days, do we actually need a physical new application for that one member who's denied if the rest of the case is open? Because we're seeing CAP just take verbal confirmation that they want to reapply and...

Gabrielle Fischer- Douglas County: using the reapply date. But I thought guidance was that we had to have a physical application which caused confusion with the CRFs and everything. Even...

Shawn Bodiker - HCPF: H I'll kind of step I don't know Marbel my opinion on this is we've always used that the best practice has been...

Shawn Bodiker - HCPF: if they've come back within the last 30 days that we can utilize the last application that we had for them and so I would say that that remains

Shawn Bodiker - HCPF: is true in that instance unless anybody on my policy team thank you Anna wants to disagree with me. So as long as they come within that 30 days I think it is okay to accept. If it's after 30 days then you need to get a new application.

+1 303-***-**00: Hey Sean, sorry.

Gabrielle Fischer- Douglas County: if the case is active with everybody else. I don't think that's happening across the board,...

Shawn Bodiker - HCPF: Yes. Okay.

Gabrielle Fischer- Douglas County: so you might want to

Marivel Klueckman - HCPF: And Gabrielle, I know we had Oops. And I know we had a little while ago, Anna Blay, we can circle on this. I know we had implemented some changes where we received clarification that even though the case is active, if there's one individual and let's say it's four months down the road that we needed a new application, we did a project around that. So thanks for calling that out. We're happy to pull that out. We can share it with you or we can just kind of send a refresher to a reminder to everyone as well if that helps.

01:10:00

Ana Bordallo - HCPF: Yeah, Marbel,...

Shawn Bodiker - HCPF: Thanks, Anna.

Ana Bordallo - HCPF: are you referring to the reapply function?

Marivel Klueckman - HCPF: Yes. Wonderful.

Ana Bordallo - HCPF: Yes, we have a memo on that as well. Let me see if I can find it and then I could post it on the chat. Yep.

Marivel Klueckman - HCPF: Thank you.

Gabrielle Fischer- Douglas County: want to add a person to my home, we can do that verbally over the phone. We've never required an application or CRF adding that person. and that's why it gets confusing. this one instance, we need to have a new application even if they come back seven months later, and say, "Hey, I lost my job. It's why I didn't respond earlier because I knew I wasn't eligible, but now I don't have income and I want to be added back into my household's thing." If they were never on the case, we could just do it. But since we need a new application.

Ana Bordallo - HCPF: Yeah, I believe the memo that I wrote covers that where if the member has already been terminated due to not providing verifications, whether it's an EES discrepancy or verification, if they come back within those 30 days when it's in ongoing mode, we can accept that verification.

Gabrielle Fischer- Douglas County: for the moment. Yeah.

Ana Bordallo - HCPF: But if it's past the 30 days, a new application is needed. But, I believe that's covered in that memo that I'm going to provide. Let me just look for that.

Shawn Bodiker - HCPF: So, Gabrielle, was that your last question? Just so I can Okay,...

Shawn Bodiker - HCPF: thank so I think the next person that had their hand up was Tiffany. Want to go ahead and ask your question

Tiffany Watson - CDHS-CTY: So, I just wanted to know...

Tiffany Watson - CDHS-CTY: if you guys are still working on the level of cares coming through to us more seamlessly than they are now or if we're going to have to continue to do the search for them. I just kind of want to know for going forward in terms of what our workload looks like because right now we're having to track those pretty closely and I can't imagine in a big county what that's like but because they're just not coming through I think the way it was designed. So I'm just trying to figure out if this is our new normal.

Marivel Klueckman - HCPF: That's it.

Shawn Bodiker - HCPF: No worries. Thanks, Cat.

Kathleen Seese - HCPF: Sorry, my muted button didn't want to unmute.

Kathleen Seese - HCPF: Yeah. So, just to clarify, we will always have level of cares going into the inbox. The majority of them, if the member is active pending for medical assistance, should be posting directly to the level of care screen. if you're not seeing that, please submit help desk tickets. I know there's been some that have been researched if there and we're working with our CCM staff because there's issues with the files coming through because of issues on the CCM side. So, there are some issues we're working on. so yeah, if you are continuing to see that, please keep submitting help tickets so we can keep looking at those.

Tiffany Watson - CDHS-CTY: And then what about the ones that go to the level of care screen and we never get notification?

Tiffany Watson - CDHS-CTY: Is that still something we're needing to submit as

Kathleen Seese - HCPF: Right now we don't have any notifications to go in some future projects we'll have some alerts that you'll start to get once those level of care start to populate start to come through...

Kathleen Seese - HCPF: but right now we don't have alerts or case comments set up for every single one of them. But keep your eyes open for those because that will be updated in future projects.

Shawn Bodiker - HCPF: Go with Heather Wells cuz you're first on my screen.

Heather Wells: Thank this might be a little of a weird one, but I just have been noting that here in Llata County, we've been seeing an increase in our LIS batch new applications that have been coming through

and also seeing a ton of them, relative to our numbers here at least, where they've been getting entered and AIDed in January, but with October or November application dates, meaning that by the time

Heather Wells: they show up on our reports, they've already epged. And I was wondering if there's any guidance for that or any ideas on what's triggering that

Lisa Pera - HCPF: Sean, you want me to jump in here?

Shawn Bodiker - HCPF: Yes, sorry.

Lisa Pera - HCPF: I think they get familiar with this issue.

Shawn Bodiker - HCPF: Yeah, thank you.

Lisa Pera - HCPF: I can see this is something, Heather, that we've picked up on as well. So, thank you for noticing it. And I don't have an answer for you today except that we're looking into what's causing just the whole process I should say around LIS. But, I can tell you as far as EPG, we're working on, not holding counties accountable to the date that it's showing, the date of the application, because you're not made aware of it until it's already EPG, and that's not fair. How are you supposed to process it something timely that you don't even know about? So, I just want to say that we've caught this.

01:15:00

Lisa Pera - HCPF: This is something I've got a flurry of emails in my inbox about it and we're trying to dig in a little bit further to understand exactly what's happening in the process and where the delay or the disconnect is. So, Yeah.

Heather Wells: RP forms come back and we're like, where are these coming from? Why are they being triggered? What is going on? And then we're like, it's Lisbat. And then my texts are like, should I resend this because we received this within 30 days of the denial notice, even though the application date is three months ago. And so, yeah, just getting a lot of questions on them recently.

Lisa Pera - HCPF: I'm sure you have and we're asking questions internally as well to really dig into what's going on with that.

Heather Wells: Thank you. Can we expect some sort of CBMS communication or...

Lisa Pera - HCPF: So yeah,...

Heather Wells: or alert when there's some answers? Thank

Lisa Pera - HCPF: once we figure out what's going on, we'll get some kind of communication out to you about it. So now

Shawn Bodiker - HCPF: perfect. Thank you,...

Shawn Bodiker - HCPF: And I see the last person's hand up, Karen.

Karen Garcia: And I also put it in the chat, but I don't know that that made much sense.

Karen Garcia: I was just going back to the comment about if a member closes for more than 30 days on an active case, we need a new application for that member. But what do we do with that application? Do we create a whole new case just for that member rather than putting them back on that active case?

Ana Bordallo - HCPF: Hi Karen, this is Anna with policy. Sorry, I misread your question, so if you do receive that new application for that member that was terminated or is providing that verification, you have to use the reapply function and then enter that effective begin date based on that application just for that specific member. Alicia did provide the memo on the reapply versus resendin process and I believe that'll help provide further guidance on that process.

Ana Bordallo - HCPF:

Karen Garcia: Perfect. Thank I did copy that and we will read it. Thanks.

Ana Bordallo - HCPF:

Ana Bordallo - HCPF: Yeah, you're welcome. If you have any questions,...

Ana Bordallo - HCPF: go ahead and feel you could reach out to the Medicaid inbox. box.

Alicia Deleon - HCPF: Hello everyone.

Alicia Deleon - HCPF: I'm so sorry. I added the occupational 10 number. The link is not working. Sorry. I will get that fixed

Shawn Bodiker - HCPF: Thank you so much. and then I think I wanted to make sure we hit I see no more hands up, but one last question that was from Gabriella. Are there any updates to the ARG processes? We are finding cases have been approved and notices sent to families, but determination is not being sent to the county for processing.

Shawn Bodiker - HCPF: Lisa, thanks.

Lisa Pera - HCPF: Yeah, I'll hop in here.

Lisa Pera - HCPF: Thanks, Gabrielle. So, what I understand is that ARG is processing the application, sending the approval to the member, but not sending it to the county is what I'm hearing is happening. in those instances, we need to know about them because that means that they're not following their standard process, which is to notify both the member and the county, when the completion happens. So, there's some disconnect there. if you could send those examples to Valerie Gyos. I'm typing her email in the I clearly can't type and talk at the same time.

Lisa Pera - HCPF: if you could send those examples to Valerie and we can look into seeing what's happening and why is ARG not getting those to you. additionally related to ARG, we continue to work with them on the backlog. they are to have completed everything from the first half of 2023 and they are to be back to their 60-day processing by tomorrow. So, if you have applications that you are still pending on that are from June 2024 or earlier, I might have said 23.

01:20:00

Lisa Pera - HCPF: 24 June 2024 or earlier, please send those to us. And then, starting in February, if you are finding that you have applications that are more than 60 days old, meaning they were submitted more than 60 days, not the date that they were signed, but the date that they were submitted to ARG. We want to know about those as well so that we can continue to work with ARG to get them back to their timely processing. And again, you can send those to Valerie. Yeah.

Shawn Bodiker - HCPF: Thank you, Lisa. with that, at time. I do see that, Anna, we had one more question from for clients that do need a new application due to the MA reapply button, CAP takes new application via phone call and records at a station, is this okay or do we need a paper application?

Ana Bordallo - HCPF: Yeah, that's okay. you can accept applications over the phone. Mhm.

Shawn Bodiker - HCPF: Yes. Yeah. Thank you.

Shawn Bodiker - HCPF: I thought that was quick to add in there. so thank you today, for joining us. we will be back next month, February 27th, same time at 3:00. so look out for the communication for our next time that we will meet next month. So, thank you all for partaking today and joining us and thank you for all that you do. Hope you have a good rest of the day and...

Alicia Deleon - HCPF: Thanks, Sean.

Shawn Bodiker - HCPF: enjoy that nice weather coming up this weekend.

Marivel Klueckman - HCPF: Thank you everyone.

Shawn Bodiker - HCPF: Thank you. Bye-bye.

Lisa Pera - HCPF: Thanks everyone.

Meeting ended after 01:21:51 👋

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