

Texas CHIP Coalition Minutes
Friday, November 16, 2007 11:00 a.m. – 1:00 p.m.
May Owen Conference Room, 10th Floor
Texas Medical Association

Attendees: Anne Dunkelberg, CPPP; Bryan Sperry, Children's Hospital Association of Texas; Susan Craven, Texans Care for Children; Jeff Miller, Advocacy, Inc.; Jason Cooke, Health Management Associates; Ed Berger, Seton Healthcare System; Laura Guerra-Cardus, Children's Defense Fund; Kevin Demark, Maximus; Katie Coburn, TACHC; Peggy Gullledge, Maximus; Stacey Warren, Texas Medical Association; Miryam Bujanda, Methodist Healthcare Ministries; Leigh Schlett, Insure-a-Kid; Robin Butler, Children's Hospital Association of Texas

Via conference call: Jodie Smith, Texans Care for Children; Amanda Jones, Harris County Hospital District

HHSC Guests: Joanne Molina, Associate Commissioner for Family Services; Kim Lozano, External Relations; Gina Perez, Medicaid Policy Lead; Ramona Mckissic, CHIP Policy Lead

Bryan Sperry called the meeting to order at 11:05 a.m

Introductions and Announcements

Ms. Dunkelberg introduced Dr. Laura Guerra-Cardus, the new Texas Policy Director for Children's Defense Fund.

Susan Craven announced her upcoming retirement as Executive Director with Texans Care for Children. She will continue with the organization until Spring 2008 so that there is an overlap training period with her replacement. She noted that she does plan to stay involved in children's issues. Mr. Sperry commended Ms. Craven on the great job she has done in growing the organization over the past seven years and establishing it as a strong advocate for a range of children's issues.

Ms. Craven also announced that Texans Care for Children will be holding their 2nd Annual Legacy Luncheon on February 12th at the Four Seasons Hotel in Austin. Honorees will include Charles Butt and Eleanor Butt-Crook and Rep. Patrick Rose will receive their Child Advocate Award.

SCHIP Reauthorization

Ms. Dunkelberg reported that it is unlikely that there will be an agreement before Thanksgiving. They do have a funding resolution that will carry the program through December 14th. Reports from the last several days show both sides to be at an impasse with the push-backs focused on the states that are currently covering parents and a citizenship documentation requirement that is already a Medicaid requirement that they are trying to also apply to CHIP. There may be an extension bill and if so, it needs to include enough money for the short-fall states and a moratorium on the bad rules, such as the citizenship documentation rule. Overall, the negotiation process seems to be very fragmented.

Mr. Sperry added that a problem for Texas is accurate reporting of the number of eligible but not enrolled children in the state. Methodology is a huge issue because there is no consistency in the numbers being reported due to various duplicated counts and point-in-time estimates. He recommended as part of upcoming agenda development for the coalition, formulating a well-documented set of recommendations for getting Texas child health enrollment numbers up to 90%. These recommendations can be used in discussions with leadership at both the state and federal level. The positive that can be taken from the debate over SCHIP is that both Republicans and Democrats are now setting markers for enrolling kids.

Ms. Dunkelberg stated that she has messaging materials from a national consulting group that has been working on SCHIP reauthorization and she will e-mail that out to the coalition via the listserv.

Discussion with HHSC

Ms. Dunkelberg introduced Joanne Molina, Associate Commissioner for Family Services, Kim Lozano, External Relations, Gina Perez, Medicaid Policy Lead and Ramona Mckissic, CHIP Policy Lead.

The discussion was opened-up for questions from around the room. HHSC responses/points of interest on their policies in regards to eligibility/application processing included:

- Third party verifications should always be used before an application is pended.
- If an application is delayed due to untimely processing, representatives are not to re-request information that was submitted with the original application. They are to use this information even if it is now over the 30 day time period, ie, a family submits a paycheck stub that is 15 days old when they send in their application, but because HHSC is 60 days late in processing their application, the paycheck stub is now 75 days old. Representatives are required to process this application using this pay check stub; they are not to request a new paycheck stub that is less than 30 days old.
- Staffing is currently their main issue. The challenge has been in retaining staff, primarily in Houston, Austin and Dallas. They are working to centralize the processing in areas where they have been able to keep trained staff. When TIERS goes on-line statewide, they will be able to transfer information electronically.
- HHSC has assembled an application workgroup with the charge of reviewing the current application to see if there are areas that can be streamlined and more client-friendly. All of the applications will be posted on the HHSC website over the next couple of weeks and they welcome opportunities for input. Options developed by the workgroup will be presented to the Executive Committee next month.

Ms. Dunkelberg stated that it would be helpful if we could be aware of what information the data broker collects and if a representative could be scheduled to speak at a future coalition meeting to help provide a better understanding of the data available to HHSC.

Ms. Dunkelberg also noted that it would be extremely helpful if the coalition could obtain a list of the top ten missing information items that applications are pended for. That would assist the CBOs in targeting those things to hopefully help improve the application processing time.

Ms. Molina agreed to work with the group regarding both of the items.

Ms. Dunkelberg thanked all of the guests for their continued commitment in working on the issues facing the eligibility system and in their willingness to communicate with the coalition on these issues.

Issues for Future Meetings

Mr. Sperry questioned whether it was time for the coalition to redevelop its capacity to work on maternal health issues as well as children's health. He noted that the antecedent for the Texas CHIP Coalition had been the Texas Maternal Health and Child Health Coalition which had been formed in 1993 and worked with HHSC on a range of services to cover children and their mothers. Currently, a woman loses her coverage 60 days after birth even though studies have shown that the ongoing health of a mother is vitally important to the care of her child.

After a round-table discussion with all in attendance in agreement that this would be a positive move for the coalition, it was decided to move forward in scheduling a facilitated meeting of the TCC/ITK stakeholders that would include discussion on the group's strengths and weaknesses and , upcoming opportunities for expansion of its policy agenda to include maternal health issues.

Due to holidays and scheduling conflicts, the December meeting is scheduled for the 14th and the January meeting is scheduled for the 25th.

With no other agenda items the CHIP Coalition meeting adjourned at 12:48 p.m.