

Texas CHIP Coalition & Eligibility Work Group Minutes
Friday, September 26th, 2008 11:00 a.m. – 12:30 p.m.
May Owen Conference Room, 10th Floor
Texas Medical Association

Attendees: Kit Abney Spelce, *Insure-a-Kid*; Jennifer Allmon, *Texas Catholic Conference*; Shane Brewington, *Texas Health & Human Services*; John Berta, *Texas Hospital Association*; Kevin Denmark, *Maximus*; Anne Dunkelberg, *CPPP*; Durquia Guillen, *Any Baby Can*; Eileen Garcia-Matthews, *Texans Care For Children*; Cliff Gray, *SELF*; Shelton Green, *Christian Life Commission*; Kathy Griffis-Bailey, *DSHS*; Jan Hudson, *Seton Health Plan*; Maria Huemmer, *Texas Catholic Conference*; Helen Kent-Davis, *Texas Medical Association*; James Mason, *Texas Impact*; Scott McAninch, *San Antonio Non-Profit Council*; Jeff Miller, *Advocary Inc*; Candise Spikes, *Catholic Health Association of Texas*; E. Rex Ann Shotwell, *Insure-a-Kid*; Melissa Shannon, *CPPP*; Morgan Walthall, *March of Dimes*.

Via conference call: Denise Rose, *Texas Children's Hospital* Katie Parker, *TACHC*.

Anne Dunkelberg called the meeting to order at 11:06AM

Presentation

Tracy Henderson Chief Financial Officer HHSC Financial Management

Ms Dunkelberg introduced Tracy Henderson of the Financial Management department at HHSC to provide information on upcoming Legislative Appropriations Request (LAR), specifically highlighting Medicaid and CHIP and exceptional items relating to the programs.

Ms Henderson noted that HHSC will be requesting \$42.5 billion for Fiscal Biennial 2010-11, \$37.7 billion in baseline funding of which 95% will be directed towards Medicaid and CHIP. There is an additional \$2.95 billion All Funds/\$1.3 billion GR as an exceptional item to maintain Medicaid services, \$293 million All Funds for Frew lawsuit programs (to improve access to Medicaid services for children), \$125 million All Funds to increase staffing levels for eligibility offices and \$474 million All Funds across all the HHS agencies to increase enrollment in community-based programs (including Medicaid waivers). She reminded the members that the shortfall in the Medicaid budget was chiefly because (1) the 2007 Legislature followed the recommendation of the Legislative Budget Board (LBB) to not account for inflation in the second year of the budget (\$800 million GR), (2) because of reduced federal matching funds (\$136 million GR), and (3) because of the Governor's line-item veto of state "claw-back" payments to the federal treasury for Medicare Part D costs (\$300 million GR).

She drew coalition members' attention to the Exceptional Item requested for the CHIP perinate program, which (unusually) entails a GR reduction from the previous biennium; this is due to the accounting decision to shift the perinate program from CHIP to Medicaid to ensure the program would receive full funding in the base budget. The change was justified because most of the mothers and newborns in the CHIP perinate program are actually eligible for Medicaid (emergency Medicaid for delivery in the case of the mothers, full Medicaid in the case of the infants). Ms Henderson did note that method of finance questions at the federal level might also require Texas to restructure the financing of the CHIP perinate program, but HHSC has built into

their budget through the exceptional item to ensure the program operates as normal until the questions are resolved.

Ms Henderson stated that Medicaid caseload is currently at 3 million and growing, however not as rapidly as initially anticipated. The CHIP caseloads are also on the rise following HB 109, although not quite up to the 2003 figures.

Eligibility and enrollment is another critical budget issue stressed in the LAR, HHSC seeks to keep operations going, maintain current workload and keep pace with growth in programs. Additionally, the agency wants to ensure that the technological infrastructure is expanded upon and rolled out; this involves maintaining the SAVERR system while rolling out the TIERS. Ms Henderson also highlighted the need to fund the other infrastructure supports, which includes regional office space, telephones and IT equipment.

Ms Henderson stated that HHSC has addressed the Frew lawsuit initiatives in another major component of the LAR. Rate components are built into both the base budget and listed as an exceptional item. Corrective action plans and strategic initiatives were going to be included in the baseline, but the agency was advised by LBB to include the funding as an exceptional item.

Some members of the coalition expressed concern regarding the fiscal impact of Hurricane Ike and how this might affect the LAR. Ms Henderson commented that she had yet to see any firm numbers out, but understood that \$200 million (partly federal disaster funds) were expected to go to aid to families and \$20 million had gone toward purchasing ice and water in the immediate aftermath of the storm. She was certain that funds would also be devoted to repairing and replacing agency offices and equipment (including new telecomm equipment that was ruined) and travel.

Ms Kent Davis requested more information regarding the consolidated budget. Ms Henderson suggested that interested individuals should look at the Sub Strategy Volume III for more information and to check the Legislative Budget Board's website to see appropriation requests and upcoming hearings. Links to both websites are below:

<http://www.hhsc.state.tx.us/LAR/2010-2011/index.html>

http://www.lbb.state.tx.us/Hearings_Meetings/Hearings_Meetings.htm

Principles

Ms Dunkelberg drew the group's attention to the draft of the principles for the upcoming 81st legislative session. She commented that it may have been longer than they had initially expected, but encouraged group members to weigh in on the drafting and editing process. She noted that many of the categories from the last session remained intact, but sought to make this version more concise. Ms Dunkelberg suggested to members to provide more input as soon as

possible in order to create a robust stakeholder discussion and bring more interested parties to the table.

It was agreed that the principles list should be brief and concise, but backed up with issue-specific fact sheets. Ms Kent Davis suggested that more work should be done on breaking some of the issues out on the cost component and focusing the message on how much can be saved through prevention. Other members noted that it might be useful to mention access issues related to special needs and foster children aging out of care, more on the perinatal program to target high risk pregnancies. Ms Walthall committed to looking at the language used for the March of Dimes and adding their maternity suggestion to the principles.

The group agreed to look over the draft of principles and respond with suggestions by mid-October to get stakeholders to sign-on while there is reasonable momentum.

Other Business

Ms Rose explained to the members that there is a substantial backlog in food stamp applications in Houston as a result from Hurricane Ike. She suspected that this might have a negative impact on timely processing of children's Medicaid applications in the Gulf Coast area.

Ms Dunkelberg shared some positive news – she had met with Deputy HHSC Commissioner Anne Heiligenstein to discuss eligibility issues, contracted CBOs and the possibility of CHIP coalition members and other interested stakeholders working with HHSC and the CBOs in an ongoing partnership to improve outreach and application assistance, and to improve some of the procedural problems. Ms Heiligenstein seemed pleased with the suggestion and Ms Dunkelberg will keep the coalition posted on any news related to this.

Ms Dunkelberg also wanted to share some models of best practice she learned about at a recent conference on Eligibility System Modernization in Washington DC. Florida has implemented a very user-friendly website to assist families with internet access in the eligibility process. Applicants can log into the site with their case number, and check the status of their renewal, view scanned documents and get other helpful information. This is very useful in alleviating pressure on the phone system. Similarly, Louisiana has reduced procedural denials down to 2% by fostering a culture of keeping kids enrolled and made this a top priority – this is a lesson the coalition can use to support eligibility staff the state budget process.

With no other agenda items the CHIP Coalition meeting adjourned at 12:45 p.m.

Eligibility Workgroup

Attendees: Kit Abney Spelce, *Insure-a-Kid*; Kevin Denmark, *Maximus*; Anne Dunkelberg, *CPPP*; Jan Hudson, *Seton Health Plan*; E. Rex Ann Shotwell, *Insure-a-Kid*; Melissa Shannon, *CPPP*.

Ms Dunkelberg called the meeting to order at 12:47 p.m.

Ms Dunkelberg began the brief meeting by requesting expertise and assistance of the other members to create a “Tool Kit” to reduce procedural denials. Ms Shotwell and Ms Abney Spelce said they could look at some of the sheets they have created to simplify the application process and start a draft.

Ms Hudson was curious to know if the tool kit would affect policy at HHSC or practice outreach level. The members decided that the aim of the tool kit would seek to simplify the application process, and the final draft would be shared with HHSC to ensure that correct policy was being described, which should reduce work for the HHSC eligibility staff, and improve enrollment rates.

Items for Follow-Up

Ms Shotwell and Ms Abney Spelce committed to drafting three separate ‘How-To’ Sheets for the next meeting. which will include: ‘*Submitting a Complete application on the First Try*’; ‘*Special Tips on Documenting Income*’ (to aid individuals getting paid in cash or have irregular documentation); and another on ‘*If You’ve Recently Changed Jobs*’.

With no other agenda items the CHIP Coalition meeting adjourned at 1:00 p.m.