

## E & A CASE CLOSING OR TRANSFER

CASE NAME: \_\_\_\_\_ CIN: \_\_\_\_\_

CASE ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CASE NUMBER: \_\_\_\_\_ CATEGORY: \_\_\_\_\_

DATE OF TA CLOSING: \_\_\_\_\_ PA/FS CERT PERIOD: \_\_\_\_\_

REASON FOR CASE CLOSING: \_\_\_\_\_

1. NPA FS
- SEPARATE DETERMINATION
  - FOOD STAMP CASE OPENED, MA DETERMINATION PENDING
  - OTHER

2. MEDCAID
- WAS TA CASE CLOSED DUE TO EXCESS EARNINGS? YES \_\_\_ NO \_\_\_
  - IF NO, WAS IT CLIENT'S REQUEST? YES \_\_\_ NO \_\_\_
  - HOW MANY MONTHS OUT OF THE LAST 6 HAVE THEY RECEIVED TANF?  
\_\_\_\_\_

E30 EXCESS INCOME (SEP DETERMINATION IF APPROPRIATE  
E31 EXCESS INCOME-INCREASED EARNINGS-TMA ELIGIBLE

3. DAYCARE
- HAS THE CASE BEEN OPENED 3 OF THE LAST 6 MONTHS? YES \_\_\_ NO \_\_\_
  - IF YES, HAS IT BEEN CLOSED DUE TO EXCESS EARNED INCOME? YES \_\_\_ NO \_\_\_
  - IF YES TO BOTH QUESTIONS, PLEASE GIVE/ MAIL TRANSITIONAL DAYCARE PACKET. DATE PACKET GIVEN \_\_\_\_\_ MAILED \_\_\_\_\_
  - IF CASE HAS NOT BEEN OPENED 3 OF THE LAST 6 MONTHS, IS IT CLOSING DUE TO EXCESS INCOME? YES \_\_\_ NO \_\_\_

REASON FOR CASE CLOSING IS NOTED ABOVE  
DATE PACKET GIVEN \_\_\_\_\_ MAILED \_\_\_\_\_

- CURRENTLY RECEIVING DAYCARE ASSISTANCE, IF SO:  
DAYCARE PROVIDERS \_\_\_\_\_  
\_\_\_\_\_
- CURRENTLY NOT RECEIVING DAYCARE ASSISTANCE

## Disenroll From Family Health Plus

To: Lynn or Sue Da.

From: \_\_\_\_\_

Please disenroll:

Case # \_\_\_\_\_

Line # \_\_\_ Client: \_\_\_\_\_ CIN # \_\_\_\_\_ Effective \_\_\_\_\_

Line # \_\_\_ Client: \_\_\_\_\_ CIN # \_\_\_\_\_ Effective \_\_\_\_\_

Line # \_\_\_ Client: \_\_\_\_\_ CIN # \_\_\_\_\_ Effective \_\_\_\_\_

Line # \_\_\_ Client: \_\_\_\_\_ CIN # \_\_\_\_\_ Effective \_\_\_\_\_

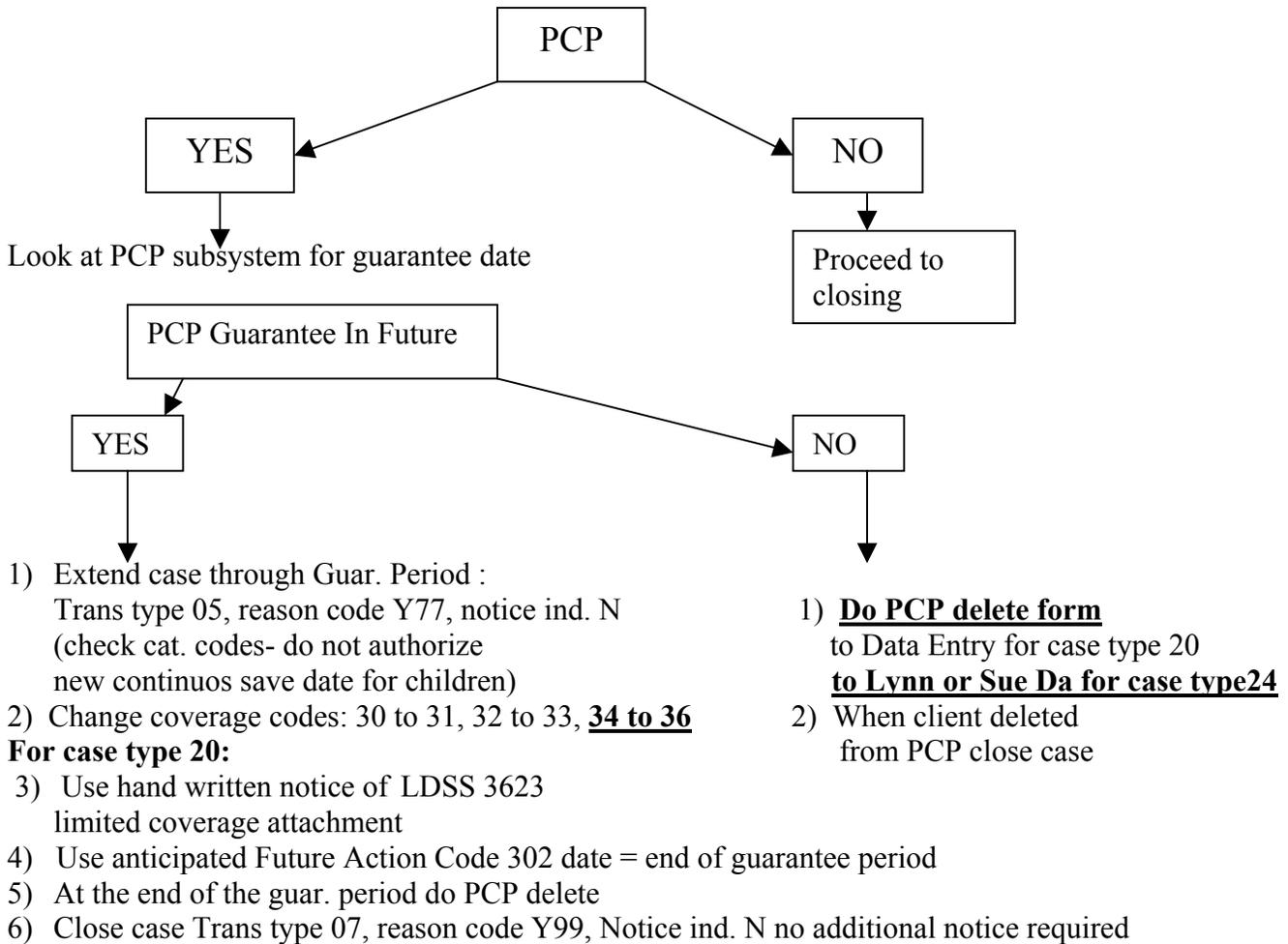
**Please attach copy 2 of the 3209 or screen prints of screens 1 and 2**

- **Remember disenrollment must be done prior to case closing or change to case type 20**

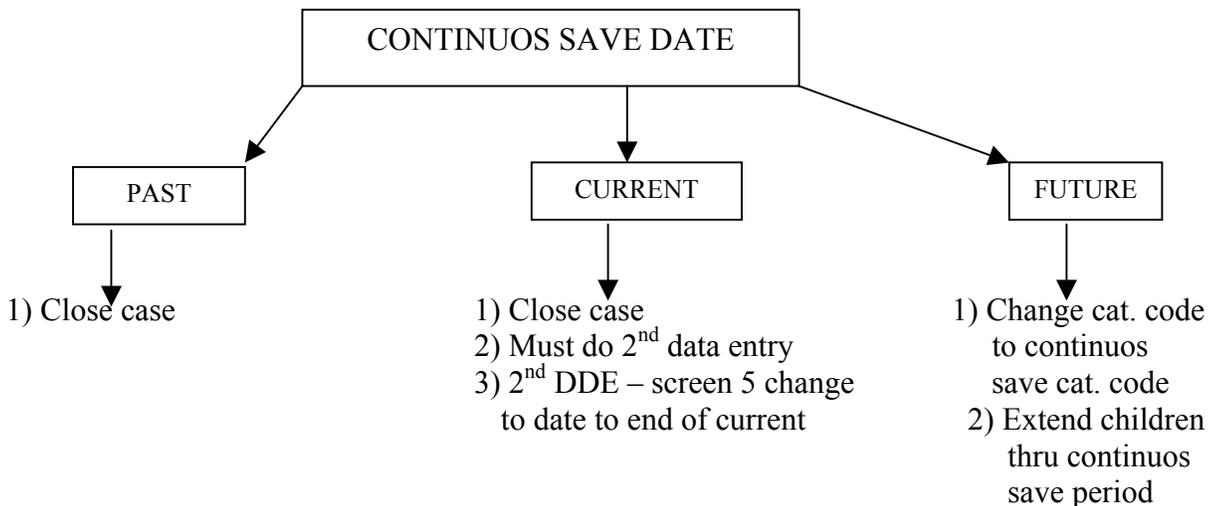
Completed \_\_\_\_\_ Effective \_\_\_\_\_ By \_\_\_\_\_  
(Date) (Date) (Signature)

## MEDICAID CLOSINGS

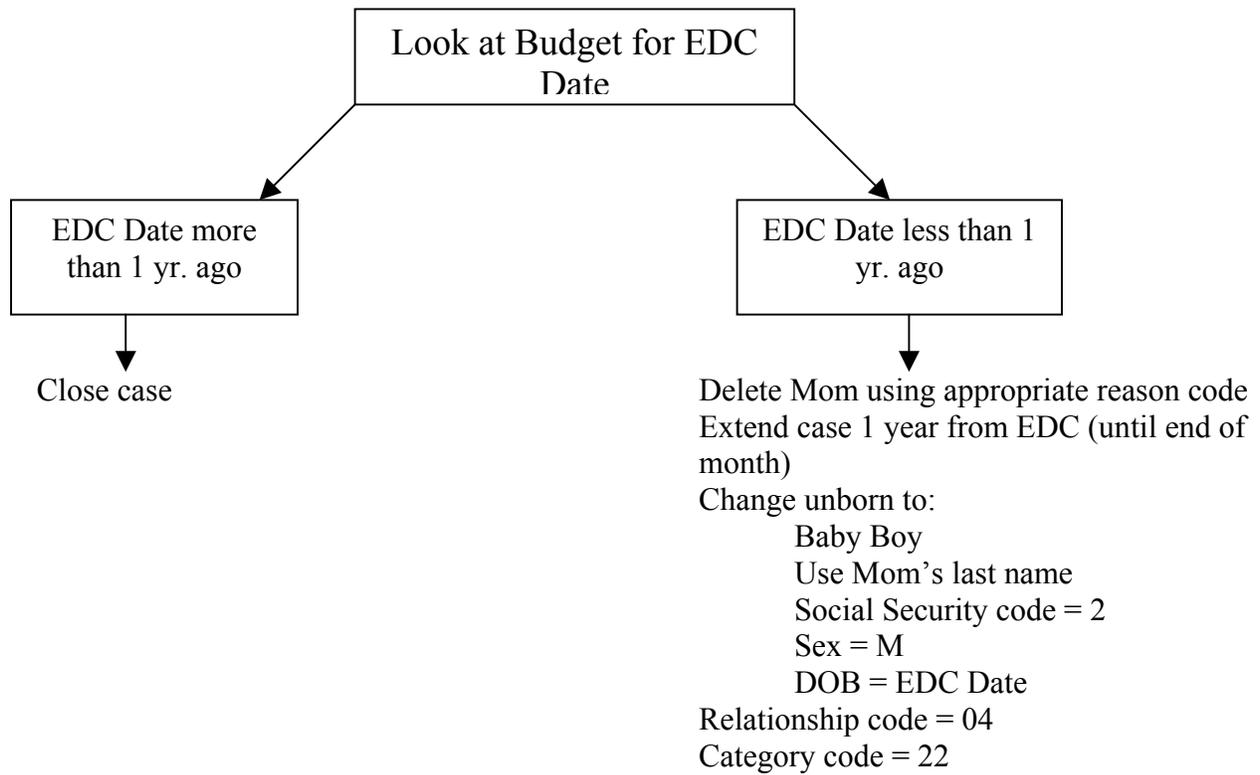
**1<sup>ST</sup> check for PCP for each client (screen 5 of 3209 coverage code 30, 32 or 34)**



**2<sup>nd</sup> check for continuous save for children under 19**



### *3<sup>rd</sup> check for unborn*



### *4<sup>th</sup> check for TPFI*

After clock down have any other Health Insurance deleted from the Third Party System

Attachment for Limited coverage:

**New MA Worker Training**      **Name** \_\_\_\_\_ **Date** \_\_\_\_\_

Assign Work Schedule \_\_\_\_\_

Sign On  
 MA Programs  
 MA process  
 Confidentially  
 Computer Inquiry  
 Applications  
 Simplified Asset Review  
 Folder Colors  
 Categories  
 Eligibility Level  
     Federal Poverty Levels  
     MA Levels (Medically Needy)  
     TA Levels  
     LIF  
     Family Health Plus  
 Documentation  
     93ADM29  
     GIS 01MA/24  
 Witness community interviews  
 Budget Types  
 Budgeting:  
     ADC  
     Low Income Families  
     Expanded Eligibility  
     Single/Childless Couples  
     Extended HR's  
     Family Health Plus  
     Excess Income  
         contract, pay in, receipts  
         Deeming- Allocating  
     QMB, SLIMB, QI 1  
     RFI  
 Subsystems:  
     Principal Provider  
     Restrictions/Exception  
     Prepaid Capitation  
     Third Party  
     PayIn/Excess Income  
 Aliens - Citizenship  
 Referrals  
     SIU  
     Resources  
     Services  
     Child Support - Good Cause  
     Deceased

Extensions:  
 TMA  
 Child Support  
 \$30 and 1/3  
 Separate Determinations  
 Resources  
 Auto  
 Life Insurance  
 Burial Trust/Fund  
 MA Level  
 TA Level  
 Health Insurance  
 Medicare  
 MA pays TPHI  
 COBRA  
 AIDS/ADAP  
 Mehler  
 Case Count/Legal Responsibility  
 Legally Responsible Relative Refusal  
 Reimbursement  
 Child Health Plus  
 Drug and Alcohol  
 District of Fiscal Responsibility  
 Bruderhof  
 PCP Guarantee  
 Continuous Save  
 C/THP  
 Stenson  
 Interpreter Services  
 MA Cards  
 Finger Imaging  
 Family Planning  
 Breast & Cervical Cancer  
 MA for the Working Disabled  
How To  
 CNS Notices  
 Completing 3209  
 Completing App Tad  
 PCP Delete  
 Payment line  
 Close an MA case  
 Peri-natal  
 Growing Up Healthy  
 AD Interview  
 Extend Recerts

Healthy NY  
 Care At Home



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## Tioga County

- Population:  
52,000 residents
- MA caseload: 3,471 (as of 5/12/04)

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## Need for Change in Tioga County

- Staffing/Training
  - To ensure timeliness of application processing
- Job Satisfaction
- Maximizing use of technology
- Customer Service

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## **Case Supervisory Review (CSR)**

- Transaction randomly selected for supervisory review
- Random review process achieves a more thorough review of transactions selected
- Frees up supervisory time for other management tasks

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## **CSR (Benefits)**

- Examiners have increased control over daily management activities
- Clients will be served timely and accurately
- Error trend analysis will be conducted and monitored

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## **CSR (Benefits)**

- Training or corrective action needs identified through the review process based on error trends
- Supervisors and line staff receive feedback on job performance

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### **Next Steps**

- Continue staff training focus
- Use of new technology:
  - \*CentraPort Pilot
  - \*Imaging
  - \*Internal file systems
- Customer evaluation

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### **Facilitated Enrollers**

- Relationship

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### **Tioga's Successes**

- Staff are involved in decision making
- Cross-training of staff
- Use of technology/efficiency realized
- Customer Service Improvement
  - same day service instead of 5 to 7 days

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## Tioga's Successes

- **Cost Savings Recognized:**

- Postage                    \$3,455 (annual)

- \*Staff Time                \$143 /day  
                                     \$2860 /month

- \*2004 Diversion Rate Avg. 34%

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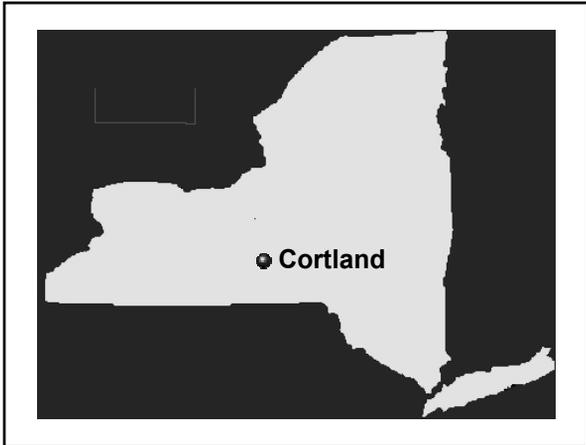
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## Cortland County

- **Population:**  
49,000 residents

- **MA caseload:**

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## Utilizing SOS

- 1999 SOS became available
- 2003 SOS online in Cortland Co.
- Library available to Cortland staff since 1999

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## SOS/ COGNOS

- Several counties chosen to pilot SOS system, including Cortland

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## For More Information:

- Marti Hoffman

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## Cortland's Successes

- Agency staff can access all forms and policies without the need for paper copies (library)
- Electronic calendars have increased scheduling efficiency
- All staff have PC on their desks and are connected to CentraPort

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## Cortland's Successes

### Overdue Applications:

- 2002 was 15 %
- 2003 decreased to 7%

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## Clinton County

- Population:  
80,000 residents
- MA caseload:

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## Separate Determination Process

- 1) TA case closing/ transfer worksheet is developed
- 2) Form is completed when TA case is closed or denied
- 3) Completed form is attached to front of file to identify as needing separate determination or transfer

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## Separate Determination Process

- Procedure ensures:
  - Case was forwarded to MA unit
  - Notifies worker this is separate determination
  - Simplifies review for appropriate coverage

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## Separate Determination Process

- FORM

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## Clinton's Successes

- Form has been in use for 6 years
- Only modification - adding closing codes E30 / E31
- Form allows us to ensure all cases are reviewed for separate determinations / transfer

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## Savings

- Worker time
- Customer service
- Customer satisfaction

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**Rockland County**

- Population:  
300,000 residents
- MA caseload:

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**Rockland's New Process**

- Applicants informed of process
- Application picked up or mailed
- Appointments 3 days/week  
beginning 8am
- Doors open at 7:45am

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## Rockland's New Process

- 8 am personnel from each program area starts application process
- MA Sr. SWEX groups consumers by program

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## Roles in Rockland

### Chronic Care Principal

- Screen application
- Assign MA Worker

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## Roles in Rockland

### Sr.SWEX

- Review applications for completeness
- Answers questions

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## Roles in Rockland

### Receptionist

- Check apps for completeness
- Checks names off appointment list
- Assigns # to application and gives applicant a corresponding number/color card
- Enters name on intake list for day

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## Roles in Rockland

### 2<sup>nd</sup> Sr. MA SWEX

- Gathers applications & has DEO register
- Reviews clearance to see history

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## Rockland's Process

- Applications are taken based on # of SWEX present
- If next day is full, we go to next available appt day

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## Rockland's Successes

- Wait time have decreased dramatically
- Customer satisfaction dramatically increased
- Workers more self-directing and better time management

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## Ulster County

- Population:  
178,000 residents
- MA caseload:

## **Ulster's Need for Change**

- **New workers need comprehensive training program for all facets of MA work**
- **Consistency of this training was important**

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## **Ulster's Training Program**

- **One supervisor is responsible for all training to assure consistency**
- **The training program lasts one full year**
  - **In 4-6 weeks covers listed topics**

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## **Ulster's Training Program**

- **Training is program specific**
- **New workers complete MA application as part of training program**

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## Ulster's Successes

- Prepares new examiner for caseload
- Staff retention and satisfaction
- Reduced error rate

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## New York City - HRA

- Population:  
19,000,000 residents
- MA caseload: over 2 million

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## Impact and Scope

- In 2001, more than 25% of New York City residents under the age of 65 (approximately 750,000) were eligible for public health insurance, but were not enrolled.\*

\* <http://www.uhfnyc.org/homepage3162/index.htm>

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## Impetus for Redesign in NYC HRA

- Barriers to enrollment in public health insurance:
  - Misconceptions of eligibility
  - Time-consuming, inconvenient and burdensome enrollment process

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## Impetus for Redesign in NYC HRA

- Barriers to enrollment in public health insurance:
  - Medicaid only consumers changing – higher percentage of working adults who have difficulty visiting offices for long periods of time

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## **Impetus for Redesign in NYC**

- Economic conditions forcing increased productivity in constrained budget environment:
  - Inadequate infrastructure:
    - Office layouts forced crowds; inefficient consumer flow
    - Outdated technology
    - Unattractive offices

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## **Impetus for Redesign in NYC**

- Staff-related challenges:
  - Poor staff morale
  - Managers in traditionally hierarchical environment

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## **Solution: Model Offices**

- Fundamental transformation of work processes in all HRA Community Medicaid Offices to:
  - Create a consumer-focused environment by streamlining the application process by using data already on file, reducing consumer wait time and expediting eligibility decisions

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## **Solution: Model Offices**

- Improve office environment and workflow
- Design efficient model of operations adaptable to the changing demands of public health insurance

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## **Challenges**

- New roles:
  - Management forced to “let go”; staff driven process
  - Staff required to take ownership and be proactive; engaged in decision making, not following direction

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## **Challenges**

- Encouraging staff to embrace change
- Space and facility constraints
- Bringing new technology to workplace
- Transitioning from manual to automated process

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## **Implementation Timeframe**

Beginning July 2002 (5 Waves)

- **15 community offices have been re-engineered to date**
- **4 offices to be re-engineered by June 2004**

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## **Consumer Service Achievements**

- **Eliminated pre-screening reducing required number of office visits**
- **Reduced length of office visit and service encounters**
- **Utilized technology to structure interviews and access imaged documents and collateral data**

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## **Consumer Service Achievements**

- **Added Customer Service Rep to triage consumers upon entering office**
- **Decreased eligibility determination period**

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**Increased Use of Technology**

- **ALERTS**
  - “Automated Listing of Eligibility Requirements Tracking System”
  - Provides collateral information from various sources (e.g., Dept. of Vital Records, New Hires, Credit Report)

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**Increased Use of Technology**

- **SAVE**
  - “Systematic Alien Verification for Entitlements”
  - Confirms immigration status of non-citizens applying for benefits

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**Increased Use of Technology**

- **EEDSS**
  - “Electronic Eligibility Decision Support System”
  - Guides worker through comprehensive interview and eligibility determination process; electronically exchanges data with other WMS subsystems

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### **Increased Use of Technology**

- **HRA Browser**
  - Allows worker to view documents already submitted to HRA

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### **Office-Based Achievements**

- **Simplified duties at Reception**
- **Established rotation in staff assignments**
  - Cross-functional training
  - Elimination of specialties
  - Focus on team work and flexibility

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### **Office-Based Achievements**

- **Improved work environments**
  - Upgraded technology
  - Enhanced physical plants
  - Expanded communication within and across sites
- **Implemented Central filing system**

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## Management Achievements

- Changed culture
  - Staff-driven and management-supported change process
  - Team approach within and among offices and management level
- Focused on training and development for managers

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## Management Achievements

- Developed New Regional Manager core
- Enhanced resource and systems support for office sites and regions

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## MAP Model Office Average Consumer Cycle Times

	<u>Pre-Impl</u>	<u>Post-Model</u>	<u>Change</u>
Applications/ Interviews	121	42	↓ 65% <sub>b</sub>
Services	41	8	↓ 80% <sub>b</sub>
Card Replacement	41	9	↓ 78% <sub>b</sub>

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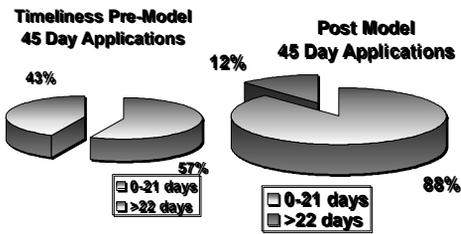
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## Results: Decreased Eligibility Determination Period



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## Benefits

- Facilitated enrollments
- Enhanced operational efficiencies and productivity
- Increase in consumer satisfaction
- Increase in staff satisfaction
- Do “more with less”

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## Next Steps: Phase II

- Sustain the existing model
  - Experiential wave – continue to address outstanding issues
  - Application wave – redesign remaining offices

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