

Testimony
Health and Human Services Committee
Tuesday March 23, 2010
Unmet Health Care Needs Study

Chairman Weisz and members of the Health and Human Services Committee – my name is Shari Doe, I'm the Director of Burleigh County Social Services. Today I am representing the North Dakota Association of County Social Service Directors. I will discuss the effect of the change in income reporting for Medicaid resulting from the 12-month continuous eligibility for children.

County Social Services staff and Directors throughout the state believe Continuous Eligibility for children has been a very positive change. Many more children are able to maintain Medicaid benefits because their eligibility is not subject to their parents' fluctuating income, failure to report, or change of residence. Continuous eligibility has also been a tremendous benefit for children in foster care. When a child leaves foster care, their Medicaid eligibility often continues for several months which can enhance reunification efforts.

It would seem that Continuous Eligibility would save county Eligibility Worker time because a child's Medicaid case only has to be "worked" once a year. If we average one hour per case each time it is worked, theoretically it should save us 11 hours per case. But because there are many variables in Medicaid, and often other programs involved in a child's Medicaid case, this time savings has not been realized. I've attached a summary of a survey completed by county social services office regarding time saved from Continuous Eligibility. As you can see, the most time saved is in Type 1 cases – cases in which Medicaid is the only program in the case.

The majority of cases have potential eligibility for a parent which requires monthly income verification so the child's case needs to be worked every month anyway. Many cases involve other programs (SNAP, Child Care Assistance, etc.) which require

monthly income verification and action. If parents fail to provide the information, we still need to take action to stop the coverage. This has actually increased work because we are now required to take two actions: one to end the coverage for the parents and the other to keep coverage going for the children.

The number of Medicaid child-only cases is small – it has been estimated these cases count for about 5% or less of the Medicaid cases. But in a child-only Medicaid case there is a significant time savings by only having to “touch” the case once a year. In Burleigh County, it is estimated that we have 30 – 40 fewer cases to work each month. Estimating a time savings of about 14.5 hours per month, Continuous Eligibility has allowed Medicaid-only Eligibility Workers to handle the increase in cases we have experienced in the past year (40 – 80 cases per worker).

In conclusion, the effect of Continuous Eligibility is better coverage for children, fewer gaps in services, and increased provider satisfaction by knowing coverage will be there regardless of what a child’s parent is or is not doing. From the county’s perspective, although we have not realized much in time saving, we have improved medical care services for children.

Chairman Weisz, I thank you for the opportunity and I am happy to answer any questions you may have.

Medicaid Continuous Eligibility

<u>County Name</u>	<u>Case Type 1 *</u>	<u>Case Type 2 **</u>	<u>Comments:</u>
Barnes	very little	very little	
Bowman/Slope	15 min./case	15 min./case	Since programs aren't consistent in how they treat income, changes need to be done.
Burleigh	20-30 min./case	10-15min./case	Difficult to assess, given the multitude of changes in a workers caseload each month
Cass	Can't answer	Can't answer	Too many variables and unable to isolate just CE for possible time
Cavalier/Pembina	15 min./case	10-15 min./case	Totally depends upon the make-up of the case and the complexity.
Eddy	20 min./case	10-15 min./case	
Emmons	15 min./case	15 min./case	
Foster	20 min./case	10 min./case	
Grand Forks	Can't answer	Can't answer	Too many variables and unable to isolate just CE for possible time
Griggs	15 min./case	5 min./case	Have very few Type 1 cases
Kidder	5-10 min./case	0	CE doesn't save much time, but is a great benefit for families
Logan	very little	0	Most cases are Type 2 and they take just as much, if not more time, than before
McHenry/Pierce	15 min./case	0	
Morton	Can't answer	Can't answer	Can't see any measurable time savings, but support program because it is the best for kids
Mountrail	7-10 min./case	0	Works great for Type 1 case, no difference at all if it is a Type 2 case
Nelson	15 min./case	0	
Ransom	15 min./case	15 min./case	
Richland	5-15 min./case	5-15 min./case	Elig. Workers feel that CE has saved them some time, but difficult to quantify
Rollette	minimal	minimal	Almost all cases include an adult, so still need to work the MA case
Sargent	30 min./case	30 min./case	Not sure if time savings is due to CE or Simplified Reporting in SNAP
Stark	10 min./case	0	Difficult to assess time savings because of complexities of cases and household compositions
Trails	30 min./case	20 min./case	Any time you add new rules to programs you increase the time it takes to work the cases
Walsh	Can't answer	0	As we have saved a bit of time in the type 1 cases, type 2 cases have gotten more difficult
Ward	30 min./case	15 min./case	Very few cases of type 1, most are in type 2
Wells	20 min./case	no response	
Williams	15 min./case	15 min./case	These savings are on a minimal (about 5%) of a workers caseload

* Case Type 1 = The only program in the case is Medicaid

** Case Type 2 = Several programs are being provided to the family (i.e. Food Stamps, Child Care Assistance, and Medicaid)

Prepared by: Larry Bernhardt 10-15-09