

SPD Operations Committee Meeting
Thursday, July 14, 2011
1:00 – 3:00 pm

Attendees:

Brenda Reed (Teleconferenced)	Marci Howard
Carol Mauser	Nancy Sargent-Johnson
Karen Gulliver	Phil Deas
Jeanette Wilson	Terry Ford
Jenny Sneddon (Teleconferenced)	Trina Lee
Joe Easton	Vicki Davis

Guests/Presenters:

Lauren Mitchell
 Cheryl Wells
 Lisa Bouchell
 Caryn Whatley
 Jennifer DeJong
 Samantha Brookshire

Scribe:

Janet Morse

Absent:

Dale Marande	Angela Munkers	Tracy Villarreal
Melinda Compton	Gene Sundet	

Announcements:

None at this time.

TOPIC:	Action/Task Decision Log:	Responsible Person(s):	Due Date:
HB 3536 New Procedures (Lauren Mitchell)	Distribute an AR re: HB 3536 to the field.	Lauren	Next OPS mtg

Lauren reviewed a draft PT re: House Bill 3536, which was signed into law on June 1, 2011. This bill mandates DHS/OHA suspend the benefits of any inmate who becomes incarcerated at a local jail, instead of closing the case. The bill further states if the inmate is released within 12 months, the case will be restored if the inmate is still eligible for Medicaid. DHS has been suspending the Medicaid case for any SSI recipient who becomes incarcerated, or any PMDDT client with a MH diagnosis, for the past few years. This bill will extend the suspension to all Medicaid clients. DOC and local jails submit incarceration data to DHS/OHA twice a month. Based on this data, OPAR will begin ‘susmending’ all SPD Medicaid cases with an incarcerated client except the following cases: cases with an APD, ICP, NFC, DAN or DDS case descriptor and cases where there is more than one person on the case. Lauren will be notified of cases with the aforementioned and the case manager or

financial worker for that client will be contacted to take action on the case. SNAP cases will be given timely notice and closed when appropriate. If a client has a projected release date prior to the end of the current month, no action will be taken on the case.

When OPAR has initiated a 'susmend' action on a case, an auto generated closure notice telling the client to contact the local office upon release, will be sent to the last known address. OPAR staff will narrate the susmend action in ORACCESS and a tickler will be generated to the case worker. SPD will susmend Medicaid cases for inmates of both DOC and local jails. A case that is put in susmend status will auto close after 12 months if no further action is taken on the case. If further CMS action is taken on a case that has been susmended, that action will restart the 12 month time frame to auto close the case. If an action must be taken on a susmended case, a tickler needs to be set up to close the case 12 months after incarceration if the client has not been released.

TOPIC:	Action/Task Decision Log:	Responsible Person(s):	Due Date:
New 541 Form Discussion (Selina Hickman, Joanne Schiedler) (Referral# OPS 091)	Follow up on requirement to show the liability calculation when sending the SDS 0541.	Selina Hickman	Next OPS mtg.

Prior to the meeting, the committee members sent Selina their concerns re: the new 541 form. She addressed each concern listed below:

1. "The new 541 form places a lot of extra work in the field, particularly re: the special needs payments."
I'm not sure why this would be extra work for the field unless some offices were not sending out approval notification when they started special needs payments. The cash payment information was required on the old version of the 541- the new version of the 541 alleviates the need to look up the OARs.
2. "To attach a 512 to this form is redundant since it is auto-generated from Salem"
The choice of where to print the 512 is made by the worker when they touch the 512. They can choose to print locally or to print from Salem. The only way that the client would get two 512s is if the worker chose to print both from the local office and from Salem. It is the same amount of steps in the mainframe to print the form, regardless of location.

3. "The overall form is not client friendly."

I'm assuming they are referring to the amount of text on the form. Adding the OARs reduced the amount of white space on the form. It was done at the request of staff, who complained about the time to look them up for each reason. The form could be looked at for reformatting, but it may be difficult to increase the white space without removing the OARs again.

4. "The section marked for CBC settings and NF's for the liability will be confusing to clients. The term "without liability" relating to the CBC's contradicts the language on the 512, and might lead clients to assume they have no payment obligation whatsoever."

This part of the form is confusing for CBC because of the room and board payment. The old form listed the payment amount, but there were many issues with staff including/not including the R&B and the client not understanding they have to pay an additional \$523.70 if the R&B was not included. The solution to that was to include the official document that shows the amount the client owes; for the CBC, that is the 512. We could possibly improve the 541 by changing the wording "with/without a liability". That would be something for Joanne and the SPD Forms committee or FANG to work out.

5. "Additionally, the notice for approving medical benefits is auto-generated only if the worker completing the UCMS action enters the correct code in the notice field on the UCMS/Access integration screen."

This is true. We could offer clarification on how to do this in an IM and an addition to the worker guide that describes the application process and the forms that are used.

During my visit to Multnomah County I talked to staff who thought the new form was a great improvement because it reminded you of what needed to be done. Therefore, opinions are not entirely unified on the topic.

The form was created by Jennifer and has been in OA as a web form since around 1/1/10. All I changed 5/2011 was to improve it by adding the OARs. I was told that the OA version was not adequate for notice/hearings etc. and needed to be hidden, so I did that at the same time that we added the OARs.

At the last OPS meeting, Selina and Joanne agreed to follow up on the requirement to show the liability calculation when sending the SDS 0541. Joanne connected with Robert Trachtenburg and he informed her of a 1985 published court opinion that says DHS must show its eligibility calculations so that clients can have the possibility of assessing if they were done correctly. Given that information, Selina devised a potential solution to the 512 problem:

The 450N form shows the liability calculation without the room and board. Selina suggests attaching the 450N to meet the liability calculation requirement and then revise the 541 form so that it includes the R&B. It might look something similar to this:

Your total payment to the facility is:

$$\begin{aligned}
 & \underline{\text{XXX.XX}} \text{ (as shown on the attached SDS 0450N)} \\
 & + \underline{523.70} \text{ (Room and Board Payment per OAR 461-155-0270)} \\
 & = \underline{\quad\quad\quad} \text{ Total payment due to facility}
 \end{aligned}$$

If the committee agrees this solution has potential, Selina and Joanne can put together a draft form and send it out for review prior to the next meeting.

TOPIC:	Action/Task Decision Log:	Responsible Person(s):	Due Date:
Continuous Quality Improvement (CQI) Updates (Catherine Seminary)	None at this time.		

Catherine distributed and reviewed the “CAF/SPD Initiative – Case Transfer Process Final Proposals” document. Based on the current ongoing research and variable processes throughout DHS/AAA statewide, a standardized interagency case transfer process is recommended. The approach recommended below addresses specific tools to increase efficiency, accuracy and simplify the interagency case transfer process:

- DHS/AAA statewide will incorporate a standardized statewide interagency case transfer process.
- All quality assurance steps will be incorporated in the sending process for the shared programs (SNAP, QMB, OHP, OSIPM)

The workgroup gave recommended approaches such as:

- Continue to collect metrics to ensure a statistically sound baseline has been established.
- Create team consisting of field staff for all shared programs to review recommendations, identify gaps and determine next steps, possibly utilizing a Lean event of some type.
- Executive governance and support at all levels within DHS.
- Mandatory statewide training of the new process, implementation support and a sustainability plan with the inclusion of a collection of metrics to determine impact.

Catherine distributed the draft “CAF/SPD Initiative – System Accessibility Project Final Proposals” document. As the new DHS is formed, CAF and SPD have an opportunity to examine primarily SNAP eligibility processes and procedures along with the additional programs works look at while a client is applying for SNAP. The initiative is to develop collaborative interagency service delivery concepts and proposals that will improve service delivery for DHS staff and client populations. As an Initiative Steering Body, three main components were identified to address. The three components are Intake Eligibility Process, System Accessibility and Case Transfers. The purpose of the System Accessibility component of this initiative is to evaluate and identify key elements required for appropriate field staff to access the client information through OACCESS and TRACS systems.

The recommendations listed below will provide better client service by increased efficiency, case accuracy and improved communication between branches:

- DHS/AAA agencies will have narration read and write access to Statewide TRACS and Oregon ACCESS for the appropriate role based field staff members.
- E-learning training for both systems will be posted on the SSP and SPD staff tools page.
- An IM/Transmittal will be sent to field management with links to step by step instructions and the appropriate E-learning training posted on the SSP and SPD staff tools page.
- All staff receive the training prior to accessing sister agency narration system.
- Sixty days after the IM/Transmittal is sent, data will be collected of the number of staff with access to both systems.
- Three months after implementation, a survey will be sent out to all field staff requesting improvement feedback. The survey will address what’s working and what’s not working, as well as field staff recommendations for any future improvements.
- A benefit document will be written after the survey results are received.

Next steps are for Executive Meetings be scheduled to make decisions on recommendations and then the Core Team with accepted recommendations. The key components necessary to implement are very close to completion. However, it is recommended the considerations listed below take place prior to implementation:

- Field staff members determine the appropriate classifications to receive rights to both systems.
- Field line supervisors view a presentation of both systems, preferably at a quarterly supervisor meeting.
- The rollout of this improvement will require executive governance and support at all levels within DHS. A rollout plan needs to be created with components such as mandatory training for staff with systems access rights and implementation support and a sustainability plan with the inclusion of collection of metrics to determine the impact.

Catherine distributed the draft “CAF/SPD Initiative – Intake Process Work Group Final Proposals” document. Based on the supporting research, SPD/AAA offices that are running the Application Process Improvement Project model have decreased time frames to get clients to initial intakes. The approach recommended below addresses specific tools to increase efficiency. Similarly, the Intake Model SSP has been using statewide since 2009 found many efficiencies. A standardized approach creates consistency where clients and staff can expect the same process and service levels in any office they visit. In addition, having the service models between SPD/AAA and SSP aligned should ease overall DHS burdens of additional work and rework.

- All SPD/AAA field offices will incorporate the 2008 Application Process Improvement Project model that was developed and recommended for local office use. This will be implemented for all non service cases.
- All SSP offices will continue to use the Standardized Intake Model that has been in place since 2009.
- Core components of the Standardized Intake Model related to scheduling of intakes be implemented and maintained statewide throughout DHS & AAA offices.
- Both SPD and CAF would establish quality assurance and governance protocols to ensure local offices maintain statewide models that are put into place.

Next steps are for Sponsors and Executive Management decision meetings be scheduled to review the recommendations and make decisions on which recommendations to sponsor. Charters could then be developed and a project team established to proceed with the accepted recommendations.

- Develop tools, rollout plan and communication for all SPD/AAA field offices to incorporate the 2008 Application Improvement Project that was developed.

TOPIC:	Action/Task Decision Log:	Responsible Person(s):	Due Date:
<ul style="list-style-type: none"> • Procedures <ul style="list-style-type: none"> ➢ EPD (Employed Persons w/Disabilities) Program ➢ 60+ Transfers • PMDDT Agreements between 5503 & SPD/AAA offices • Transfer Agreement meeting (7-11-11) (Karen Gulliver)	None at this time.		

Procedures for EPD (Employed Persons w/Disabilities)

Karen distributed and reviewed copies of the EPD Referrals and 60+ Transfers procedures, and PMDDT agreements between 5503 and SPD/AAA offices. The transfer agreement was generated from the work group which included managers from SPD

Central Office and SPD/AAA field offices. The volume of cases transferred is due in large part to the 7210P confirmation application from the OHP Standard Reservation list. All disputed transfers should be sent to Amy Davis or Hillary Erickson at the **5503 CASE TRANSFERS** mailbox. The transfer should not be disputed with the worker.

60+ transfers: The last agreement changed the existing transfer procedures to require any case with a person 60+ to be sent to an SPD/AAA office. Previously the case was split and children were processed at 5503 and adults referred to SPD/AAA. 5503 has proposed a pilot to return to a “split” application. The length and location is to be announced at a later date. SPD and 5503 agreed the transfer agreement work group should be revisited and include field eligibility staff.

EPD transfers: The transfer process was reviewed and approved by Jeff Stell. This is the newest agreement and may not be familiar to the field. No action was taken at this time on the agreement due to field unfamiliarity. Jeff agreed to write a summary of the process for the SPD newsletter.

PMDDT transfers: A specific work group will be formed to address PMDDT transfers. If any of your staff would like to be involved with this work group, contact Karen Gulliver.

TOPIC:	Action/Task Decision Log:	Responsible Person(s):	Due Date:
IM SPD-11-047 (Adult Support Service Enrollment Eligibility Criteria and Process Changes effective 7-1-11) (Nancy Sargent-Johnson) (Referral# OPS 092)	None at this time.		

IM SPD-11-047 was distributed re: Adult Support Service Enrollment Eligibility Criteria and Process Changes effective July 1, 2011. There was a misconnect in Central Office with APD and DD. There is additional work being done on the Policy side. Information and numbers are being gathered. There will be another communication from APD.

MISCELLANEOUS ITEMS:

1. None at this time.