Cumberland County Department of Social Services

Presentation to Community Partners

NC FAST Projects, Work Support Strategies & Affordable Care Act
November 10, 2014

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County DSS Role

- **County Departments of Social Services are:**
  - Federally mandated
  - State supervised
  - Locally administered

- **Public Assistance:**
  - FNS (food stamps) – 33,000 ongoing cases; 2,900 new applications; $9 million federal benefits issued that is spent in the local economy monthly
  - Medicaid – 50,000 ongoing cases; 3,500 new applications
  - Child Care Subsidy – 4,100 children; $1.5 million paid to local child care providers monthly
New State & Federal Mandates
Work Support Strategies (WSS)

State tenets:

- A new service delivery model for eligibility programs that maximizes customer self-sufficiency and reduces administrative churn

- A method to incorporate changes related to the federal Affordable Care Act and State NC FAST implementation

- It aligns with county and agency strategic goals

- For more information: www.ncwss.com
NC FAST is the new way the State has mandated that counties determine eligibility for public assistance programs. State’s implementation schedule:

- **Project 1 – Food and Nutritional Services (food stamps)**
  - Began in July 2012 with applications. There were major system functionality problems. January 27, 2014 Federal USDA mandated that all program applications (1,766) and recertifications be up-to-date by March 31, 2014. Federal USDA pays 50% of the cost to administer the program locally.

- **Project 2/6 – Medicaid, Work 1st Cash and Refugee Assistance**
  - Began October 2013 with new applications.
  - October/November 2013 for current active cases. Delayed with statewide staggered launch date in July 2014. Interface with new automated reimbursement system for medical providers called NCTracks.

- **Project 7 – Affordable Care Act including new MAGI Program applications**
  - Federal Facilitated Marketplace began accepting applications October 1, 2013 for an effective date of January 1, 2014. Local counties did not begin receiving these applications until late February 2014.

- **Project 3 – Child Care & Energy Assistance**
  - Expected to launch early 2014. Delayed with no anticipated new launch date.
Effective October 1, 2013:

- **Medicaid Expansion**
  - North Carolina opted not to participate in the expansion program
  - Approximately 500,000 NC citizens may not qualify for healthcare benefits

- **Federal Qualified Health Programs –** [www.healthcare.gov](http://www.healthcare.gov)
  - Medicaid – DSS
  - Health Choice – DSS
  - Advance Payment Tax Credit – Federally Facilitated Marketplace
  - Cost Sharing Reduction (Subsidy) – Federally Facilitated Marketplace

- **“No Wrong Door Concept”**
  - Citizens can apply for services anywhere through the Federal Marketplace
  - Cannot force the citizen to come into the office
  - Telephonic & electronic access will be linked to North Carolina through ePASS

- **Navigator or Certified Application Counselors Program**
  - Local group of medical providers, county departments & community agencies working together to provide services in the community ex. Legal Aid of NC, Stedman Wade Health, and Community Health & Sickle Cell Agency

- **Will be up to local communities to build the coalition**
  - Ongoing Information Session for community partners provided August 2013 at DSS and Public Libraries across the county
Other Federal Mandates

Modified Adjustable Gross Income (MAGI) – October 1, 2013

• New program re-design of the Medicaid for Family and Children’s programs including pregnant women, infant/children, family planning, foster care and health choice
• Use income tax methodology to determine eligibility for Medicaid in the Family and Children’s programs
• Citizens could be approved for eligibility for the old and new Medicaid for Family and Children’s programs during the same application process
• New applications received beginning October 1, 2013 had to be assessed under the old eligibility criteria for October through December 2013 and the new MAGI criteria beginning January 1, 2014

Sequestration – October 1, 2013

• Overall DSS is funded 50% by federal reimbursement. The October 2013 federal shutdown created delays in hiring temporary staff and processing food stamps, child care subsidy & Work First cash assistance cases
• Federal funds pay for 100% of direct services administered by DSS to citizens and local businesses ex. day care facilities, grocery stores, rental property
North Carolina ePASS

Electronic Pre-Assessment Screening Services (ePASS) is the public portal for citizens to apply for services on-line using NC FAST.

State’s ePASS implementation schedule:
- April 2013 launched Food & Nutrition Services (food stamps)
- June 2013 expanded to include Medicaid applications
- October 1, 2013 expanded to Affordable Care Act
- Allows for duplicate applications for all programs
THE PERFECT STORM
August 1, 2013

County Department of Social Services

Affordable Care Act

Modified Adjustable Gross Income

Sequestration

NC FAST & ePASS

UNKNOWN
NC FAST PROJECTS 2/6/7: Medicaid Applications “STORM DAMAGES”
TODAY
Perfect Storm

“UNKNOWN”
- Federal Shutdown
- USDA Food Stamp Crisis
- Agency Closings due to inclement weather
- Potential Statewide Legal Action
- CMS Monitoring

Affordable Care Act - Medicaid

Modified Adjustable Gross Income - Medicaid

County Department of Social Services

NC FAST & ePASS

NCTracks

Food Stamp Applications are up-to-date
Untimely MAGI & Family/Children Medicaid applications in the backlog subject to the State’s August 31, 2014 deadline.

Total Untimely Applications as of June 1, 2014:

- Applications processed since June 1, 2014: 4,532
- Applications Due by August 31, 2014: 1,823

* * Excludes Adult Medicaid cases including those pending disability determinations, Work First, and Health Choice (500 plus), timely applications (1900 plus) & recertifications (6400)
Untimely MAGI & Family/Children Medicaid applications in the backlog subject to the State’s August 31, 2014 deadline.

Total Untimely Applications as of June 1, 2014: 6,355

- Applications processed since June 1, 2014: 6,181
- Applications subject to the August 31, 2014 backlog: 174

**Excludes Adult Medicaid cases including those pending disability determinations, Work First, and Health Choice (500 plus), timely applications (1900 plus) & recertifications (6400)**
**CHALLENGES**

- No edits in the ePASS system to prevent multiple applications; therefore, duplicate cases are in the system.

- Cases are complex and require many types of assessments based on the various Medicaid programs.

- Takes higher level of Medicaid expertise to do this work.

- Medicaid cases were housed in both EIS and NC FAST until October 2014 which made data reliability and workload management difficult.

- Anticipate major errors and quality assurance issues.

- Training is difficult as the operational function has been problematic and NC FAST roll-out is incomplete. State rolling out new training for supervisors.

- Preventing staff burn-out, low morale, and increased staff turnover.
CHALLENGES

- Problems with NCTracks (provider services including payment) interfaces with NC FAST (eligibility); therefore, citizens may not receive medical services timely and providers may see a delay in financial reimbursement through Medicaid.

- Project 2/6/7 NC FAST roll-out of Medicaid completed. Phase 2 of this roll-out kicked off beginning August 2014 with applications. The roll-out for recertifications occurred October 2014 and involves 50,000 ongoing cases plus over 1,000 cases in the backlog.

- Anticipate 6-10 months remaining until Medicaid is completely hard launched. Next program will be child care subsidy and child protective services. Anticipate 2-3 years before full implementation.

- Affordable Care Act open enrollment starts again November 15, 2014 which will increase workloads due to potential for tax penalties in 2015.

- Must continue to maintain timely food stamp applications and recertification processing (approximately 33,000).

- Appear to have avoided a statewide lawsuit and/or CMS issuing an immediate compliance mandate which would have created fiscal, administrative, and manpower issues.
NEXT STEPS
Our intent is not to cause panic but to promote awareness and preparedness for what might be forthcoming as we continue to transition to the new service delivery model.

Federal administrative reimbursement for Medicaid has increased from 50% to 75% which reduces the county share. Additional revenue will provide an opportunity to increase income maintenance positions.

Over 60,000 Medicaid cases will need some type of action within the next six months.

The continual need for temporary employees to address the workload demand is critical to our success moving forward.

Finally, we ask for your continued patience, understanding and support as we strive to improve access to benefits for our customers.
What can my agency or organization do to help?

- Continue to provide opportunities for community outreach and education

- Continue to provide access to automated services through the use of technology in your agency or organization

- Continue to provide training opportunities for your staff and the citizens you serve
What can my agency or organization do to help?

- Believe the worst is over. Very few areas of concern due to any potential benefit and service delays:
  - Normal demand on food pantries
  - Normal demand for emergency financial assistance ex. rent & prescriptions
  - Normal demand for heating related crisis and utility assistance
  - Limited delays in Medicaid services and reimbursements including prescriptions
    - New Medicaid applications take 24 hours to process due to the changes in the provider identifier in the old system and the new NC TRACKS system ex. practice name verses doctor’s name
    - State DHHS has established an expedited process for medical emergencies
  - Limited impact on other government programs such as Section 8 and Housing Authority
Questions, Answers & Partner Updates

Note: Child Care Provider Meeting
November 17, 2014