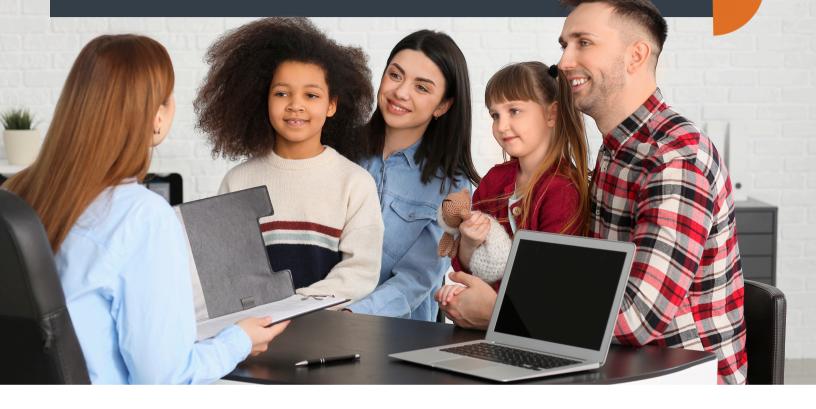


WHITEPAPER

Transforming Medicaid Eligibility Systems with Empathy at the Forefront

How State Medicaid Agencies can expedite ex parte renewals and improve the beneficiary experience.



Over the past two decades, Medicaid directors have managed drastic changes either through policy developments like the enactment of the Affordable Care Act (ACA) or crises like the COVID-19 Public Health Emergency (PHE). Often facing an overwhelming volume of benefit applications and renewal determinations, state agencies are always looking for solutions to help them address efficiency as well as the quality of service they're able to deliver to their constituents.

As some case workers continue to focus on verifying the income and eligibility of beneficiaries, many agency leaders are looking to build upon existing frameworks set forth by the ACA. Enacted into law on March 23, 2010, the ACA directs agencies to first pursue automation of renewals, known as 'Ex parte'. Ex parte renewals can help reduce administrative burdens for state eligibility workers and enrollees. They can also help address long standing issues, such as Medicaid enrollees losing coverage at renewal solely due to procedural disenrollments despite still being eligible.

Procedural disenrollments occur when the state cannot verify an individual's ongoing eligibility at renewal. This lack of verification can lead to a loss of Medicaid coverage even if the individual is still eligible for the benefit. The main concern with procedural disenrollments is that many people losing Medicaid for these paperwork reasons may still be eligible and do not have another source of health coverage. While caseworkers strive to enhance eligibility determination processes and outcomes, state Medicaid leaders can and should look to supplement public information such as quarterly state wage data with third-party data sources like The Work Number® from Equifax.

The Work Number can help promote effective and efficient determinations and renewals as applicants may no longer need to submit paper pay stubs; case workers may no longer need to manually verify income data by phone, mail, or from separate databases; and they can access data current as of the last date payroll was processed by the contributing employer or payroll provider, expediting Medicaid application and renewal processes.

"Stopping the eligibility process to ask for more information adds a lot of friction. It causes delays and can actually increase the likelihood of errors when you touch a case multiple times as case workers set it aside and pick it back up. Having The Work Number as part of that process is a real advantage, because you have current data at the first touch of a case, and receive instantaneous responses to help make decisions quickly on that case," - Mike Bromley, SVP & GM, Government Solutions for Equifax, Inc.

As Medicaid directors look to resolve issues surrounding 'stale' income data, The Work Number equips teams with current income and employment data they can use to possibly help improve ex parte renewal rates, simplify the eligibility process, and reduce the manual work and effort required from enrollees and case workers.

Case Study: Georgia invests in modernization to create a healthier tomorrow

Situation

In 1992, the State of Georgia processed benefits applications by hand, according to then Deputy Commissioner for Eligibility Jon Anderson, now president and CEO of Coy Forrest Strategy and Innovation, LLC.

This was a lengthy, cumbersome process prone to manual errors.

"We did everything we could by hand. Everything except benefit issuance was a manual process. Verification gathering could take a minimum of 14 days for the customer to return the information to us," Anderson said. "Then, over the years, we started adding technology to streamline our processes while at the same time, we were losing case managers. We were losing staff throughout the years, and [so] we were trying to find ways to increase real time data to increase worker efficiency."

Solution

For the State of Georgia, this meant investing in The Work Number and automated data tools.

"Georgia started using The Work Number in 2006 to help us address quality and timeliness in our decision-making. Over the years we continued to streamline our processes from real-time manual verifications to a full integration of The Work Number into our workflows" said Anderson.

Outcome

With the help of commercial data solutions, system integrations, and Robotic Process Automation (RPA), Anderson and the State of Georgia effectively shifted the burden of eligibility from employees and beneficiaries onto the system

How Commercial Data Solutions Help Agencies Fill in the Gaps

Commercial databases and the solutions they provide, like The Work Number, help state Medicaid staff incorporate current data that gets returned instanteously into the eligibility determination process. This can help agencies streamline the application process, increase ex parte renewal rates, and even help decrease unnecessary procedural terminations created by redundancies or timeframe delays within an agency's manual processes.

Public data sources available to the case workers - such as state quarterly wage data - are often out of date by the time data is available for use. Where The Work Number differs from these data sources is in the currency of the data. Unlike public sources, data on The Work Number database is current as of the last date the contributing employer or payroll provider processes payroll, while a government data source's information may be anywhere from 30 to 120 days old.

Outdated data complicates matters for beneficiaries and case workers as it can lead to improper rejections, time consuming manual verifications, and delayed eligibility determinations creating lengthy time-to-benefit periods. For example, let's say a beneficiary is mistakenly found ineligible for Medicaid services utilizing a stale data source. That beneficiary could apply for a hearing, but this puts the burden on the individual to help verify his or her income and employment for the Medicaid eligibility determination. These avoidable, procedural barriers to benefit access can also erode trust and create friction in the system.

"Having access to commercial data sources is a critical component across the eligibility process," Bromley said. "Whether it's helping to verify income, validate addresses or confirm financial assets, having commercial data makes the process go much smoother. There's less friction for the applicant, it's more efficient for the agency, and it helps the overall process of providing services to the public."



For eligible low- and moderate-income families who rely on Medicaid and Children's Health Insurance Program (CHIP) services, investments in systems are needed to help support the mission of delivering services in an empathetic manner from the first point of contact.



Several investments that agencies are currently considering to help build these more empathetic systems are capabilities closely related to technologies like automation, commercial data, artificial intelligence (AI), and machine learning.

"What you're seeing is a lot of states are keying into machine learning opportunities where you can automate certain parts of the more rote eligibility, typing and data entry pieces for case managers and caseworkers," said Gabe Roberts, former Medicaid Director, now health care consultant and Senior Strategic Advisor for Sellers Dorsey. "You can leverage machine learning with automated data to really narrow and focus your staff on those hard calls, to get folks through the process as quickly as possible with a good decision with integrity, whether that's a reenrollment or a disenrollment and transfer."

Each potential investment builds upon existing data frameworks set forth by state and local leaders, and works to give local Medicaid teams a "leg up" in terms of decision-making. With current information easily accessible to caseworkers, teams can make more efficient and effective decisions, so that agencies can seek to increase ex parte rates while working to decrease the number of mailings, manual casework and procedural terminations.

"Using commercial data that's available in real time has cut down the amount of requests that we had to make for customers to verify income," Anderson said. "It's also available to support and substantiate audits while helping customers get their benefits faster."

Automation and instantaneous access to current data can help alleviate some of the burdens put on state Medicaid programs, this is where Equifax can help.

Our income and employment verification services utilize data from The Work Number, the largest commercial source of consolidated income and employment information in the U.S. This data is directly contributed by small, medium, and large employers and payroll providers nationwide, representing more than two-thirds of the U.S. non-farm population. We are also working to include pension payment records when available.

The Work Number database offers a unique ability to access current income and employment information - as of the last date payroll was processed by a contributing employer or payroll provider - faster than manual verification processes or from older, stale data sources via system-to-system integration, batch services, or our online service. Plus, case workers may be able to view additional helpful information that other data sources may not report, for example, employer insurance coverage, hours worked, and income-bypay-period as and if such information is available and reported by the employer.

With ex parte and automated renewals, states need to first go through the process of trying to renew cases in an automated way with the data available to them. The more data sources used in this process, the more agencies can improve their ex parte renewal rate, which in turn, helps eligible individuals retain coverage or minimize gaps in coverage that can increase Medicaid costs over time. Plus, with successful ex parte renewals, it frees up the limited time case workers have to focus on the more complex cases.

Investments made today in next-generation capabilities like RPA, machine learning, application programming interfaces and commercial data sources like The Work Number, will deliver benefits to tomorrow's beneficiaries and state Medicaid staff. For example, by automating certain parts of the initial determination and ex parte processes, caseworkers can expedite income and employment verifications and conduct eligibility decisions on applications or renewals before Medicaid coverage gets disrupted.

At Equifax we can help your agency break through its backlog, so your staff can focus on those hard calls, expedite application reviews, and conduct effective eligibility determinations, whether that's at enrollment, re-enrollment or disenrollment and transfer to another healthcare coverage program allowing for continuity of care.

Discover how your agency can streamline benefits delivery by using the Work Number.

The Work Number®

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