



Ohio Job and Family Services Directors' Association

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Joel Potts, Executive Director

To: The Ohio Department of Medicaid
From: The Ohio Job and Family Services Directors' Association
Date: March 16, 2018
RE: **Group VIII Work Requirement & Community Engagement 1115 Demonstration Waiver**

On behalf of Ohio's 88 county departments of job and family services, we are interested in providing comment, making recommendations, and asking questions pertaining to how counties can successfully operationalize a meaningful employment and training program for required Medicaid Group VIII individuals under the proposed Group VIII Work and Community Engagement Requirement (herein referred to as "the requirement").

OJFSDA is making three key recommendations, as well as other recommendations/requests for clarification.

EXECUTIVE SUMMARY

Key Recommendations:

1. Develop a fiscal impact statement and identify the necessary funds for a meaningful program
2. Automate as much of the program administration as possible
3. Time implementation for a successful program launch that will enable counties to properly prepare and minimize confusion for Group VIII individuals

Other Recommendations:

4. Exempt individuals on a waitlist for behavioral health treatment
5. Exempt recently incarcerated individuals to ensure access can be maintained to necessary services.

Clarification Needed:

6. Clarify the impact of aligning the requirement with a waiver of SNAP ABAWD time limits
7. Clarify the state/county roles in determining good cause and exemptions

KEY RECOMMENDATIONS

1. FISCAL IMPACT STATEMENT/IDENTIFY FUNDING

We request ODM work with ODJFS and DAS to complete a fiscal impact statement, estimating the cost to counties in operating the program, providing the intensive case management services outlined in the waiver, and arranging for any necessary supportive services. Identifying the cost to implement the requirement will be the first step in the state and counties working to appropriately fund the program's operations (outlined below).

Operating the new program as outlined in the waiver will require significant additional work hours at the county level. Currently, many county JFS departments are operating at a deficit in their income maintenance programs, meaning that overtime staff hours are necessary to keep up with core duties and functions such as determining applications for SNAP, Medicaid and TANF eligibility.

Appraising Group VIII individuals to determine if they must meet the requirement to maintain coverage is just one aspect of implementing this program. Other critical pieces of the program as set forth in the waiver include providing supportive services, such as transportation or work experience programs, and involvement in state hearings.

We appreciate ODM requesting federal Medicaid match for such supportive services. Such a request indicates the department recognizes the critical importance of such services to address barriers keeping individuals from employment and to help them keep new jobs once they are attained. Even if CMS approves federal match for these supportive services, the vast majority of counties will be unable to leverage these dollars without state funding.

2. AUTOMATION/LEVERAGING TECHNOLOGY

The ability of counties to successfully implement this program, particularly without additional funds, rests on the ability of the state to maximize the productivity of our information technology systems. We respectfully request the program be designed and technology fully leveraged to eliminate the oftentimes unnecessary burden placed on clients to verify information already known to one of the county systems that could make them eligible for an exemption or good cause determination. For example, MITS and Ohio Benefits could be linked to automatically exempt individuals who are associated with certain codes based on medical diagnoses.

Fully leveraging technology will also free up county work to spend more time managing the cases of individuals who must meet the requirement to maintain coverage – rather than on chasing down documentation to verify what some government agencies already often know. This will also allow counties to administer the program without letting other core functions like processing initial applications slip, which could put the state at risk to not meet federal timeliness standards for both SNAP and Medicaid.

The State of Ohio has invested a significant amount of time and resources to increase efficiencies in the county system. These long overdue efficiencies, spearheaded by the Administration's Ohio Benefits project team, include self-declaration, no-touch, and voice signature technology. Clients no longer need to take the time and arrange for transportation to visit the county agency in person

to see to most of their eligibility needs. Rather, they can work with the county online or on the phone. Administratively, these changes are what have allowed counties to continue to function despite decreased funding. On average, an in-person eligibility interview takes approximately 45 minutes, whereas a phone interview takes half of that amount of time. Counties are literally able to serve almost twice the amount of people in a modernized system. We request the requirement program be designed in a way that preserves these efficiencies as much as possible.

In addition, today approximately 1/3 of Medicaid eligibility redeterminations are done through passive renewal. We request that the program be designed to preserve the ability of the system to conduct as many passive renewals as possible. This could include, for example, permanently exempting individuals with certain medical diagnoses. This will enable counties to continue to prioritize processing initial applications.

3. TIMING OF IMPLEMENTATION

The target start date of July 1, 2018 is unrealistic at best and is likely to set both counties and individuals up for confusion and failure if aggressively pursued. OJFSDA recommends tying implementation to a date by which the system is likely to support automation to the fullest extent possible and by which county staff can be trained to properly administer the program.

Beyond accomplishing necessary IT programming changes, additional challenges to this date are the statewide implementation of SNAP/TANF in Ohio Benefits scheduled for August of 2018 and the statewide rollout of the electronic document management system scheduled for July 2018.

We cannot overstate the need for adequate county training on the new rules and systems associated with this requirement in order to be successful, and are currently undergoing intensive training on SNAP/TANF policy and the Ohio Benefits system in anticipation the summer rollout.

IMPACT OF WAIVER PROPOSAL TO LOCAL MEDICAID DELIVERY SYSTEM

Below are some of the new major county duties as proposed in the waiver request, with some corresponding context and specific recommendations. Implementation of this waiver will require significant number of additional work hours at the county level.

- **Additional customer service for the entire Group VIII population.** The waiver request notes all Group VIII individuals are to be provided an explanation of the new program requirement and their rights. These 709,925 individuals are likely to have questions and seek context for how the new requirement will impact their personal situation and are likely to contact their county department for this information. Already, county departments struggle to remain accessible to handle customer inquiries while appropriately managing core functions and duties for the various programs they administer.
 - o Recommendation: One consideration suggested for examination is only explaining program requirements to individuals who are likely to be affected by the program. Use information already known to the agency through MITS, SSI applications, minor children in the household, etc. to determine the population who should receive notice or, at a minimum, tailor communications to these different groups.

- **Appraising the entire Group VIII population** to determine if a Group VIII eligible individual needs to meet the requirement, or if they meet an exemption to maintain their Medicaid eligibility. While the figure of a projected 36,036 individuals is cited as the population expected to have to meet this requirement, it is important to note that counties will be responsible to appraise the entire Group VIII population of approximately 709,925 individuals. As described below, it will be critical to automate as much of this work as possible. However, the Ohio Benefits eligibility system is not currently designed to do this. (For additional information, see “Information Technology Needs” section.) The draft waiver request speaks to individuals being appraised to determine: 1) if they meet any of the SNAP or ABAWD exemptions; 2) if they meet the ABAWD work requirements; 3) if they need supports to meet the Community Engagement Requirement, and 4) if they face barriers to participating in work or community engagement activities.

This appraisal process, particularly for individuals who will be determined to have to meet the Group VIII requirement, will be quite time intensive to conduct.

- o Recommendation: Look to county experience in implementing the CCMEP program, which may be a good indicator for the time that will be required for counties to conduct these appraisals.
 - o Recommendation: Account for churn within the 36,036 population.
- **Counties are to process any changes reported by the client or identified by the system. Should these changes impact the individual’s compliance with the requirement, the agency must engage in intensive case management services.** The waiver request sets forth that individuals who are not meeting the requirement will be re-appraised to determine if they have any good cause reasons for failure to meet determined; and if not, if they have any possible exemptions from the requirement. If not, the individuals’ plan must be modified, and each individual will have the opportunity to agree to these changes – all before termination for failure to meet the requirement could occur.
 - **Should an individual choose to appeal the termination of his/her Medicaid coverage, the appeal and state hearing process is available.** Each state hearing requires a county employee dedicate time not only to prepare for the hearing, but to participate in the hearing.
 - **As currently written, without additional state support, counties will be left holding the bag on funding supportive services necessary to enable individuals to meet the requirement.** Even if CMS were to approve Ohio’s request that federal match be available for supportive services like transportation or work experience programs, without additional state investments, counties would be responsible to fund the state/local share to draw down these federal dollars. This could lead to a wide disparity in the supportive services available from county-to-county.

Clarification Needed/Unanswered Questions

1. The draft waiver request states that Ohio will align the requirement with SNAP policies that provide a waiver of the ABAWD time limit to counties that do not have a sufficient number of jobs to provide employment for the individual. (The current SNAP policy exempts individuals in 26 counties from the time limits and this list is updated yearly.) We need clarification on what aspect of the requirement, exactly, is being aligned with the SNAP ABAWD time limit waiver. For example, will individuals in counties determined to have an insufficient number of jobs need to

be appraised? Or will they be exempt from the requirement overall? In essence, will county departments in these counties be required to administer a Medicaid Work and Community Engagement Requirement program?

2. Under “Consequences for Failure to Meet & Reporting Requirements”, on page 9 of the draft waiver request, there are references to “the State” doing work such as determining good cause for failure to meet the requirement and determining if an individual who fails to meet the requirement is then eligible for an exemption. Does the state intend to do this work, or should the references pertain to the county?

Other Recommendations – Additional Exemptions to Consider

1. We urge an exemption for individuals on a waitlist for behavioral health services from having to meet the requirement, given there are still capacity challenges despite the steps Ohio has taken in recent years to ensure that individuals with behavioral health needs have access to the services they need.

An additional exemption should also be considered for recently incarcerated individuals, in order to help stabilize these individuals as they work to reenter society. Keeping recently incarcerated individuals connected to medical and behavioral health services will help reduce recidivism. In general, individuals with felony convictions are among the most difficult cases to engage in meaningful employment programs due to hiring and licensing restrictions.

2. We appreciate the work of ODM and ODJFS to ensure that unintended populations who may be incorrectly categorized as Group VIII individuals are not impacted by this requirement (for example, former foster youth). We look forward to continuing conversations in this regard.

CONCLUSION

The mandate to develop a Medicaid work requirement included in the biennial budget bill was a statement of philosophy that lacked any detail on what a program ought to look like. OJFSDA recognizes that engaging individuals in meaningful work and training programs, with appropriate supports in place, provides the best opportunity to help individuals improve their economic situation and decrease dependency. We appreciate the work of The Ohio Department of Medicaid to develop this conceptual program design and look forward to collaborating with the state department on how collectively we can create as meaningful of a program as possible for impacted individuals.