

# Innovation in Presumptive Eligibility for Pregnant Women



## Panel:

**Glenna Asmus:** Manager Quality and Outcomes, Office of Medicaid Policy and Planning

**Paige Wilkins:** Program Coordinator, Covering Kids & Families of Northeast Indiana

**Jim Yoder, MBA, CMPE:** Vice President, Specialty Physicians, Parkview Physicians' Group

## Moderator:

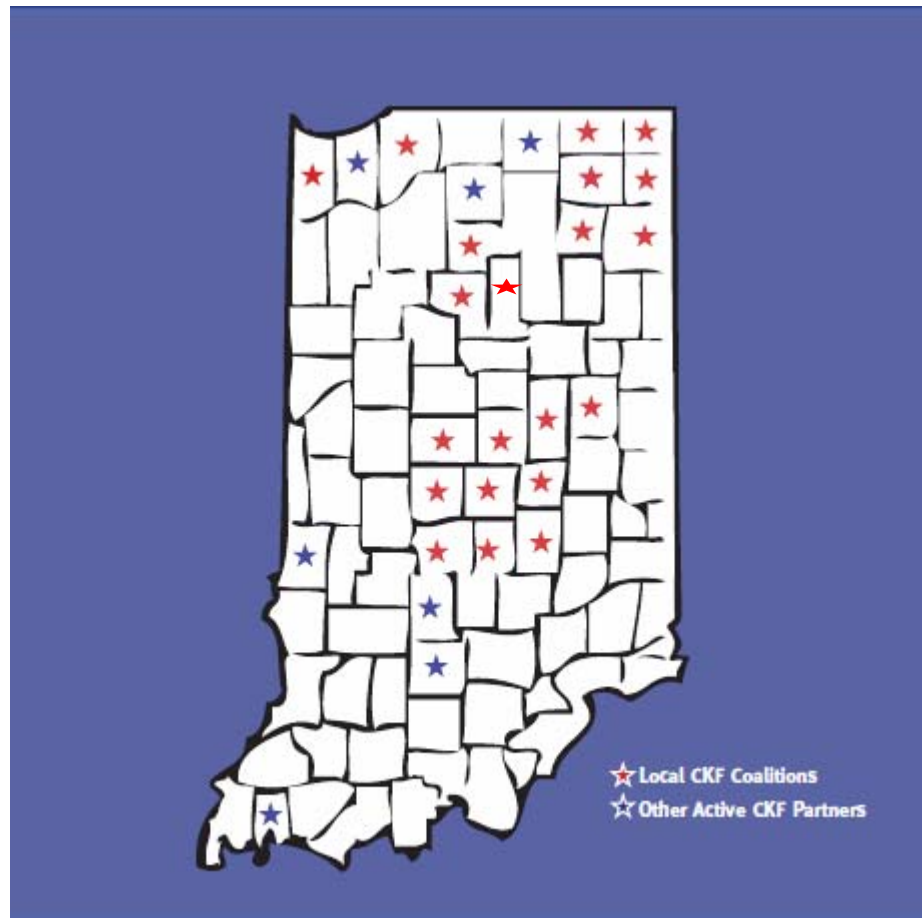
**Marci Toler:** Director of Enrollment Assistance, Covering Kids & Families of Indiana

# Who Is Covering Kids & Families of Indiana?

- Covering Kids & Families of Indiana is a partnership of more than five hundred organizations and individuals “*Advocating Health Coverage for All.*”
- Covering Kids & Families of Indiana helps establish and operate community-based enrollment centers at hospitals, health centers, schools, child care and other social service providers through the formation of CKF-IN local coalitions.

# Advocating 'Coverage for All': Strength in Partnerships and Healthcare Expertise

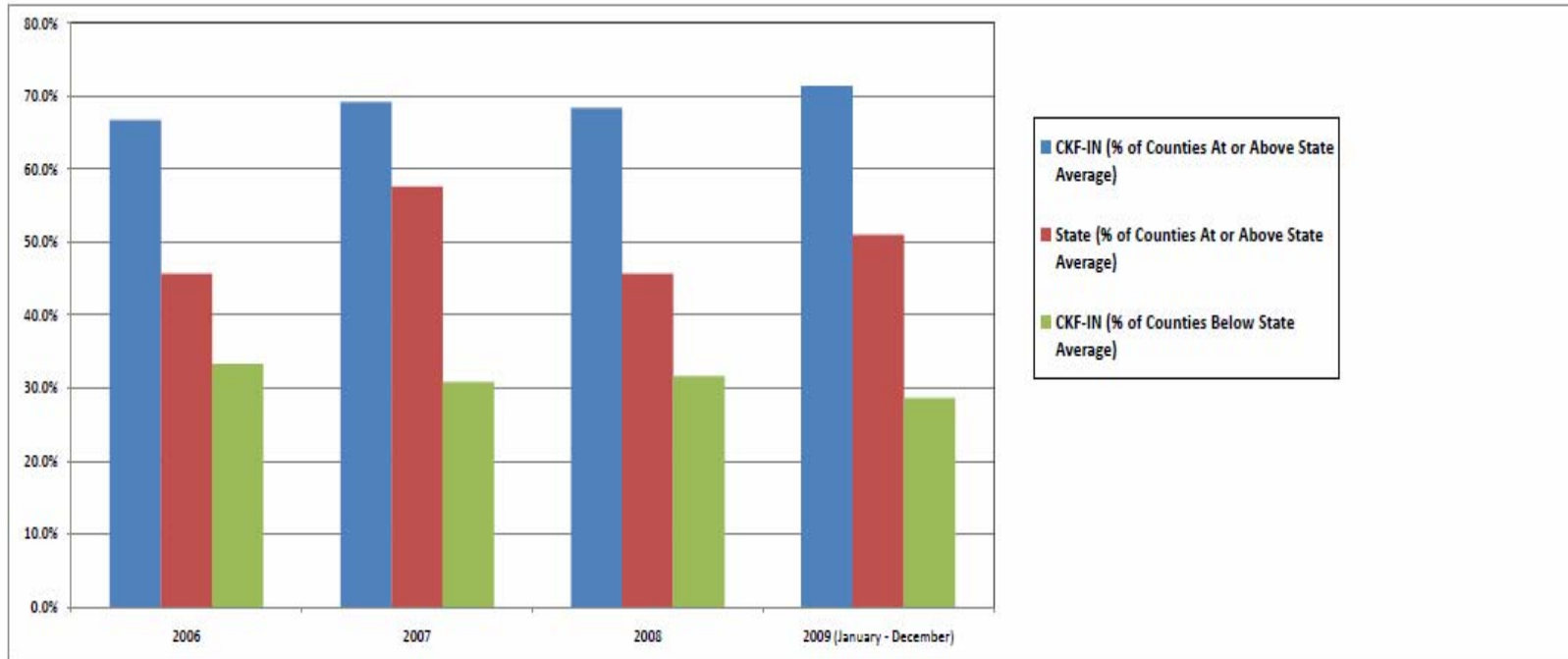
- CKF-IN local coalitions and affiliates currently operate in twenty-one counties that serve over 51% of families and children enrolled in Medicaid, CHIP & HIP.



# Expanding Partnerships: CKF-IN Hospital Initiative

- Health Coverage Handbook: Hospital Edition
  - Compilation of best practices collected from our partners and affiliates to help hospitals build a successful outreach and enrollment effort
  - Tried and true practices to help hospitals improve their bottom line, enhance community benefit and minimize otherwise uncompensated care
- CKF-IN Hospital Service Line in development to offer hospitals technical assistance to implement effective outreach and enrollment strategies
- Health Coverage Handbook: Health Center Edition
  - 2010 Work Plan Goal for the Hospital & Health Center Committee

# CKF-IN Performance Analysis 2006 - December 2009





# Presumptive Eligibility for Pregnant Women

Enrollment Data, July 1, 2009 – February 23, 2010

# Presumptive Eligibility for Pregnant Women

Data As of February 23, 2010

- 6,961 women ever enrolled in PE since July 1, 2009
  - Average of 205 women per week (34 week period)
  
- PE begins on the date of web-based approval and closes when one of the following conditions are met:
  - If a pending application is on file, PE closes the day following receipt of the Medicaid determination at HP
  - If no pending application is on file by the last day of the month following PE approval, HP will close the PE segment
    - Example: PE approval on August 15<sup>th</sup> requires that a pending application be on file by September 30<sup>th</sup> or PE will be closed.
  
- Women are required to submit a Hoosier Healthwise Medicaid application at the time they enroll in PE

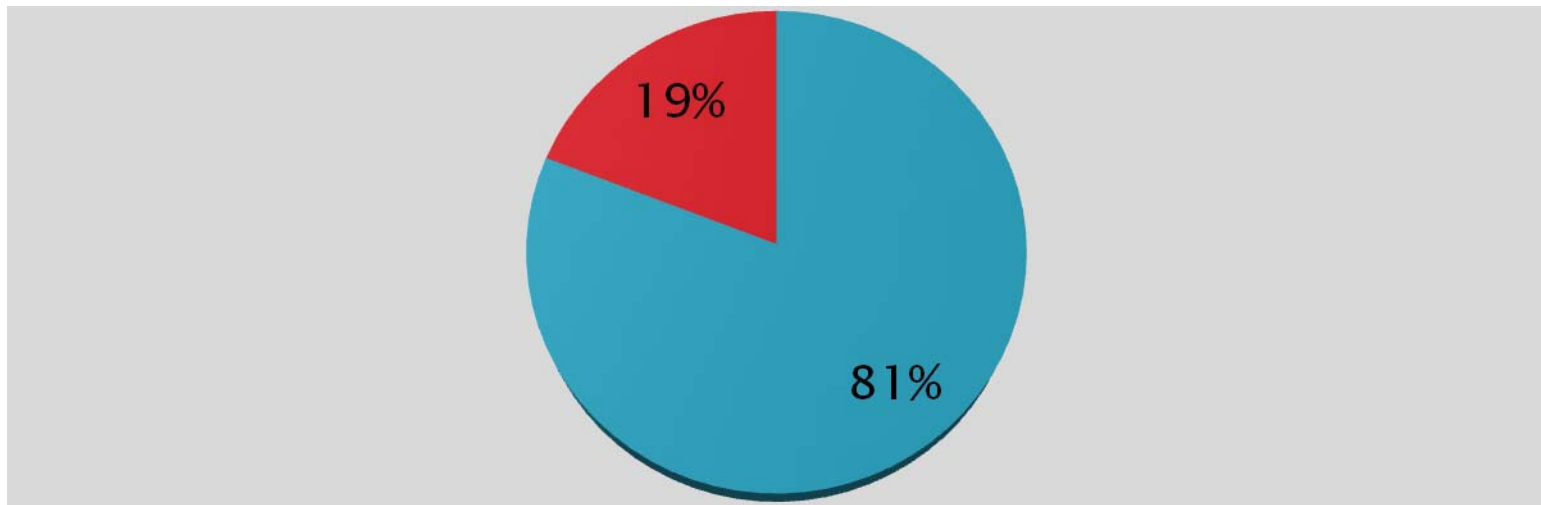
# Presumptive Eligibility for Pregnant Women

Data As of February 23, 2010

## PE Member Medicaid Application Decision

N=5,693

■ Approved Medicaid ■ Denied Medicaid



Further analysis of the denial reasons indicates women are most often denied for missing documentation and/or no interview.

Most closures are due to no pending application on file within the required timeframe.

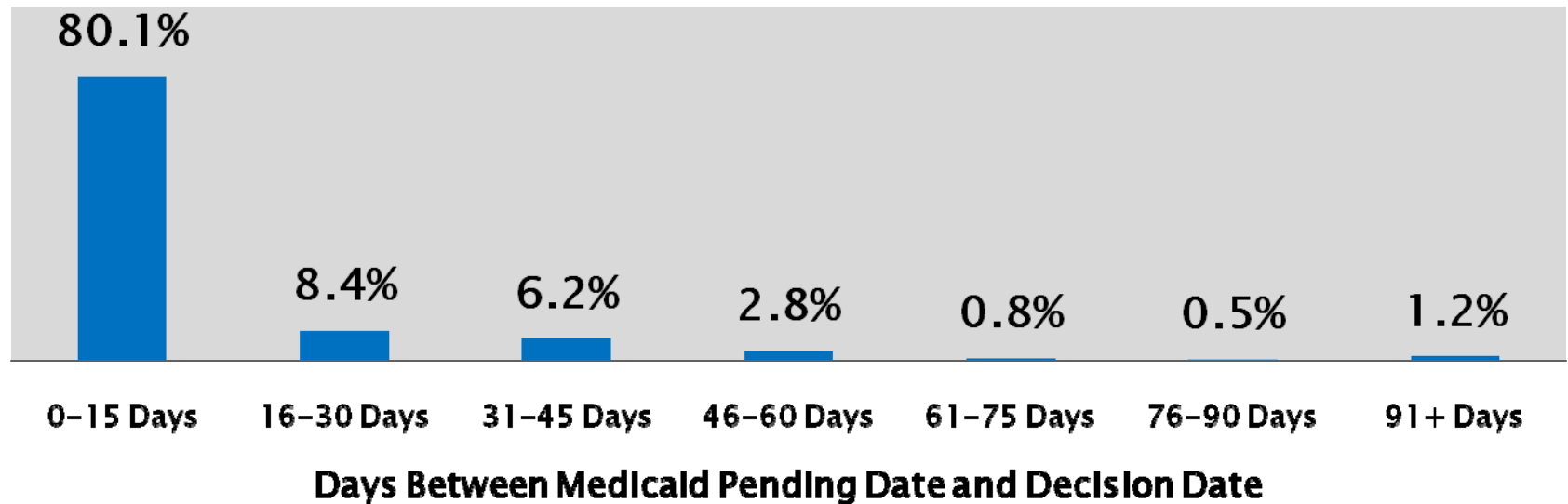
# Presumptive Eligibility for Pregnant Women

Data As of February 23, 2010

## Timeliness of Medicaid Decisions

(Medicaid Pending Date to Decision Date)

n=4,266\*

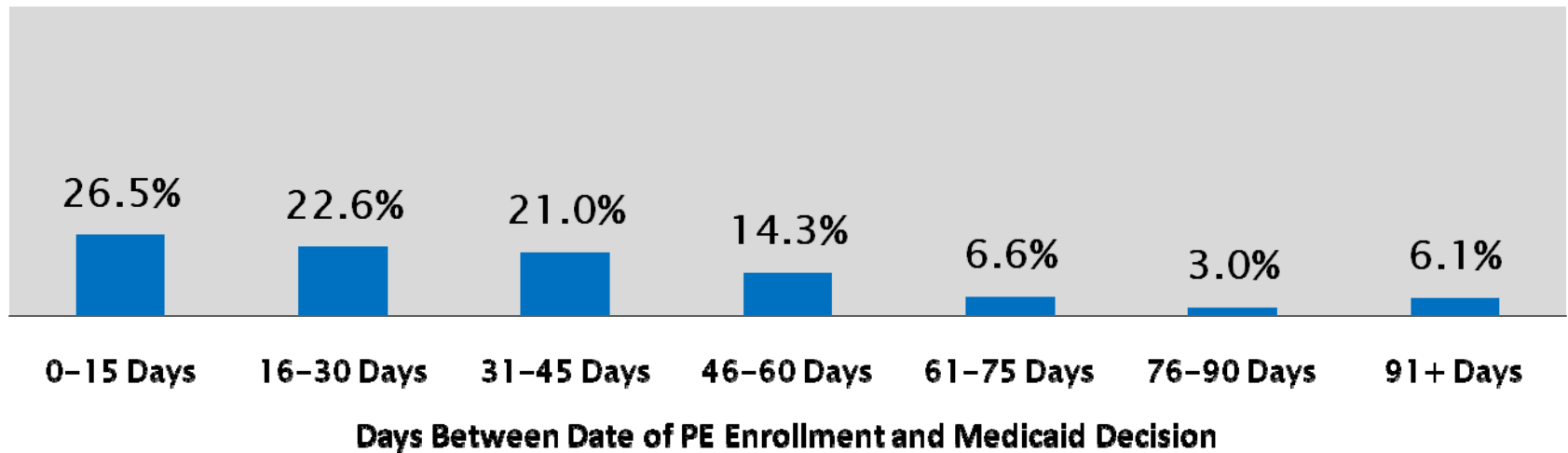


\*Due to implementation issues, some members do not have a valid pending date and were excluded from this analysis. A total of 5,693 PE members have had a Medicaid decision (approval or denial).

# Presumptive Eligibility for Pregnant Women

Data As of February 23, 2010

## Length of Enrollment in PE (PE Enrollment Date to Medicaid Decision Date) n=5,688\*



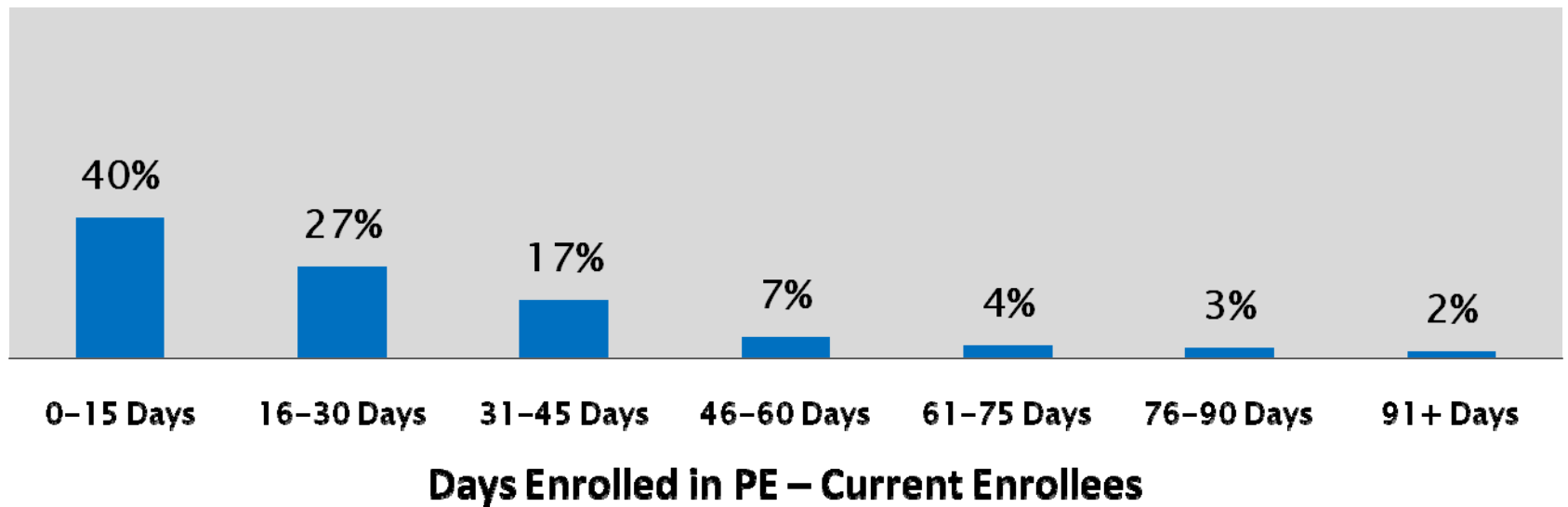
\*Due to implementation issues, some members do not have a valid pending date and were excluded from this analysis. A total of 5,693 PE members have had a Medicaid decision (approval or denial).

# Presumptive Eligibility for Pregnant Women

Data As of February 23, 2010

## Current PE Enrollees, Days Enrolled in PE

n=998



## Distribution of Medicaid Presumptive Eligibility Qualified Providers



Total = 462

Source: Indiana Office of Medicaid Policy & Planning, January 2010

# Partnering for a Mutually Beneficial Enrollment and Outreach Partnership

- **NE OB/GYN History**
  - Number of physicians
  - Patients served
  - Number of staff
- **How has Northeast OB/GYN benefited from the partnership?**
  - Increase the number of insured patients
  - Reduce otherwise uncompensated care
- **How have the patients being served at Northeast OB/GYN benefited?**
  - Better birth outcomes
  - Fewer c-sections and reduction in length of stay post-delivery (from a hospital perspective)
- **How has the community benefited from the partnership?**
  - Increased number sites to access PE enrollment
  - Increased number of providers to access care

# Partnering for a Mutually Beneficial Enrollment and Outreach Partnership, cont.

- Who conceived the partnership and brought the idea to fruition of partnering with the coalition to perform Presumptive Eligibility for Pregnant Women enrollment and Hoosier Healthwise follow up duties?
  - Community Action of Northeast Indiana/ Executive Director and Parkview Finance/Chief Financial Officer
- What are the enrollment responsibilities of the coalition staff in this model?
  - Perform PE online enrollment
  - Initiate and follow up on HHW application if that step is not already completed

# Partnering for a Mutually Beneficial Enrollment and Outreach Partnership, cont.

- What cross-training, if any, was necessary for clinic staff to undergo to create a successful process?
  - One staff person is designated to confirm pregnancy and make a referral to coalition staff to complete PE application
- Would you recommend this partnership model to other clinics and why?
  - Reduce otherwise uncompensated care
  - Increase access to care
  - Improve birth outcomes

# Implementing a Successful Process

- Is there a formal agreement? What are the terms of the agreement for performing PE enrollment and HHW follow up duties?
  - One coalition staff person stationed at clinic on a part-time basis
  - Financial reimbursement to coalition at a pre-determined hourly rate for part-time staff person

# Implementing a Successful Process, cont.

- Who were the critical players in implementing a successful process?
  - Practice Manager
  - LPN
- How many additional staff persons did the coalition hire?
  - One full-time staff person

# Implementing a Successful Process, cont.

- What resources did the coalition provide?
  - Hiring new staff person
  - Training additional staff in PE enrollment and HHW follow up process by the coalition director/lead agency
  - Implementing referral process at the clinic
  - Utilizing existing tracking mechanism for HHW application follow up
  - Leveraging existing partnerships critical to a successful enrollment effort, ie: DFR/FSSA

## Presumptive Eligibility Process

1. Community Referral

2. Scheduling Appointment

3. Confirmation of Pregnancy



4. PE Application

7. Hoosier Healthwise App Follow-Up

6. Hoosier Healthwise Application

5. Enrollment Broker

1. **Community Referral:** Partner with crisis pregnancy centers and other community agencies for referrals

2. **Scheduling:** Established a PE number separate from the office number to distribute throughout the community. Outreach Assistant schedules all appointments from community agencies

3. **Confirmation of Pregnancy:** is completed by LPN if the patient does not already have one from a community agency

7. **Hoosier Healthwise Follow-up:** Outreach Assistant works with the patient and the State to ensure that the HHW application is approved

4. **Presumptive Eligibility for Pregnant Women Application:** Outreach Assistant completes PE App and educates patient on entire process

5. **Enrollment Broker:** Patient calls enrollment broker and chooses provider

6. **Hoosier Healthwise Application:** Outreach Assistant completes HHW application and educates the patient on importance of following up

# Outcomes

- How many women served?
- How many new referral points created
- Application approval rate
  - Average HHW % (90%)

# Contact Covering Kids & Families of Indiana

- To obtain a copy of this presentation, please visit [www.ckfindiana.org](http://www.ckfindiana.org) or [www.indianaperinatal.org](http://www.indianaperinatal.org)
- To obtain a copy of the Health Coverage Handbook: Hospital Edition or for more information on the Hospital Service Product Line, please contact:  
Marci Toler, Director of Enrollment Assistance at 574-968-1654 or by e mail at [mtoler@ckfindiana.org](mailto:mtoler@ckfindiana.org)
- For more information on the Indiana School Health Network, please contact:  
Sondra Gardetto, Deputy Director at 574-968-1645 or by e mail at [sgardetto@ckfindiana.org](mailto:sgardetto@ckfindiana.org) or visit [www.inschoolhealth.org](http://www.inschoolhealth.org)