

**Modernization Initiative
Steering Committee**

Meeting Minutes
11/18/09

In attendance:

Directors: Gary Alexander, EOHHS, Craig Stenning, MHRH, Paula Parker, DEA (for Corrine Calise Russo)

Co-Chairs: Elizabeth Burke Bryant, Linda Katz

Members: Deborah Buffi, Nancy Pellegrino, Fred Sneesby, Elizabeth Earls, Tom Marcello, George Bowen, Gerry Bedrick, Leon Saunders, Jane Morgan, Donna Martin, Paula McFarland, Kim Merolla Brito, Donalda Carlson, Stephanie Geller, Art Schnure, Diana Beaton.

A. Intro:

Elizabeth Burke Bryant welcomed the Steering Committee and reviewed the agenda.

B. Update on survey to agency directors:

Debbie Buffi reported that the survey to EOHHS directors was sent out on 11/16/09 with an expected return date of 11/27/09. A copy of the survey and instructions was distributed. Linda Katz described the kinds of information that we will be able to get once completed. (See two handouts.) The results of this survey will be discussed at the 12/2/09 meeting of the full Committee.

C. Presentation of Other States' Efforts at Internet-Based Program Screening and Enrollment and Modernization/ Access:

Stephanie Geller presented the workgroup's research. (Members included: S. Geller, G. Bowen, G. Bedrick, A. Schnure.) Stephanie researched 24 states' online information, screening and/ or enrollment sites. The Center on Budget & Policy Priorities (CBPP) had completed a review of all states in 2005 (See p. 3 of handout "Key Sources") and another review in April 2009. See <http://www.cbpp.org/cms/index.cfm?fa=view&id=1414>

Handout #1: State Efforts at Internet Based Program Screening and Enrollment and Modernization/ Access

This is a summary of the states that were reviewed. The items that got two stars were the states that had gone the farthest and were more evolved (per Stephanie). And the states with one star were also good. Stephanie also called CBPP staff to discuss the review, but did not contact any individual states yet.

Key Findings:

- She found that a lot of states start with the DHS core programs (Food Stamps (SNAP), Cash Assistance (TANF), Medicaid/ SCHIP, and Child Care Assistance). States varied in what they had.
- Several states had eligibility screeners and some screeners saved the information if you actually proceeded to apply.

- Some states had good eligibility screeners but you still had to apply for programs the regular (paper) way.
- Some states had a pdf of the application on the website. There were two types: you could print it out and write on it and send it in to DHS or you could enter your information in shaded areas on screen and then print it out.
- Some states you allowed you to submit the application electronically, but the state had to print it out on their end.
- Some states had application online, where the information would go directly to the state's database.

Discussion:

Q. (G. Bedrick) Do any states have good statistics on what percentage of applicants use online application services?

A. (S. Geller) The goal isn't 100%. It's less than that. Some people will always prefer to apply in person or via telephone. It is important to allow multiple methods for applying so the programs are accessible to applicants who do not have Internet access, who have limited literacy or English language skills, or who simply prefer to discuss their needs with a case worker.

A. (N. Pellegrino) In Florida, they had 95% utilization for the SNAP program. They had bumps along the way and didn't start out that well, but when they engaged community partners, utilization improved.

(N. Pellegrino) The software other states used is available at our request, at no charge. Most state website benefit software that is paid for with Federal dollars is available to other states at no cost, other than the cost of customization (to our state's needs). We should analyze and consider this option.

(G. Bowen) However, many times the cost of those enhancements is more expensive than if it was to be developed or contracted. There are a many issues regarding software licenses and compatibility issues.

(E. Earls) The Community Mental Health Agencies have had some experience with Electronic Medical Records and PHI (protected health information). Different agencies use different approaches. I'd be happy to find out more information on their experiences.

Q. (P.McFarland) Was there any IT product or company that did a majority of this kind of work?

A. (S. Geller) Several states, especially the ones I've highlighted in the second handout built on Pennsylvania's original software and then edited it based on their own needs and had the benefit of lessons learned from states that had already produced something. We could certainly collect more information about the IT vendors other states have used that produced products that worked well or that were problematic. Other states, such as Utah did much of their development in-house.

Handout # 2: Summary of Select States (Pennsylvania, Wisconsin, Utah, W. Virginia)

R. Geller highlighted the information on the 4 states. (See handout)

- Penn.- Does a lot, but is large and unwieldy. Maybe you could select the programs you want to use instead of all the ones listed here.
- Wisconsin-This is a stripped-down version of Penn.'s COMPASS. There are fewer programs, so it's less cumbersome for users.

- o Utah – This is built on Wisconsin’s version. The user interface is not as visually pleasing or slick, but it has some unique features, like it connects to the state’s 211 database.
- o W. Virginia-This is also built on the Wisconsin model. They use community partners for Medical Assistance only.

See the last page of this handout for more information/ links. The second item is CBPP’s recent review of “Online Information about Key Low-Income Benefit Programs.” This may be useful for our further discussions.

Proposed Workplan/ Workgroups

Some discussion followed re: workgroups. It was decided that there were to be 5 workgroups, as follows:

1. Simplification/ Access Workgroups

A. For DHS Programs

The task would be- how to simplify access to programs in DHS. The Core Programs (Medicaid, SNAP, RI Works, Child Care Assistance) were discussed as a starting point. You need to streamline and simplify before you even get to the web part.

B. For MHRH Programs

Same task as above, but for MHRH programs.

Note: Behavioral health and DD should also include DHS and DCYF. We don’t want to do this in silos.

C. For LTC Programs

This workgroup would also work on simplification and access and include the recommendations (and some members) of the Global Waiver Task force workgroup on LTC. This should include DHS, DEA, and MHRH.

2. **Information Workgroup-** How do people get information about EOHHS programs? This group would begin the work of getting information on EOHHS programs and services and looking at the EOHHS agency websites and developing consumer-friendly information on the EOHHS website.

3. Medium and Long Term Planning Workgroup

This would be the group that would work on suggestions for the longer term aspects of this initiative, like researching and following up on the computer software, what other states have done and some of the planning.

L. Katz- It may be that some of the programs can’t be automated.

There was some discussion about having a LTC group. There is currently a LTC workgroup on the Global Waiver Task Force.

G. Alexander- LTC should be involved with this group (Modernization). Recommendations should come out of this group. The GW Taskforce LTC workgroup can be a bridge to this group. Maybe Maureen Maigret (co-chair of the LTC workgroup) can lead this Modernization LTC workgroup. Secretary Alexander emphasized he did not want silos.

L. Katz offered to work on writing better descriptions/roles for the workgroups. The information workgroup will look at the different EOHHS websites. We also have Sarah Griffin's help (United Way and Casey Foundation) for this project and also Stephanie Geller at RI Kids Count.

C. Carlson mentioned that a lot of work was done with the CAPs and LIHEAP, so we should look at that.

It was agreed that the larger group would meet quarterly.

Next Meeting of the Modernization Group: Dec 2, 2009 at the Arnold Conf. Center at 12 noon.