

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
P.O. BOX 942732
SACRAMENTO, CA 94234-7320



January 5, 1994

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons

Letter No.: 93-90

SUBJECT: COUNTY BOUNTY PROGRAM

In October 1992, the Department of Health Services (DHS) began developing the County Bounty Program, an incentive payment program to encourage increased reporting of other health coverage (OHC). The State contracts with the counties to pay \$50 for each eligible case newly identified with OHC, as reported via the Health Insurance Questionnaire. This is an update on the program.

To date, DHS has finalized contracts with 53 counties and made payments in excess of \$700,000 for the period of March through June 1993. Incentive payments for the July through September quarter were \$900,000. It should be noted that counties are not restricted in the use of these funds.

In August, DHS' Health Insurance Section started returning incomplete or erroneous Health Insurance Questionnaires (DHS 6155) which did not qualify for incentive payments. This provides an opportunity for counties to correct and resubmit the questionnaires. Corrected questionnaires will be reconsidered for incentive payment. More importantly, this allows counties to identify where errors occur and take corrective action. We are also providing county contract managers with reports showing the district and program source of processed questionnaires. These reports may be useful in determining which areas are less effective in reporting health insurance.

The Department's Health Insurance Section has developed a training program in health insurance identification and reporting. The training is approximately two hours long and includes information about related DHS programs, such as the Health Insurance Premium Payment program. If you would like your county to be included in the training schedule, please contact Ms. Susan Shafer of the Health Insurance Section at (916) 323-1974.

Recently, DHS mailed the enclosed letter to County Bounty contract managers summarizing the contract mandated plans for increasing health insurance identification. There were a number of innovative proposals which we felt should be shared with the other counties. We hope that you will find some of these suggestions useful.

All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialists/Liaisons
Page 2

There has been a small increase in health insurance identification rates since the County Bounty contracts became effective and we are hopeful this trend continues. During March 1994, DHS will evaluate the County Bounty Program for its effectiveness. If this assessment indicates there is a measurable increase in OHC, we will seek to continue the program. To this end, DHS has taken a number of actions to assist counties' efforts to increase health insurance identification.

We appreciate your support in implementing this program. If you have any questions or comments, please contact Ms. Shar Schroepfer of the Health Insurance Section at (916) 323-9948.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosure

M e m o r a n d u m

Date :

To : Frank S. Martucci, Chief
Medi-Cal Eligibility Branch
714 P Street, Room 1392

From : Payment Systems Division
591 North 7th Street, Second Floor
445-0416

Subject: All County Welfare Directors Letter (ACWDL) County Bounty Update

Attached is a proposed ACWDL which provides an update of the County Bounty Program. It has been reviewed by your staff and is ready for release.

If you have any questions or comments, please contact Chari Hug at 327-0492.

ORIGINAL SIGNED BY
Gerald B. Rohlfes, Chief
Third Party Liability Branch

Attachment

DEPARTMENT OF HEALTH SERVICES

THIRD PARTY LIABILITY BRANCH
BOX 2471
SACRAMENTO, CA 95812-2471
PHONE 323-9948



Dear County Bounty Project Manager:

In order to reduce Medi-Cal expenditures, the County Bounty contract requires each county to submit a plan to increase identification of other health coverage. Having now received all of the plans, we would like to share with you some of the areas county staff have identified as potential sources of additional insurance information.

All counties agree that training, monitoring of rejected Health Insurance Questionnaires (HIQs), and recognition of the role both the Aid To Families With Dependent Children (AFDC) and Medically Needy (MN) staff play in health insurance identification are major areas of focus. Other areas include:

- Annually mailing an insurance questionnaire to each AFDC and MN case (Butte and Santa Clara)
- Using quality control staff to review the HIQs for completeness and accuracy, and to conduct periodic case reviews to determine whether health insurance was overlooked (Humboldt, Merced, Sutter, Alameda, Fresno, Imperial, and Modoc)
- Placing posters in client waiting areas and interview booths as a reminder to the client to report health insurance and to the worker to ask about coverage (Kern)
- Conducting specific case reviews and adding this element to the Eligibility Workers' performance evaluations (Mariposa)
- Obtaining a signed release from employed clients authorizing county staff to contact the employer about possible health coverage if the client is unsure about available health coverage (Mendocino and Monterey)
- Establishing worker incentives to stimulate worker interest (Mariposa, Shasta, and Tuolumne)
- Posting a graphic display of total cash incentives received (Shasta)
- Enhancing intake and re-determination interviews to focus more attention upon health insurance reporting by applicants and recipients (Butte)
- Updating AFDC group videos and individual interview narrative forms to highlight the importance of reporting other health coverage information. (San Luis Obispo)

- Publishing a quarterly newsletter to advise staff of problem areas and progress in reducing errors (Shasta)
- Coordinating with the county health facility's financial office to share health insurance information

In reviewing the insurance reporting procedures, some counties have asked why it is necessary to submit HIQs for individuals covered by Kaiser or other private health maintenance organizations (HMOs). This health plan information is important in that it is used to print the specific plan, name, policy number, and scope of coverage information on the Medi-Cal card. This tells providers if they can be paid for a service or should refer the patient to the HMO. It will also be available to providers via the on-line eligibility verification system. The scope of coverage information is also used by the fiscal intermediaries to determine which claims should be cost avoided (i.e., not paid without a denial from the health plan). Without specific scope information, all categories of coverage except long-term care are cost avoided.

You may be interested to know that since March 1993, when County Bounty contracts became effective, the percentage of Medi-Cal beneficiaries identified as having private health insurance has increased slightly each month. This is particularly noteworthy in that, prior to April, the rate had been dropping steadily for over a year. Apparently, your plans to increase identification are working.

If you have any questions about the County Bounty program or health insurance identification, please call your County Bounty contact officer, or myself at (916) 323-9948.

Sincerely,

Original Signed By:

Shar M. Schroepfer, Chief
Identification Incentive Unit