

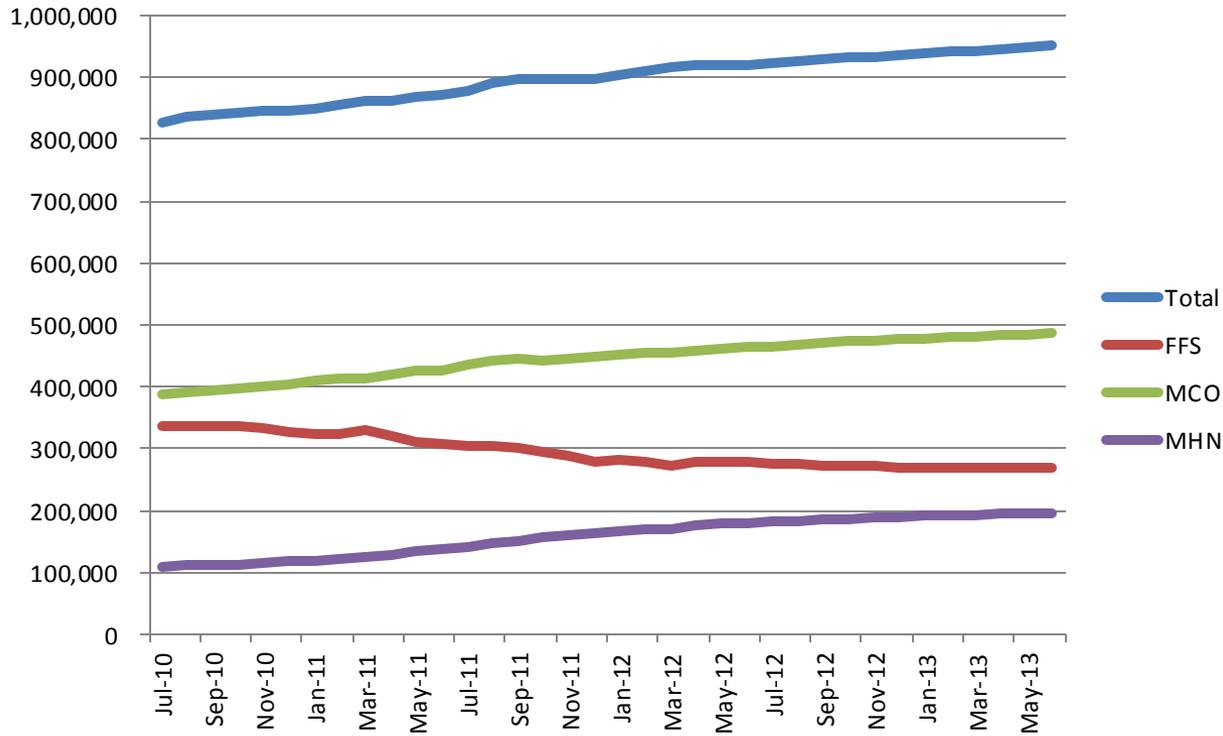
South Carolina Department of Health and Human Services

Medical Care Advisory Committee MCAC
August 14, 2012

John Supra, Deputy Director & CIO
Office of Information Management

Enrollment Update

**SC Medicaid Total Enrollment
July 2010 (Historical) to June 2013 (Projected)**



Enrollment Summary

•FY2012 Projection

- 920,268

•Preliminary Estimate – June 2012

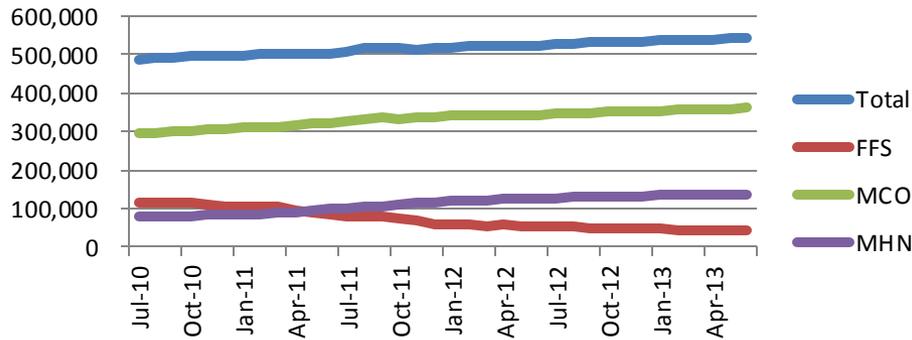
- 923,610
- 0.36% higher than projection

•Member Months Served

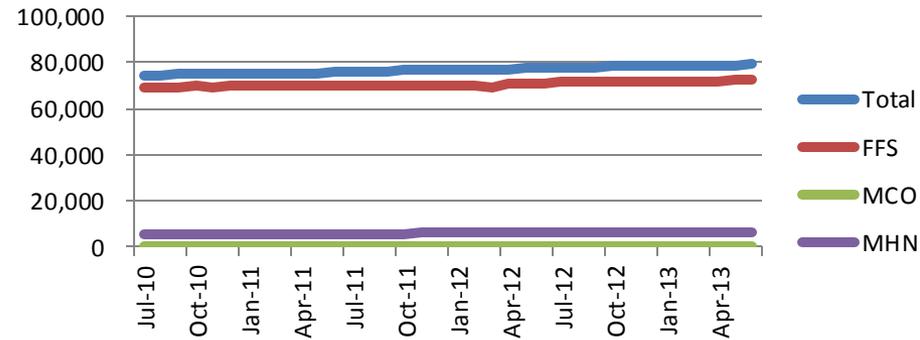
- 10,850,428
- 6.3% increase from FY2011

Enrollment Update

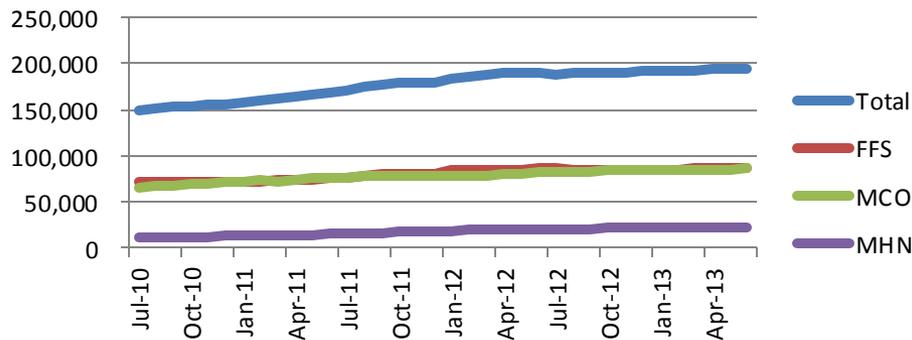
SC Medicaid Children Enrollment (July 2010-June 2013)



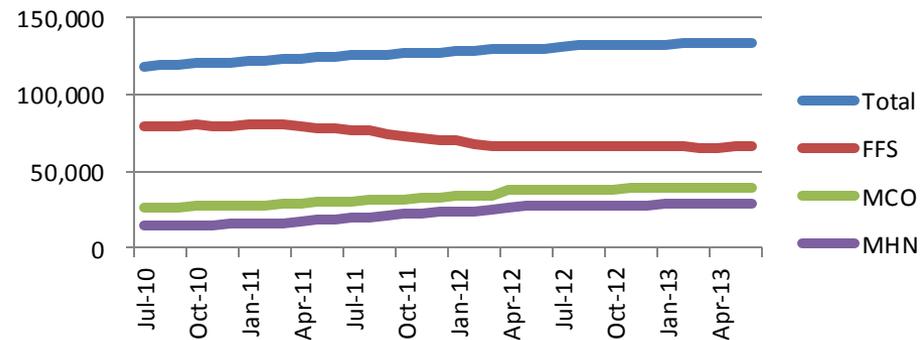
SC Medicaid Elderly Enrollment (July 2010-June 2013)



SC Medicaid Other Adults Enrollment (July 2010-June 2013)



SC Medicaid Disabled Adults Enrollment (July 2010-June 2013)



Beneficiary Support Center

- Partnership with United Way Association
 - Operator of 2-1-1 Services
 - Providing SNAP Recipient Support for DSS
- Operational July 2, 2012
- Initial Results & Critical Concepts
 - Reduced Average Time to Answer by 50%
 - Reduced Abandon Rate by 85%
 - Increased Use of Technology
 - Skilled based call routing
 - Automated callback (over 600 to date)
 - Innovative Approach to Training
 - Reduced training time from 30 days to 3 days
- Future Plans & Ongoing Improvement
 - Training on 2-1-1 Resources
 - Considering Expanded Hours of Services

Support Center Statistics

- *Reduced Weekly Call Volume*
 - 10,656 to 6,800
- *Reduced Average Time to Answer*
 - 201 seconds to 100 seconds
- *Reduced Abandon Rate*
 - 22.64% down to 3.42%

Express Lane Eligibility (ELE)

- Enrolling Eligible Children in FFS
 - Targeting by September 1, 2012
 - July SNAP/TANF Data
 - 23,200 not previously enrolled in Medicaid
 - 42,500 previously enrolled in Medicaid
- Regional Effort for MCO/MHN Enrollment
 - Driven by Community Focus & Capacity
 - Planning October through January
- Stakeholder Involvement
 - Statewide Planning
 - Regional/Local Planning
- Follow-up & Outcomes
 - Tracking MCO/MHN Selections
 - Tracking Services (wellness visits)

Provider Service Center (PSC)

- Expanded Responsibilities of PSC
 - One-stop Provider Support
 - Eliminate Silos, Confusion, Redundancy
 - Implement Tiered Support Model
- Operational June 25, 2012
- Initial Results
 - Initially Increased Provider Wait Times
 - Provided Clear Statistics
 - Reduced Claim Resolution Backlog
 - Forcing Standardization & Documentation
- Continuous Improvement
 - Complete Transformation in Provider Support
 - Shift Department's Role & Responsibility
 - Engage Providers Directly

Service Center Statistics

- ***Weekly Call Volume***
 - *Unknown to 5,000 per week*
- ***Improving Wait Times***
 - *Week of July 9 as much as 1 hour*
 - *Week of July 16 up to 40 minutes*
 - *Target less than 5 minutes*
- ***Claims Resolution Backlog***
 - *June 25 – 8,700*
 - *July 30 – less than 6,800*

Provider Enrollment

- Implementation Delayed
 - Operational planning was not complete
 - Adequate testing of processes was not planned
- Updated Schedule
 - Implemented for all new Medicaid providers by December 1, 2012
 - Testing with Providers in October & November
- Increased Coordination with State Agencies