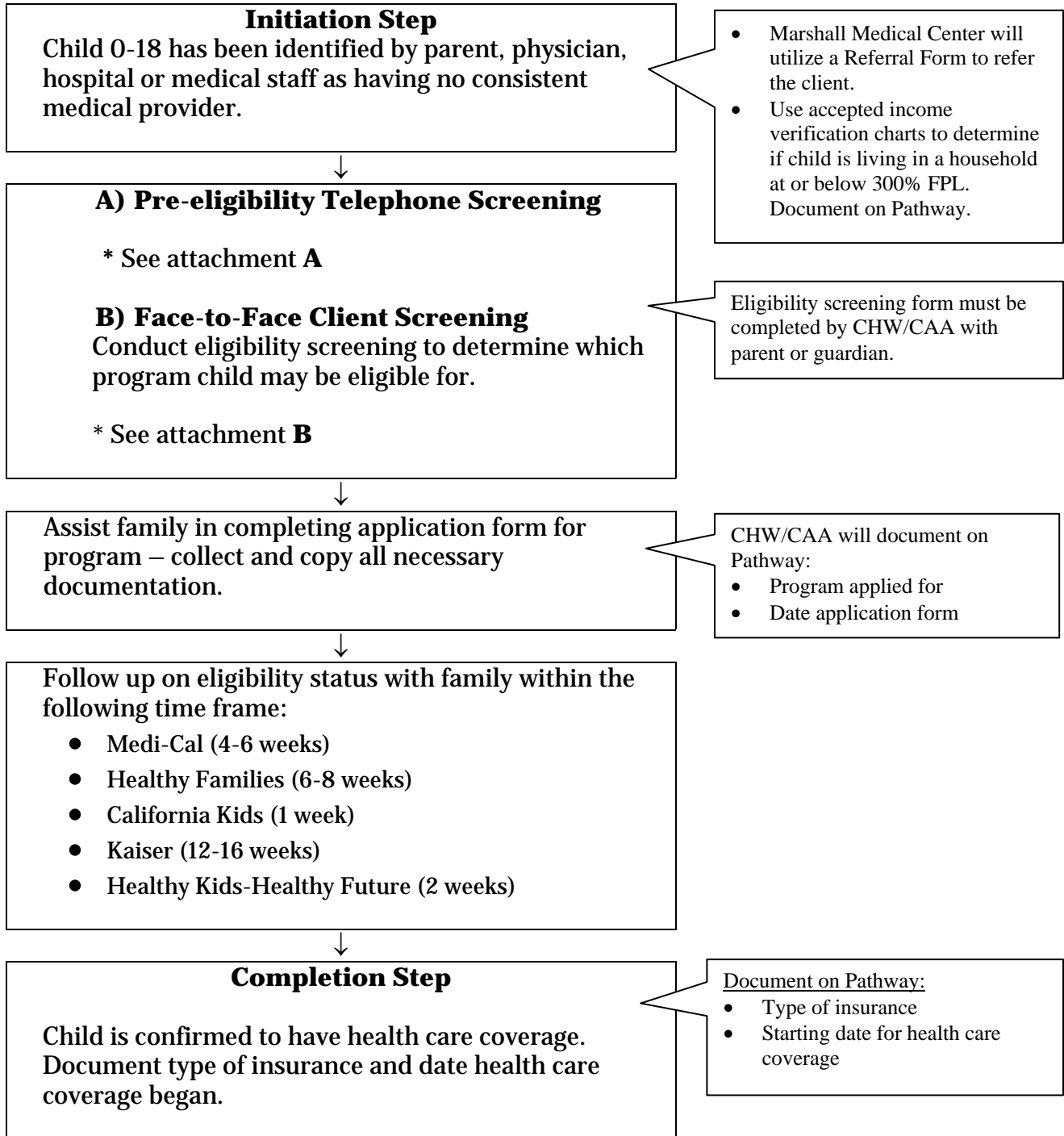


## ACCEL Care Pathway Securing Health Care Coverage





## Securing Health Care Coverage Care (SHCC) Process as of July 31, 2007

### BACKGROUND

The SHCC pathway was reviewed and refined in preparation for its transition from a manual/paper process to a protocol that will manage clients using InfoCom's iREACH electronic application. The group that reviewed and refined this pathway include:

- Sandra Dunn - Accel Program Director
- Kim Dickson - Accel Program Manager
- Kirsten Rogers - EDC PHD Supervising Health Education Coordinator
- Trever Lee - IT Project Manager
- Maria Chaves - Business Process Consultant
- Vicki Cowley -- Accel Supervisor
- Nancy Hyzer - Accel Community Health Worker (CHW)
- Veronica Bernal-Strauss - Accel Community Health Worker (CHW)

Important points to consider are:

- This narrative is accompanied by process maps (in PowerPoint and Visio) and milestone and instruction documents (in Excel) for programming into iREACH.
- The process maps and milestones and instructions for programming into the iREACH application were developed from the perspective of the Community Health Worker (CHW) who has the primary responsibility for managing clients through the pathway.
- Process maps were developed based on existing processes and refinements made accordingly. The process maps do not define data entry points into iREACH.
- The milestones and instructions document describes data entry and client management interfaces still to be programmed into iREACH. No user experience analyses were performed to determine optimum navigation through the iREACH application.
- Assistance would be provided to Accel partners (at a later date) to develop and customize their Internal clinic operations for interface with the iREACH application as programmed per the milestones and instructions identified.

### PATHWAY PROCESS STEPS

#### A. Identification of child needing health care coverage

Several system entry points facilitate the potential identification of a child needing health care coverage. At each of these entry points, the parent/guardian is connected to a Community Health Worker (CHW) to determine if the child is eligible for the Accel program and assistance to obtain health care coverage.

System entry point(s)	Description of EDC PHD internal operations	Operational principle(s)
Parent/guardian self identifies from information gained at health fairs, word of mouth, advertisement, etc.	<ul style="list-style-type: none"> <li>• Parent/guardian calls EDC PHD               <ul style="list-style-type: none"> <li>○ Placerville (800-388-8690)</li> <li>○ South Lake Tahoe (530-573-3171)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• The CHW who manages the SHCC pathway must have be a CAA (Certified Application Assistor).</li> <li>• A CHW will make up to</li> </ul>
School forms indicating child is uninsured	<ul style="list-style-type: none"> <li>• School forms are sent to EDC PHD for follow up by CHWs               <ul style="list-style-type: none"> <li>○ Placerville schools - N. Hyzer, CHW.</li> <li>○ If the client is Spanish speaking, V. Bernal-Strauss will follow-up with the client</li> </ul> </li> </ul>	

System entry point(s)	Description of EDC PHD internal operations	Operational principle(s)
	<ul style="list-style-type: none"> <li>○ SLT schools - A. Friend, CHW</li> </ul>	<ul style="list-style-type: none"> <li>three efforts to contact parent/guardian to either to make initial contact or to return their message.</li> <li>• If no contact is made, the CHW makes no further attempts to call the parent/guardian and the case is closed.</li> <li>• V. Bernal-Strauss contacts and manages Spanish speaking clients through the pathway.</li> </ul>
Provider/facility sites: a) Barton Health System incl. Barton Memorial Hospital, Barton Community Clinic, and Tahoe Family Physicians b) Marshall Medical Center system including its ER and primary care sites (MCPC) c) Provider offices & clinics including EDC CHC, Tribal Health, and Divide Wellness	<ul style="list-style-type: none"> <li>• Provider/facility staff fill out referral form and obtain consent via parent/guardian signature.</li> <li>• The referral form with consent is faxed to               <ul style="list-style-type: none"> <li>○ Placerville @ 530-626-4277</li> <li>-V. Cowley and/or staff sitting next to confidential fax pick up the forms. She categorizes the various referral forms and makes a pre-screening call to assess the client need - healthcare coverage vs. need for medical home.</li> <li>-For SHCC, referrals are given to N. Hyzer and V. Bernal-Strauss to follow up.</li> <li>○ SLT @ 530-541-8409 which is the Public Health Clinic</li> <li>-A. Friend picks up the forms for follow up.</li> </ul> </li> </ul>	
Other Care Pathways <ul style="list-style-type: none"> <li>• Obtaining a Medical Home (OMH)</li> <li>• Pediatric Mental Health Consults (PMHC)</li> </ul>	<ul style="list-style-type: none"> <li>• A critical step in moving the child forward in the OMH and PMHC pathways is determination of health care coverage.</li> <li>• If the child does not have any or adequate health care coverage, the OMH and PMHC pathways are stopped and the SHCC pathway is opened. Only after the child has had an application filled to obtain health care coverage or has confirmation of health care coverage can the OMH and PMHC pathways move forward.</li> </ul>	
List of children on CHDP (Child Health & Disability Prevention Program aka Gateway)	<ul style="list-style-type: none"> <li>• N. Hyzer, CHW - Placerville, and A. Friend, CHW - SLT, receive a list of children on CHDP on a monthly basis.</li> <li>• "Gatewaying" is the process conducted through the state computer system which grants an uninsured child within the first year of life full Medi-Cal coverage and temporary Medi-Cal coverage if the child is older than one year old.</li> <li>• If the child is over one year, N. Hyzer, CHW - Placerville, and A. Friend, CHW - SLT, will make contact with the parent/guardian to begin the SHCC pathway.</li> </ul>	

**B. Pre-eligibility Telephone Screening: Screening A**

Once the CHW has been able to contact the parent/guardian via phone, the CHW will perform a pre-eligibility screening for a) the Accel program and b) a first pass determination if the child might be eligible for publicly funded or gap health care coverage sponsored by Accel. Screening factors include:

- Family size
- Child and/or children information including names, birthdates, and country of birth
- Financial status including gross monthly income and how often paid
- Any existing health care coverage of family members including previous or current Medi-Cal coverage
- Medical home status ie PCP of child and sibling(s), if any



Based on the above factors, the CHW performs an initial calculation of the family's federal poverty level (FPL). If it seems that the family's financial status is within 300% FPL, the CHW relays the following information to the parent:

- possible health care coverage plans that the parent/guardian's child and/or children may qualify including Medi-Cal, Healthy Families, Kaiser Child Health Plan, CaliforniaKids, and Health Kids-Healthy Future; and
- that the EDC PHD CHW does not determine eligibility but only assists with the application process.

If the parent/guardian is interested, the CHW sets up a face to face application appointment with the parent/guardian which can either be onsite or offsite. The parent/guardian is given the list of required documents to fill out the health care coverage application at the face to face appointment:

- Child or children's birth certificates
- Most recent (1 month's) paycheck
- Evidence of child support or other forms of income
- Check/money order for premium payments for CaliforniaKids (2 months)
- If self employed, must bring a) profit/loss form and b) 1040 forms + Schedule C
- If normally employed, must bring a) 1040 tax form

**C. Activities between Screening A and Screening B (face to face appointment)**

If the period prior to screening B allows, the CHW may send an information package to the parent/guardian summarizing the necessary documents to bring to the face to face appointment, appointment information including date, time, and location.

The CHW will call the parent/guardian 1-2 days prior to the face to face appointment to:

- remind the parent/guardian of the appointment; and
- to assess for any barriers that may prevent the parent/guardian from attending the appointment. The CHW assists the parent/guardian make alternate plans if there are barriers identified or reschedules the appointment.

**D. Face to Face Application Appointment: Screening B**

If the parent/guardian does not show up at the face to face application appointment, the CHW will contact the parent/guardian and make another appointment and assess for any appointment barriers. (Note: If the CHW cannot contact the parent/guardian after three tries, the CHW closes the case.)

The CHW will contact the parent/guardian 1-2 days prior to the face to face appointment to remind them of the appointment. If the parent/guardian incurs 2 appointment no shows, the case is closed.

At the face to face application appointment, the key tasks performed by the CHW are a) to review all documentation to verify eligibility for the Accel program and for health care coverage options and b) assist the parent/guardian in filling out the health care coverage option appropriately.

- If the parent/guardian did not bring all required documents, the CHW assists the parent/guardian to fill out the application as much as possible and assesses if the parent/guardian can fill out the rest of the application independently.
- The CHW may schedule another follow-up appointment the same week for the client to bring in the required documentation and to complete the application.
- If the parent/guardian can fill out the application independently, the CHW provides instructions on completing the application.
- The CHW provides an addressed and stamped envelope to the parent/guardian and instructions to mail the application at a pre-agreed timeframe.

Notes about health care coverage options:

- Healthy Kids and Healthy Families applications are submitted electronically
- CaliforniaKids has its own envelope with stamp.
- Kaiser has its own self addressed envelope.

**E. Checking the status of the health care coverage status**

The CHW will call the parent/guardian to check/remind them to mail the application and also to ask if they have any other questions.

In addition to checking in with the parent/guardian, the CHW can also check health coverage application status (approved vs. denied) based on the following timeframes:

- Medi-Cal - check MEDS in 4-6 weeks
- Healthy Families - call 1-800#
- CaliforniaKids - the 15<sup>th</sup> of the following month
- Healthy Kids - immediately
- Kaiser - call toll free number within 8-12 weeks

If the application was denied, the CHW works with the parent/guardian to:

- Correct incomplete or incorrect data on the application
- Send program review form
- Send whole new application form

If the application was denied without any recourse, the case is closed.

If the application was approved, the CHW documents the type of health care coverage, the health care coverage number, and the coverage effective dates. The CHW will also send the parent/guardian an information package containing the following:

- A list of PCPs accepting their child’s health care coverage
- Information on obtaining a medical home (getting established with a PCP) and how to utilize a medical home

**F. Health Care Coverage renewal**

If the application was approved, the CHW sets a date two months prior to the end of the coverage effective date during which he/she will call the parent/guardian to begin the process for health care coverage retention.

**G. Check referral source**

Finally, the CHW checks the original referral source for the pathway. If the original referral source was either PMHC or the OMH pathways, the CHW will take the following actions:

- OMH pathway

Child location	Billing information sent by 10 <sup>th</sup> of each month
Placerville	Marshall Billing Department
SLT	BCC Financial Advisor

- PMHC pathway: CHW sends health care coverage information to Mental Health Worker (MHW)

**I. The pathway is complete.**