

**Testimony Regarding Agency Performance Oversight
for the Department of Health Care Finance
District of Columbia Council Committee for Health
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On behalf of the Legal Aid Society of the District of Columbia,¹ we submit this testimony to the Committee on Health to express our opposition to the D.C. Department of Health Care Finance (DHCF)'s policy requiring D.C. Health Care Alliance (Alliance) beneficiaries to conduct a face-to-face interview every six months in order to retain their coverage. Due to the extremely long wait times associated with conducting this face-to-face interview, scores of District residents are unable to retain their health coverage at recertification. As a result, program costs are increasing and beneficiaries are suffering great hardship as they attempt to get and keep their benefits. **We therefore urge the Council to eliminate this requirement and require DHCF to develop a policy that addresses program integrity concerns without overly burdening beneficiaries.**

DHCF's own data indicates that, in each month over the course of 2015, between 56 percent and 71 percent of those who were due to recertify for the Alliance that month were **unable** to do so successfully.² See DHCF FY2017 Budget Presentation for MCAC, March 2016, at slide 33, at https://dhcf.dc.gov/sites/default/files/dc/sites/dhcf/publication/attachments/DHCF%20FY2017%20MCAC%20Budget%20Presentation%203-2016_1.pdf. In DHCF's responses to questions posed by this Committee, the agency acknowledged that "a considerable proportion of the number of Alliance beneficiaries who were terminated each month were re-enrolled with their previous MCO within 60 days; for some MCOs in some months, as many as 50 percent of new enrollees in a given month were those who had been terminated within the past 60 days but later reenrolled." DHCF Answers to the Committee, at page 224. The fact that so many terminated Alliance beneficiaries regain coverage suggests that the terminations are not people who have abandoned the process (based on ineligibility) but instead are eligible people who cannot overcome the barriers to renewal, including the six month, face to face interview requirement. And when these individuals lose their coverage (even for a relatively short period of time), they can lose access to essential health care services thus jeopardizing their health and, potentially, leading to higher costs when they return to the rolls with untreated conditions.

¹ The Legal Aid Society was formed in 1932 to "provide legal aid and counsel to indigent persons in civil law matters and to encourage measures by which the law may better protect and serve their needs." Over the last 80 plus years, tens of thousands of the District's neediest residents have been served by Legal Aid staff and volunteers.

² In the agency's responses to the Committee, they provide figures for the number of enrollments and terminations in September 2012, September 2013, September 2014 and September 2015. Then, the agency provides a figure for the percentage of individuals terminated from coverage (of total enrollees) in a given month. DHCF Answers to the Committee, at page 224. These figures show that total enrollment in the program is relatively stable at a given point in time. The figures do not, however, show how many individuals who apply in a given month are unable to recertify in six months.

Our experience serving many Alliance beneficiaries suggests that this dramatic drop-off at recertification is due to the significant obstacles these beneficiaries encounter when visiting D.C. Department of Human Services (DHS) Service Centers. The first of these obstacles is extraordinarily long line lengths and wait times. Legal Aid—along with other legal services providers—has previously interviewed consumers at DHS Service Centers and found that over a third of consumers across three Service Centers reported arriving between the hours of 4 a.m. and 6 a.m. and waiting for several hours in the hopes of being seen. At the Taylor Street Service Center—which serves the majority of Alliance beneficiaries—this number was a striking 54%. *See* Testimony for Public Oversight Hearing on the Performance of the Economic Security Administration of the Department of Human Services District of Columbia Council Committee on Health and Human Services by Wes Rivers, DC Fiscal Policy Institute and Chelsea Sharon, Legal Aid Society of the District of Columbia (March 12, 2015), at <http://www.dcfpi.org/wp-content/uploads/2015/12/Joint-ESA-Oversight-Testimony-from-Legal-Aid-and-DCFPI.pdf>.

Our clients take the extraordinary step of lining up this early because, otherwise, they are often turned away due to the Service Center being at capacity. For example, Legal Aid helped one Alliance beneficiary who was unable to be seen on any of her three visits to a DHS Service Center over a two-month period. Despite arriving before 7:00 a.m. on each visit and waiting for several hours, she was repeatedly told that the Service Center was at capacity and she could not be seen to conduct her face-to-face interview. As a result, she went without health coverage for several months before seeking help from Legal Aid.

Another Legal Aid client—a mother of three—encountered similar obstacles. She visited a Service Center on three separate occasions over a one-week period to attempt to conduct the required face-to-face interview. Because she had to drop off her children at school, she was unable to arrive before 9:00 a.m., making it nearly impossible for her to be seen. On each visit, she was turned away due to the Service Center being at capacity and was only able to recertify her coverage once Legal Aid intervened.

The lengthy wait times at Service Centers make it nearly impossible for individuals with jobs to dedicate the time necessary to conduct the face-to-face interview necessary to recertify their coverage. For example, Legal Aid helped one Alliance beneficiary who could not get a day off of work until the last day of his certification period. When he arrived at the Service Center, he was told he could not be seen and would have to try again another day. Unable to return again because of his work schedule, his coverage terminated. Although his coverage was ultimately restored, the same beneficiary is again at risk of termination six months later due to similar problems completing the recertification requirements.

The face-to-face interview requirement also places a significant strain on limited agency resources. DHS is undergoing a business process improvement plan that seeks to move more and more customer interactions out of the Service Center, encouraging customers to submit documents by mail or by fax or to conduct interviews by telephone. Yet, the face-to-face interview process makes this goal impossible to fully realize. Indeed, Legal Aid's previous monitoring of the Service Centers found that 40% of those interviewed at the Taylor Street Service Center were there to conduct their face-to-face interviews for Alliance. Unless the

Alliance recertification requirements are changed, Service Centers will continue to feel the strain of consumers seeking to complete the required face-to-face interview.

Moreover, Legal Aid believes that the face-to-face interview requirement serves very little practical purpose. The requirement was first proposed in 2012, about two years after Medicaid expansion moved all immigration-eligible individuals out of the Alliance program. The emergency rulemaking that implemented the face-to-face interview requirement recognized as much, noting that, with Medicaid Expansion, only “[n]on-qualified aliens, who do not meet the citizenship requirements for the Medicaid program” were now eligible for Alliance. DC Register, Vol. 59, No. 27, at 08208 (July 6, 2012). Seemingly in light of this, DHCF found that emergency action was

necessary for the immediate preservation of the health, safety, and welfare of the Alliance beneficiaries by ensuring that all applicants seeking enrollment or recertification in the Alliance, are residents of the District and meet the appropriate eligibility criteria. By taking emergency action, these proposed rules provide safeguards that are necessary to preserve the availability of resources for the proper administration of the Alliance and afford greater integrity and accuracy in the enrollment process.

Id. Legal Aid sees no reason to believe that this group of individuals—solely by virtue of their immigration status—should be viewed as particularly prone to committing fraud and in need of more rigorous verification requirements.

Conclusion

DHCF is currently conducting an analysis to determine the root causes of the alarming statistics concerning Alliance terminations and to consider potential policy reforms. We applaud these efforts and urge the agency to eliminate the face-to-face interview requirement for Alliance beneficiaries and move to the same twelve-month certification period required of other individuals receiving health coverage in the District. Furthermore, the agency should engage with community stakeholders to look for policy alternatives that would balance legitimate program integrity concerns with respect for the needs of eligible District residents.