

Program #40016 - Medicaid/Medicare Eligibility

2/24/2014

Department:Health DepartmentProgram Contact:Christy WardProgram Offer Type:Existing Operating ProgramProgram Offer Stage:As Requested

Related Programs:

Program Characteristics: Backfill State/Federal/Grant, In Target

Executive Summary

Medicaid Enrollment assists uninsured and under-insured Oregonians gain access to health services by providing application and enrollment assistance and advocacy to families and children applying for state and federally provided Medical and Dental Coverage as well as other forms of assistance. Additionally patients are screened for eligibility to sliding scale fees for services received, if they are unable to obtain coverage otherwise. Last year, more than 13,000 clients were screened and 4,000 children insured.

Program Summary

The Medicaid Enrollment program provides outreach and education efforts which increase the number of clients who complete the OHP enrollment process; access to health care services (particularly for pregnant women and children); and ensures continuity of coverage at re-certification. The program aims to provide dignified access to health care for all citizens in collaboration with existing Multnomah County services, and addresses the Basic Needs strategy to provide access to care, by securing insurance coverage for eligible individuals.

Performance Measures								
Measure Type	Primary Measure	FY13 Actual	FY14 Purchased	FY14 Estimate	FY15 Offer			
Output	Annual number of clients screened	13,694	14,000	14,000	14,000			
Outcome	Uninsured children in Multnomah County insured through program	3,793	4,000	3,500	4,000			

Performance Measures Descriptions

- 1) Output: Reflects service volume.
- 2) Outcome: Uninsured children insured as a direct result of Medicaid Enrollment Program.

Legal / Contractual Obligation

The Medicaid Enrollment Program is on contract with the State Division of Medical Assistance Programs (DMAP) to provide application and enrollment assistance to all OHP/Medicaid eligibles including education regarding managed health care. Information shall include establishing a Date of Request (DOR) or effective date of coverage, managed medical, dental, and mental health care, covered services (including preventive and emergent), client rights and responsibilities, and the grievance and appeal process.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2014	2014	2015	2015
Personnel	\$242,281	\$968,924	\$317,255	\$955,138
Contractual Services	\$0	\$2,800	\$0	\$3,150
Materials & Supplies	\$14,584	\$594	\$3,071	\$11,706
Internal Services	\$31,677	\$176,295	\$105,120	\$105,976
Total GF/non-GF	\$288,542	\$1,148,613	\$425,446	\$1,075,970
Program Total:	\$1,437,155		\$1,501,416	
Program FTE	3.00	11.55	4.00	11.46

Program Revenues								
Indirect for Dept. Admin	\$73,656	\$0	\$73,286	\$0				
Intergovernmental	\$0	\$0	\$0	\$39,360				
Service Charges	\$0	\$1,148,613	\$0	\$1,036,610				
Total Revenue	\$73,656	\$1,148,613	\$73,286	\$1,075,970				

Explanation of Revenues

Medicaid/Medicare eligibility receives funding from the Division of Medical Assistance Programs (DMAP) which provides compensation to eligible Federally Qualified Health Centers (FQHCs) for outreach activities. DMAP provides compensation through calculating a rate that is equal to 100% of allowable, specific direct costs according to OAR 410-147-0400. The revenue for FY15 is based on actual expenses from FY2014. DMAP disallows the cost of supervision, office support and interpretation services. General fund provides funding for expenditures not covered by state funding.

DMAP: \$1,036,061

County general fund: \$425,446

Outreach & Eligibility grant from CoverOregon: \$39,360

Significant Program Changes

Last Year this program was: 40016 Medicaid/Medicare Eligibility