



# RI Department of Human Services

## Responses to CEC November 2022 Follow Up Questions

### Rhode Island Works

1. Please provide the number of SSI Children that reside in a RI Works household that is now eligible to receive the RI Works clothing allowance benefit.

**Answer:** The total number of children is 371.

### Child Care Assistance Program

1. Please provide data on CCAP slot capacity and how many slots are currently open.

**Answer:** As stated during caseload, the Department has collected point in time data. The last survey sent to child care programs that asked about children enrolled was for ARPA stabilization in August 2021. At that point in time, there was a capacity of 32,431, which was total slots in centers and family child care centers. All of the stabilization recipients were required to fill out this survey and showed that there are 20,240 children enrolled in these slots, which shows capacity at about 62%. With the creation and implementation of the RISES system, one of the goals is to be able to capture this data from providers through the licensing system of record on a more regular basis, as well as formalize a system for separating CCAP capacity from licensed capacity to more easily track that data.

2. Do providers collect a co-pay when a child is absent under the current absence policy?

**Answer:** The Department does not change their payment when a child is absent and the co-pay is still expected to be collected. However, it is up to the provider whether they collect it. It is not DHS policy to enforce collection of copays. The Department continues to pay its portion and the family continues to pay their portion.

3. Please explain the growth rates utilized for CCAP projections.

**Answer:** The first six batches in FY 2023 data are actuals. The projections begin by using the percentage increase from the same point in time last state fiscal year to project the next batch payment. The total month-over-month average growth for FY 2022 was 0.5%. Data shows a 7.7% increase in the average number of children from the 2<sup>nd</sup> to the 4<sup>th</sup> quarter of FY 2022. Additionally, there has been a 12.1% increase in the first six batch payments of FY 2023 compared to FY 2022. Using Excel forecasting functions, coupled with the month-over-month average, an average of 1.1% month-over-month growth was applied throughout FY 2023. For FY 2024, this growth was decreased to 0.8%.

This data, in addition to the assumptions regarding the legislative changes listed below, support the projections for FY 2023. In addition to the expected growth based on historical available data, assumptions were made based specifically on the following factors:

1. FPL increase:
  - a. DHS has seen an immediate impact to caseload due to this legislative change. While the Department had anticipated an increase of approximately 282



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- children, recent analysis assumes that families who had been private payers will more than likely raise traditional utilization rates as inflation is at an all-time high.
- b. Likewise, the expanded exit limit for transitional CCAP will proportionally increase caseload.
2. CCAP for College:
    - a. The Department anticipates increased demand with the roll out of the pilot expansion to include families with combined college credit and work hours meeting the minimum 20 hour approved activity threshold. This will allow families who meet the income eligibility standards to combine part time college credit hour needs with part time work hours needs which better reflects the schedule and needs of student parents. Qualitative feedback from the colleges report that aggressive marketing of this program when the changes to the RIBridges system to support the combined college and work hours occur there will be an increase to the caseload by more than the 20 families originally budgeted.
  3. RIW:
    - a. DHS has seen a large increase in the number of RIW children utilizing child care in the first six batches. This coincides with the change in RIW family structure of one adult, multiple children.
    - b. The Department is making the assumption that this family structure will have an even greater impact to caseload when the backlog of applications is cleared, and more families are approved for RIW.

While it is too early to compile the sufficient data to quantify the impact of the above, the Department feels the qualitative analysis supports the current estimate.

### Medicaid Caseload PHE Readiness

1. How is DHS Evaluating DHS operations staff requirements for PHE?

**Answer:** DHS has completed an initial review of operations staff requirements against annual tasks to determine required staff levels to meet state and federal program requirements. This review includes each program area's required tasks with associated time required to complete each task against the state or federal processing requirements. DHS staff completed a model of this analysis for tasks conducted by Eligibility Technicians I, II Lobby and Eligibility Technician IIIs. DHS continues to refine and evaluate the needs of the Department and is conducting further assessments for the areas of Rhode Island Works, Child Support, Social Case Worker tasks for Conflict Free Case Management/Person Centered Options for Counseling and Quality Reviewer tasks for SNAP and Medicaid Programs.

The initial analysis was used to project the staffing needs for the PHE that the agency received additional FTE's (+20), funding to fill to DHS FTE count, and staff augmentation approval in the last budget session. The staff augmentation RFP has been sent to Federal partners for approval and once received, the RFP will be posted.



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2. How is DHS managing the assignment of new work with existing backlogs?

**Answer:** DHS is using the above methodology to determine timeliness of tasks in the system and prioritize aging tasks. DHS rotates assignments during work hours as appropriate and uses overtime to target growing backlogs.

In addition, DHS is onboarding 40 ETs to support PHE preparation and unwinding and target specifically PHE Medicaid processing that are not able to be passively renewed.

The onboarding of the net new 40 utilizes an open floating Senior Casework Supervisor position; repurposes vacated Supervising Eligibility Technician position as a floating assignment; and brought in an additional supervisory structure under our 3-Day Rule authority.

The 40 new ET are in probation periods for 6 months and require supervisory approval of all actions on a case (known as ETSA status). For a team of 10 ETSA's a supervisor may have up to 100 cases to review, approve, correct, or run eligibility per day. This is in addition to their other supervisory duties, which are also compounded as a result of the inexperience of the staff. In order to further support the teams, DHS is proposing to assign 2 Eligibility Technician IIIs to support the team. Their role will be to work the most challenging cases, coach ETIs through a new type or difficult case and run the final eligibility screens and accept additional assignments from the supervisors. These positions alleviate the daily burden of the supervisor but will not take over the supervisory approval. The DHS supervisory operations team in total will share in the review, approval and authorization of the ETSA cases.

Clerical support will be provided to the team through a Principal Clerk (PC) and Customer Service Aide (CSA). Both these positions are temporarily assigned within the PHE team. The chief clerk and office manager working from the Hazard building will provide supervision of the Barry Hall clerical team, which is the temporary location for the PHE team. Overall administrative support will be under the Assistant Administrator of Operations.

As stated previously, the team's focus is the preparation and unwinding of PHE. They will not be included in the Virtual Call Center (VCC) rotation. Nor will they be included in the overtime assignments. If needed, they will be offered overtime assignments during the same timeframe as the larger team. These assignments will be a continuation of their primary assignments. PHE preparation and unwinding is not solely the responsibility or assignment of this team; PHE preparation and unwinding will be a department wide effort.