

San Mateo County's Re-Tooling: Health Insurance Tele-Center

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EXECUTIVE SUMMARY

In response to a growing workload, San Mateo County re-tooled its Health Insurance Tele-Center (HIT) which in turn led to an improvement in their service delivery model of public benefit programs and services. The Employment and Human Services Department (EHSD) of Contra Costa County wants to increase efficiencies in service delivery model by improving customers' experience, even in the midst of increasing workloads, decreasing resources, and increasing program regulatory complexity. Leveraging technology, redesigning business processes, and developing metrics and reports are San Mateo County's three key elements in its re-tooling

approach. Streamlined business processes, better staff morale, and improved productivity have led to improved efficiencies realized by San Mateo county. A testament to their success is their ability to scan and index documents into their imaging system and make them available for staff retrieval at any district office within 24 hours of receipt of the documents. Another accomplishment is San Mateo's timely processing of its Medi-Cal mail-in applications based on a program timeline requirement of no more than 45-days. Recommendations have been developed for EHSD of Contra Costa County's consideration based on the successes observed in San Mateo County.

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Introduction

The purpose of this paper is to examine San Mateo County's re-tooling of its Health Insurance Tele-Center (HIT) or what they used to refer to as a service center. Contra Costa County wants to learn from the approach taken and processes put in place during San Mateo's re-tooling experience. This re-tooling led to an improvement in San Mateo's service delivery model of public benefit programs and services, such as CalFRESH (aka Food Stamps) and Medi-Cal developed to respond to the growing number of applications. This case study analyzes San Mateo's re-tooling as well as describes a background of San Mateo's business need that led to their re-tooling process. This paper also includes findings of San Mateo's re-tooling approach by identifying key elements and specific strategies applied, successes and obstacles realized, and recommendations and potential implications for Contra Costa County's consideration.

Background for Case Study

The 2007 recession was one of the longest economic downturns since the Great Depression of the 1930's. The housing decline, which started in 2006, was a primary cause of the broader economic malaise. As the job market deteriorated, unemployment increased, and, consequently, demand for public benefit programs and services reached an unprecedented high. To make matters worse, this occurred at the same time that the counties' property tax revenue streams started to decline, making it impossible to hire more staff to meet the increased workload demand. The

Employment and Human Services Department (EHSD) of Contra Costa faces the challenge of providing a high level of customer service based on the increased demand for benefits and services with a dwindling if not static level of resources. Changing demographics and increasing program complexity and regulatory requirements set by the state, federal, and county government are adding to the county's challenge. Therefore, EHSD of Contra Costa is seeking new ways to improve its service delivery model that could result in improved internal efficiencies and productivity.

San Mateo County's Re-Tooling Process

San Mateo County is located on a 60-mile peninsula immediately south of San Francisco, bordered on the east by San Francisco Bay, and on the west by the Pacific Ocean. The Health Insurance Tele-Center (HIT) is in the Economic Self Sufficiency (ESS) Division under San Mateo County's Human Services Agency (HSA). HIT is responsible for CalFRESH and Medi-Cal program administration of all non-face-to-face transactions, including Medi-Cal mail in, CalFRESH non-face-to-face applications, Inter-County Transfers, Benefits CalWIN, and ongoing case maintenance for Medi-Cal and CalFRESH active cases. San Mateo originally started with a service center model only for CalFRESH and Medi-Cal continuing or field cases, while intakes were handled at district offices. They were fully dependent on manual task assignment and task processing, while case file imaging was done on the back end. As of December 2010, counties back-end imaging had a backlog

of 10,000 cases needing to be scanned and indexed. Around the same time in 2010, the district offices under ESS were accumulating an increasing number of overdue Medi-Cal mail-in applications.

Key Elements and Strategies Applied by San Mateo County

Leveraging technology, redesigning their business processes, and developing timely and reliable statistical metrics and reports are the three key elements of San Mateo County's approach. Acquiring an integrated document imaging and task management tool and using an Automatic Call Distributor (ACD) as well as an Interactive Voice Response (IVR) system are ways that the County leveraged technology. The integrated document imaging and task management tool reduced the number of handoffs in the workflow while eliminating huge stacks of case files or folders. The ACD allows the proper distribution of calls at their HIT center, whereas the IVR is a phone system that allows clients to perform self-service access to the case information. The IVR provided workload relief by allowing clients the ability, if preferred, to perform self-service access to their case information; therefore, removing them from a queue of callers waiting for phone workers to provide their case information.

San Mateo County applied a number of changes into their business processes, but the two that stood out the most were moving the processing of applications that do not require face-to face interviews to their HIT center and implementing a centralized mail unit. Moving the processing of all applications that do not require face-to face interviews to their HIT center challenged the eligibility paradigm by blurring the distinction between associated tasks within functions for intake and continuing. New applications are typically processed at the front end known as intake, while remaining case maintenance actions (continuing work) are processed at the back-end of operation. Although different, this move has proven to be quite effective for San Mateo. The applications

that do not require a face-to face interview consisted of the Medi-Cal mail-in, CalFRESH telephone, and other electronic application requests that allow eligibility determination without the required face-to-face interview. The other important business process change implemented was the creation of a centralized mail unit to receive and process all postal mail correspondence for the ESS Division. The centralized mail unit's responsibilities include processing, scanning, and indexing all documents received in the system within a 24-hour timeframe. Another important element in San Mateo's approach was developing timely and reliable statistical metrics and reports that allowed them to set workload baselines, create performance measures, maximize resources, monitor progress, and evaluate outcome measures.

San Mateo's Successes and Obstacles

Streamlined business processes, better staff morale, and improved productivity that led to efficiencies are the stated successes realized by San Mateo after applying their strategies. Acquiring an integrated document imaging and task management tool eliminated the need for a manual look-up or clearing of mail by workers. Acquiring a tool that integrates tasks into an imaging system for immediate retrieval helps with service delivery because this allows staff to provide accurate information to clients in a timely and efficient manner without requiring them to search manually or retrieve documents or case files. The ACD allows proper call distribution at the HIT center while the IVR provides clients the ability to perform self-service access to their case information. Moving all applications that do not require face-to face interviews to the HIT center encourages clients to become more comfortable with available technology, while also increasing staff's ability to deliver services in different ways without sacrificing accuracy or timeliness of benefit and service delivery. This strategy resulted in getting the overdue Medi-Cal mail-in applications processed, which at one point were around 1,800 cases. San Mateo County is now

current with their Medi-Cal mail-in processing and continues to stay within compliance of the 45-day processing timeline.

Creating a centralized unit that handles all mail correspondence for the ESS Division resulted in efficiencies for workers and improved clients' experience. Scanning the documents in the system immediately resulted in staff's ability to access all available information to take case action regardless of the staff's physical office location. By the summer of 2011, San Mateo County completed the scanning and indexing of their imaging backlog of about 10,000 cases. The County takes pride in its ability to scan documents within 24-hours of receipt and making them available to staff at any physical office location for online retrieval. The metrics and reports that assist management in making operational decisions also created clear and consistent metrics of performance measures to all staff. Staff in the county stated that this became a powerful management tool by creating transparency from top to bottom, and by standardizing the data set shared regularly with staff. The reports have real-time data that tells them the number of cases that have associated tasks, including task statuses.

San Mateo County's re-tooling was not accomplished without overcoming challenges. Resources and time constraints are some of the major obstacles they had to overcome to implement re-tooling. San Mateo recognized that to achieve re-tooling objectives, staff needed to evaluate and modify an entire business model. For that reason, San Mateo spent time planning, researching, developing, and fine-tuning the strategies within their approach. They formed workgroups that helped develop the workflow details, which consequently, placed additional strain on existing resources as they actively worked on the re-tooling process at the same time that they were working on the increasing already backlogged workload. However, San Mateo stayed focused and persevered to implement their changes and slowly but surely started realizing their successes.

Recommendations and Implications for Contra Costa County

San Mateo County's implementation of sound and innovative strategies has yielded considerable improvements in its outcome measures. Leveraging technology, redesigning business processes, and developing timely and reliable statistical reports are not new concepts to Contra Costa County's EHSD. However, three specific strategies may be of more significance because of existing potential opportunities since EHSD has also embarked on a similar service delivery improvement redesign. The three recommended strategies for EHSD to consider are the following:

- Acquiring an integrated document imaging and task management tool,
- Establishing a mail unit centrally located to process all postal mail, and
- Expanding the development of timely and reliable statistical metrics and reports to front-end or intake functions.

Acquiring an integrated document imaging and task management tool has the potential to result in reducing case or task work hand-off, creating easily accessible and retrievable images of documents, and integrating the system that captures all information in one database thus minimizing the need for staff to work on disparate systems. Identifying available resources to learn this system, ongoing maintenance support, and costs are all potential implications that need further exploration. Establishing a centralized unit to process all postal mail would provide a centralized processing area for documents. The tasks for this unit are to receive, open, sort, scan, and index documents into the system to provide a back-end process. However, this does not replace the need to also establish a front-end strategy to complete a distributed capture approach that would create a more robust scanning model that is all-inclusive to cover all "points of receipt" be it front-or back-end. The idea with the "points of receipt" model is to have an organized approach to the same constant flow

of documents received to make them immediately available to staff at any physical location regardless of entry point. However, for the purpose of this paper, the focus is about establishing a centralized mail unit to perform the back-end scanning and indexing work in-house.

Bringing back scanning and indexing work in-house has the potential to reduce costs, improve timeliness in having the documents scanned and indexed into the system, and it would allow EHSD to institute a quality assurance process to increase the quality of the images and accuracy of indexing for easy retrieval. This would also contribute to service delivery improvement by making the submitted documents accessible to staff for case determinations sooner by eliminating the need to transport documents to an outside vendor for scanning and imaging. Resource and logistical challenges are the apparent implications associated with this recommendation. With at least five big offices as major consumers of the existing imaging system, determining the amount and identifying resources required to staff such a unit adequately for start-up would be a challenge. Finding an available central location that could house the mail function and developing a process to redirect all return postal mail correspondence for processing could present an additional challenge.

Expanding the development of timely and reliable statistical metrics and reports to front-end or intake functions would allow staff to make daily or weekly priority decisions based on their workload that could lead to improved productivity. This would also flag staff to take immediate case actions on time-sensitive tasks that have regulatory implications to the department, such as expedited service, immediate need, and pending and other miscellaneous overdue case actions. Resources and costs associated are potential implications attached to this recommendation. Identifying the appropriate relevant data to establish workload performance will be critical. Constructing these reports to contain a balance between data relevance and urgency to prompt

staff to recognize priorities based on program regulations would be vital. Identifying and acquiring staff that has the knowledge and ability to identify and deliver metrics, meeting reporting requirements that include developing reports that contain data from multiple systems, and continuing to respond to changing reporting needs could all be a challenge.

Conclusion

This case study examined San Mateo County's re-tooling of its Health Insurance Tele-Center (HIT), which led to improvements in its service delivery model of public benefit programs and services. Contra Costa County's EHSD of faced similar challenges in providing a high level of customer service to its community given the volume of clients and increasing program complexity and regulatory requirements set by the state, federal and county governments. San Mateo County's successes were streamlined business processes, better staff morale, and improved productivity because of their approach to leverage technology, redesign their business processes, and develop timely and reliable statistical metrics or reports. Resources and time constraints are the major obstacles San Mateo had to overcome. At the same time that they were planning and working on their re-tooling, all the existing work still had to be processed, eliminating the ability to have dedicated time to plan, develop and implement their strategies. Acquiring an integrated document imaging and task management tool, creating a centralized mail unit centrally located to receive and process all postal mail correspondence, and expanding the development of timely and reliable statistical reports with standardized, clear, and revealing pertinent data are the recommended strategies for Contra Costa County to consider. These three specific strategies may be of more significance because of potential existing opportunities that Contra Costa County has also embarked regarding a similar service delivery improvement redesign.

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