Periodic Data Matching (PDM) Field Test Report

Executive Summary

At its July 2018 meeting, the METs Executive Steering Committee (ESC) heard a proposal brought by Minnesota county leadership to conduct a field test for the first cycle of Periodic Data Matching implementation. It was agreed that after the field test concluded in September, subsequent PDM cycles would be suspended pending a report from the workgroup regarding resuming Periodic Data Matching. A Field Test Assessment Workgroup was convened and included DHS, MNIT, and county staff. In addition, over the period of three months, nine counties volunteered to participate in monitoring the field test: Anoka, Dakota, La Qui Parle, Meeker, Olmsted, Scott, Stearns, and Swift and Region 3 (Aitkin, Carlton, Cook, Itasca, Koochiching, Lake and St. Louis). Anoka County assumed the lead role, gathering issues identified by the assessor counties and then reporting to DHS for investigation and resolution.

Field Test Assessment

The Field Test Assessment Work Group identified criteria to evaluate PDM. This included: general functionality; clear and correct instructions; timely, accurate notices; and MMIS interface for case closures. The assessor counties reported that the PDM functionality operated as it was programmed to do. While there were no major issues with the system functionality, county assessors identified some issues, and the status of those findings are listed in the table at the end of the document.

- The functionality appears to operate per business requirements
- No current, known system issues were identified that were exacerbated by the process.

Assessor counties anticipate additional follow up will be needed when PDM clients discover they do not have coverage and have a medical need. In order to re-determine eligibility for these clients, one of the following actions would need to occur: a worker updates a client's case evidence, their case is reentered by a financial worker, or the client reapplies for coverage. Because these actions can occur any time within 4 months after the date of closure, the total number of persons closed as a result of PDM will not be known for several months.

PDM Field Test Timeline

- August 1: The PDM batch to trigger discrepancy notices ran.
- August October: DHS facilitated a number of PDM support sessions in August and September where counties could ask questions about processing cases for PDM and get an immediate response.
- **September 7:** The PDM ineligibility process systematically identified enrollees who did not respond to their discrepancy notice, marked them as ineligible for public programs, and sent them a closure notice.
- **September 28:** This was the last business day of the month and the last day for enrollees to resolve PDM discrepancies or request an extension.

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- October 1: This was the first day of ineligibility for enrollees who did not respond to their PDM notice.
- October: PDM Assessment Group convened to review and assess field test results and determine whether additional information or research was needed.
- November: PDM Assessment Group reports to the body governing DHS-county IT work...

PDM Data:

- Case Selection--Selected to undergo PDM for the September PDM month:
 - o 63,935 Individuals
- Discrepancies--Identified as discrepant:
 - o 6,659 Individuals with discrepancies
- Ineligibility Process--Sent closure notices to individuals who had not yet resolved their PDM discrepancies and set them to close for 9/30
 - o 3,244 Individuals
- Closures in METS due to PDM non-compliance as of 10/1:
 - o 2,398 Individuals

Findings: (Workgroup reviewers: Adding New column "issue Implication" to provide context as to severity of issue; reordered issues)

The following is a list of issues identified by counties, and found to be valid during the field test.

Issue Type	Issue Description	Issue Implication	Path to Resolution
System Functionality	PDM cases that were set to close due to the client failing to respond, were re-determined for Unassisted Qualified Health Plans (UQHP). These cases were selected for UQHP renewals and as a result workers were unable to extend or resolve client's PDM discrepancies.	This issue impacted only those clients who had not responded to resolve the discrepancy prior to the UQHP renewal process initiating.	Long-term, technical solutions have been initiated to ensure this issue will be avoided in the future.
Notices	The Projected Annual Income	The section of the Discrepancy Response Form that lists the PAI is displaying as	A defect has been raised. This was

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	(PAI) for the current tax year is not listed on the client's PDM Discrepancy Response Form for some cases.	blank which is confusing to clients. This issue is not occurring on all response forms.	added to the PDM Known Issues list published for workers.
Notices	The client's PDM Discrepancy Response Form shows blank cells for income when a client has no income instead of \$0 income.	On the Discrepancy Response Form the cell indicating <i>income</i> is empty instead of showing \$0 income. This was confusing to clients and agency staff. This issue is occurring on all response forms when a client has \$0 income.	The issue is being analyzed and a defect will be created if appropriate.
Reports	BOBI reports listing as 'first name, last name' instead of 'last name, first name'	Counties reported that the preference is to have names listed as 'last name, First name, middle name. The reports are informational only and do not require work by agencies	A defect has been reported and is being worked on.
Reports	The Projected Eligibility (PE) Report shows children who do not meet Auto- newborn (AN) criteria are being listed as Auto Newborn	This issue applies to the PE report only. The underlying functionality that determines Auto Newborn status and whether or not they are exempt from PDM is correct. This report is informational only. Agency staff are not expected to work this report.	New requirements have been drafted and the defect has been raised. This is not critical to PDM functionality or discrepancy processing.
Instructions	Title of ONEsource procedure, 'Resolving a PDM Discrepancy before Coverage has Closed' is confusing.	This issue was reported by one agency staff participating in the assessment who stated the title used in ONEsource wasn't clear. Training materials described all of the related PDM notices, and give instructions on how to resolve a PDM discrepancy.	This procedure has been reviewed and includes information on when this procedure is to be used. This issue is considered to be resolved.
Notices	The PDM Discrepancy Outcome notice indicates that another notice will follow that explains the	All of the Discrepancy Outcome notices have this sentence indicating another notice will follow. The number of calls from clients who were expecting a follow up notice has not been quantified during the PDM Field Test.	This was added to the PDM Known Issues list and will require a slight change in wording to the Outcome notice to resolve. A defect

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	eligibility for all household members. However, if ultimately there is no change in program a follow-up notice does not generate.		has been raised.
Notices	PDM Discrepancy notice were confirmed to have been sent to clients, but the PDF is not displaying in METS.	The notice <u>did</u> generate and was mailed to the client. For a very few cases, and not all, county agency staff were not able to view the notice in METS.	A defect has been raised for the display issue.
System Functionality	Workers were receiving an unhandled server error.	Agency staff were temporarily unable to make changes on a case. This was a unique scenario for a small number of cases identified and resolved in early August.	This was related to a one-time, situational issue and is not anticipated to happen in the future. A fix was put in place soon after it was identified.
System Functionality	Some clients who were discrepant for the September PDM month were not closed for not responding in the September closure process.	To avoid interfering with another household members' renewal process for another program (i.e., MinnesotaCare, Insurance or UQHP), this functionality was designed to close the discrepant clients in a subsequent PDM closure process, or have their eligibility redetermined as part of the renewal process with their other household members.	This is working as designed.

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