Data integration challenges are wreaking havoc within IT systems, costing health and human services agencies billions and their customers a reduction in quality care. Couple that with constantly changing eligibility statuses and lengthy verification cycles, and we’ve got a major data dilemma.

- How much are these benefit challenges really costing America?
- What are agencies doing to improve outdated processes and IT systems?
- Can a focus on data integration eliminate financial loss?

MeriTalk surveyed 155 IT executives and program managers working with healthcare and other social service benefits to understand their challenges, capture lessons learned, and highlight the significant opportunity for savings.
Executive Summary

- When it comes to delivering healthcare benefits, government managers* struggle with timeliness, accuracy, and legacy IT:
  - Today’s agencies take **more than three work weeks** to confirm benefit eligibility
  - Even with the lengthy process, case workers estimate **11%** of the people who receive government healthcare benefits are not actually eligible
  - Why? Managers say their **#1 challenge** is data integration

- **Eligibility and verification issues fail citizens and cost billions:**
  - **43%** say their current processes hinder their agency’s ability to satisfy beneficiary needs
  - Altogether, they estimate nearly **$342 billion** is wasted each year due to improper payments from benefit eligibility and verification challenges

- **How do we improve?**
  - Managers ask for additional staff (**48%**), improved data integration across agencies (**47%**), and improved system automation (**45%**)
  - Focusing on IT may, in part, solve the hiring crunch – managers estimate that fully integrated IT systems would improve their productivity by **23%**

*Throughout the report “managers” will refer to the full surveyed group of IT executives and program managers*
Today’s health and human services agencies are struggling to balance rising benefits enrollment with a variety of eligibility and verification challenges.

63% of case workers say enrollment rates for healthcare assistance and/or benefits have increased at their agency in the last two years, and

85% of managers say their agency faces challenges when it comes to the eligibility and verification of healthcare beneficiaries.

Take Away: Systems Under Pressure
Challenge #1: Timeliness

- Most agencies require more than three work weeks to confirm eligibility for a new benefits recipient

On average, how long would you say it takes your agency to confirm healthcare benefit eligibility for a new recipient?

16 business days

On average, how long would you say it takes your agency to verify the status of a current recipient if it comes into question?

14 business days

Take Away: Waiting Rooms at Capacity
Challenge #2: Accuracy

- Case workers estimate that 11% of current beneficiaries should not be receiving benefits

List Accuracy:

- Case workers estimate **89%** of their agency’s current beneficiaries list is accurate
- That means approximately **11%** of the people who receive government healthcare benefits are *not actually eligible*

*Take Away:* More than One in 10 are Misdiagnosed
Challenge #3: Legacy IT

- When it comes to the eligibility and verification of healthcare beneficiaries, managers say their #1 challenge is data integration

44% of IT pros say they are not able to leverage all available data due to system and/or integration challenges

**Take Away:** Outdated Equipment Stalls Recovery

*IT Pros asked to select all that apply*
More on Current Systems

• While the extent varies, agencies struggle with data integration across the board

Just 22% of all managers say their current system is "analytical" and even fewer (16%) say it's “intuitive”

Does your current system enable you to do the following?

<table>
<thead>
<tr>
<th>Activity</th>
<th>% Yes</th>
<th>% No or unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cross-check data with information stored at other departments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Examine historical data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Send data from the current system to a separate system</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cross-check data with information stored at other agencies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Run analysis to identify trends or anomalies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cross-check data with non-government information</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Take Away: Some Miss Critical Capabilities
Today’s eligibility and verification processes hinder mission success and customer satisfaction

Does your current eligibility and verification process hinder your agency’s ability to… (% yes)*

- Deliver on its mission: 36%
- Deliver consistent service: 41%
- Satisfy beneficiaries’ needs: 43%

*Managers asked to select all that apply

Take Away: Need A Healthier Diet
• Overall, managers believe nearly $342 billion is wasted each year due to eligibility and verification issues

What percentage of government healthcare benefits do you believe is lost each year due to improper payments from benefit eligibility and verification issues (i.e., eligibility is incorrect or amount paid is greater than appropriate)?

Estimate: 20%

That’s nearly $342 billion wasted each year due to eligibility and verification issues*

*Based on an estimate of approximately $1.7 trillion in total healthcare benefits paid out annually by HHS, SSA, and USDA. Calculation based on figures in GAO’s March 2015 Improper Payments report: http://www.gao.gov/assets/670/669026.pdf.

**Take Away:** Unhappy Tax Payers
Some agencies are moving in the right direction

What has been the most impactful change your agency has made in the past two years to improve the healthcare benefit, eligibility, and verification process?

"Added personnel to help processing"

"Put in new switches and upgraded our infrastructure"

"Installed kiosk in the lobby of DSS to make the drop off of verification more convenient for the recipient of government services"

"More interactive verification between outside programs"

"Added online services"

"Created a dedicated eligibility center separate from other programs"

"Implemented a new health benefits exchange"

"Increased training for current employees and added additional training time for new employees"

"Paperless initiatives, far less processing time"

"We have a new app, ESI. If all paperwork is submitted we can get eligibility within minutes"

"Going completely electronic and granting access at the employee level"

**Take Away:** Share What’s Working
More Action Needed

• Agencies should build on progress through hiring, improving data integration and automation, and enhancing training programs

What additional changes do you believe your agency should make to improve its ability to process and verify healthcare benefits quickly and accurately?*

- Hire additional staff: 48%
- Improve data integration: 47%
- Improve automation: 45%
- Improve end-user training: 37%
- Improve IT and case worker collaboration: 36%
- Invest in a more user-friendly interface: 36%
- Improve data aggregation capabilities: 27%

Two-thirds of case workers said this survey was the first time they were ever asked for feedback on the IT systems or policies their agency uses to manage eligibility and verification.

*Managers asked to select all that apply

Take Away: All Departments Must Aid in the Solution
• Focusing on IT may, in part, solve the hiring crunch

If your current IT system was upgraded with the ability to integrate all necessary beneficiary data from all sources, how much additional work would you be able to complete in a 40-hour week?

Average response:

9 hours per person per week
or
23% increase in productivity

For the Centers for Medicare and Medicaid Services alone, that’s the equivalent of hiring approximately 1,300 new employees*

*Based on CMS employment of 5,684 in 2013, source: [http://bestplacetowork.org/BPTW/rankings/detail/HE70](http://bestplacetowork.org/BPTW/rankings/detail/HE70)
The Road Ahead

- Agencies say improving IT systems will deliver better service, speed, and accuracy – as well as a reduction in improper payments

Imagine for a moment that your agency has an intuitive, user-friendly IT system that seamlessly integrates necessary beneficiary data from all departments and sources. What benefits do you think a system like that would deliver?*

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Better overall quality of service</td>
<td>64%</td>
</tr>
<tr>
<td>Faster eligibility determination</td>
<td>63%</td>
</tr>
<tr>
<td>Faster verification</td>
<td>57%</td>
</tr>
<tr>
<td>Increased accuracy of recipients</td>
<td>55%</td>
</tr>
<tr>
<td>Improved employee productivity</td>
<td>54%</td>
</tr>
<tr>
<td>Reduction in fraud</td>
<td>53%</td>
</tr>
<tr>
<td>Reduction in overpayments</td>
<td>47%</td>
</tr>
<tr>
<td>Reduction in underpayments</td>
<td>41%</td>
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</tbody>
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The majority of managers (59%) believe a system like this is at least three years away

*Managers asked to select all that apply

**Take Away:** Long-term Prognosis is Positive
Recommendations

Audit Current Systems and Processes:
With annual losses of nearly $342 billion, it’s safe to say the current system isn’t working. Agencies must evaluate their eligibility and verification processes (and the underlying IT systems) to identify inefficiencies and design a path forward.

Prioritize Data Integration:
Managers say improved data integration will not only enhance productivity, but improve the customer experience, accelerate eligibility determination, and reduce improper payments.

Improve Collaboration:
Two-thirds of case workers said this survey was the first time they had been asked to weigh in on their IT systems and policies. For technology improvements to take hold, case workers and IT must come together to define needs, devise solutions, and justify investments.
Methodology and Demographics

- MeriTalk, on behalf of MarkLogic, conducted online and telephone surveys of 155 social services IT professionals and case/program managers in June 2015. The report has a margin of error of ±7.84% at a 95% confidence level.

<table>
<thead>
<tr>
<th>Job Title:</th>
<th>Agency Type:</th>
</tr>
</thead>
<tbody>
<tr>
<td>6% Senior agency leadership</td>
<td>27% Federal</td>
</tr>
<tr>
<td>10% Senior IT executive</td>
<td>49% State</td>
</tr>
<tr>
<td>32% IT Director, Manager, or Supervisor</td>
<td>24% Local</td>
</tr>
<tr>
<td>19% Program Director, Manager, or Supervisor</td>
<td></td>
</tr>
<tr>
<td>19% Case Manager, Case Worker, or Services Officer</td>
<td></td>
</tr>
<tr>
<td>14% Benefits/Verification/Eligibility Manager or Coordinator</td>
<td></td>
</tr>
</tbody>
</table>

100% of managers are familiar with the policies and processes for the verification and eligibility of healthcare or other social services benefits.
Thank You

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