



Veteran Benefit Enhancement Program

Public Assistance Reporting Information System (PARIS)

06/13/2018

Introductions

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In Today's Session

- Veterans Benefit Enhancement (VBE) Program History and Overview
- How PARIS data identifies referrals for military related benefits
- How the program leads to State Medicaid Savings while facilitating veteran outreach

Why It is Needed

- **Veteran Outreach** - More than half of the nation's veterans have little or no understanding of veteran benefits
- <http://www.mcclatchydc.com/news/nation-world/national/article24740527.html>
- **GAO VA Benefit Awareness Report**
<http://www.gao.gov/products/GAO-12-153>
- **Skyrocketing Medicaid expenditures** - 25% to 50% of medical costs can be absorbed by a Veteran benefit



What is PARIS?

Public Assistance Reporting Information System

- Federal-State partnership
- Detailed information and data to assist in maintaining program integrity and detecting/deterring improper payments.
- Data comes from
 - **Department of Defense**
 - **Veterans Administration**
 - Veterans and survivors of veterans with \$ claims
 - **Interstate Matches**
 - SSN matches with other states
- CMS guidance

PARIS - VA File Detail

- <https://www.acf.hhs.gov/paris>
- System Info > **DMDC Output Record Formats > Veterans (VETSNET) Output Record Format**
- **Extract Layout** lists and defines all fields

Key Data Elements – VA File

- Payee Type
- Award Type – Award Line Type
- Award Status
- Veteran A&A – Spouse A&A
- Combined Degree
- Entitlement Code
- Gross Pay Amount – Payment Amount

How it Works

- States (SPAAs) send SSNs to DMDC for all
 - recipients; and
 - financially responsible assistance unit members
- DMDC coordinates SSN match to
 - Other States
 - Federal and Military Pay
 - Veterans Affairs Claims
- DMDC returns match results to SPAAs

Veterans File Basics

- ▶ Current Veterans Benefits (Claims) for clients
 - Includes Terminated and Suspended Claims
- ▶ Data from the VBA (Benefit Administration) VETNET Treasury
 - Last Paid Date included
- ▶ Matches with the Beneficiary SSN
 - Apportionments listed under Beneficiary

Veterans File Utilization

- Income verification
 - Other Sources (pension)
 - Unreported?
- Health insurance identification
 - CHAMPVA
 - Veterans Health Care
- Maximize VA payments
 - Proper pension rate
 - Aid & Attendance (Long Term Care)

Income Verification

- Increase accuracy
- Decrease process time
- Reduce paperwork
- Increase organizational knowledge
 - ✓ VA pension calculations
 - ✓ Aid and Attendance
- Increase identification of clients with VA income

Civilian Health and Medical Program of Veteran's Affairs (CHAMPVA)

- Often confused with TRICARE (Dept of Defense)
- Spouse or child of a veteran who has been rated permanently and totally disabled for a service-connected disability or died when rated or in line of duty (probably TRICARE)
- Dependency & Indemnity Compensation (DIC) eligibility very similar
- Award Line Type DIC* or Entitlement Type ending “7”

VA Health Insurance

- Active duty – usually 24 months with exceptions
 - Payee 00
- Enrollment into the VA Healthcare System easy
 - By phone, online, in person, or online (10-10EZ)
- Some veterans can receive Rx without the need of a VA doctor. Their own physician may prescribe and send Rx script to VA
 - Receiving A & A or Housebound (Vet A&A)
 - Receiving 50%+ service-connected compensation (Combined Degree or Gross Pay)

Health Insurance - Federal File TRICARE



- Verifies Income with Multiple Agencies
- Record Type is key to TRICARE identification
 - MA Active Duty
 - MR Retired Military
 - SR Survivor of Retired Military
 - MV Military Reserves (conditional)
- Family Members – appropriate age, relationship
 - Match to Medicaid recipient data

TRICARE Eligibility

- ✓ Active duty and retired service members (MA, MR)
- ✓ Spouses and unmarried children up to 26 years of age (including stepchildren) of active duty or retired
- ✓ Widows or widowers and unmarried children of deceased active duty or retired service members (SR)
- ✓ Reservists on active duty > 30 days – under Federal orders (MV) and Retired Reservists and family
- ✓ Retired reservists and family members

- ✓ Refer to Coordination of Benefits for confirmation (DEERS) and update

Leverage VA File Data to Avoid Costs I

- Match to current Medicaid recipient data
 - Living Arrangement, Marital Status, Program
- Full VA nursing care coverage for some veterans
 - 70%+ service-connected compensation
 - Payee Type, Award Line Type, Combined Degree
- Special service-connected compensation claim
 - Vietnam veterans with diagnosis of condition meeting Agent Orange criteria
 - Entitlement Code 7*

Leverage VA File Data to Avoid Costs II

- Reduced pension (\$90) but not in nursing facility or with dependent
 - Award Line IP, IDP Gross Pay
 - Living Arrangement, Marital Status / Children
- Terminated Claims
 - Award Status T
 - Death Benefit - Award Line Type C, Payee Type not 00
 - Change of Circumstances – old claim
- Aid and Attendance or Housebound Benefit facilitation
 - Veteran A&A field NN
 - Need significant help with care, ADLs

Aid & Attendance = Third-Party Payments

- Krueger v. Richland County Social Services :
 post-eligibility calculation to determine recipient's share of the cost for medical services
- Treating aid and attendance allowances as third-party liability payments comports with the principle that
 "Medicaid is intended to be the **payer of last resort**, that is, other available resources must be used before Medicaid pays for the care of an individual enrolled in the Medicaid program."

Filing VA Claims: Benefits of Partnering with State DVA

- Improve Client Services to Veterans and Family Members
- Collaborative Referral Process
 - Reduce Estate Recovery for Veterans and Families
 - Reduce Medicaid LTC related expenditures
 - Share Data to Identify Clients Potentially Eligible for Veterans Benefits

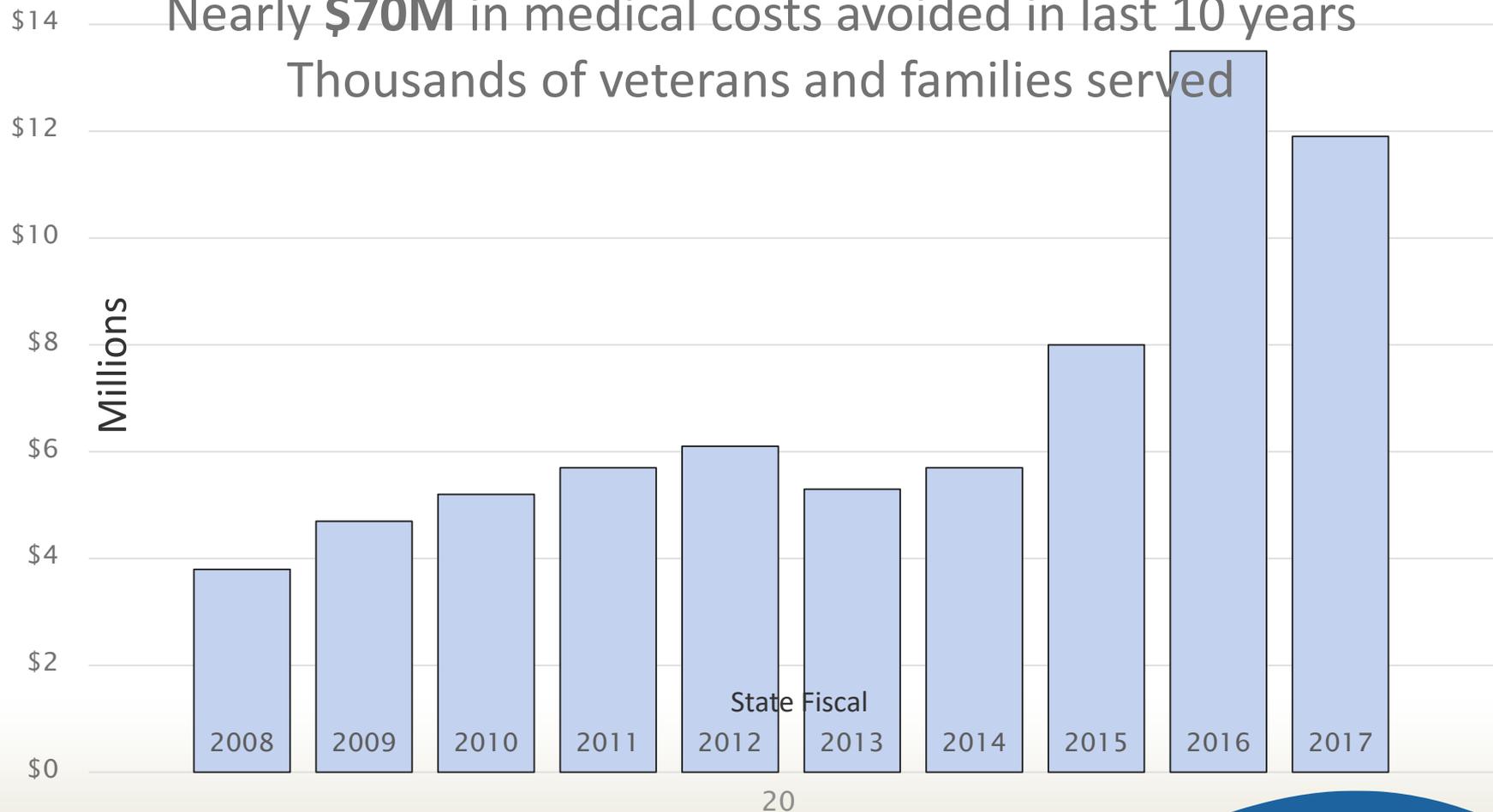


Medicaid Cost Avoidance

Medical Costs Avoided for Washington State

Nearly **\$70M** in medical costs avoided in last 10 years

Thousands of veterans and families served



Selected As A Best Practice By

- White House
- US HHS – ACF/CMS
- NGA – National Governor’s Association
- CHCS – Center for Healthcare Strategies
- Governing Magazine
- Kaiser Health
- Pew Research Center
- 2013 Veteran’s Administration’s “Abraham Lincoln Pillar of Excellence” Award
- 2004 Governors Award for Customer Service

Other States Assisted with Program Implementation

- **Oregon** - http://blog.oregonlive.com/oregonatwar/2011/08/oregon_prepares_for_pilot_effo.html
- <http://www.oregon.gov/dhs/assistance/Documents/vets-outreach-legisreport2014.pdf>
- **Virginia** - http://hac.state.va.us/Committee/files/2013/09-16-13/DMAS_Veterans_and_Inmates_Projects.pdf
- **Texas** - <https://oig.hhsc.texas.gov/sites/oig/files/reports/PARIS-VA-Match-Report-FY-2016.pdf>

QUESTIONS?



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Our History

State of California

- Joined PARIS in 2009.
 - Legislative audits focused on lack of PARIS implementation.
 - State law passed requiring PARIS-Veterans program.
 - Due to initial success, implemented statewide.
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California – Outreach Partnership

- State Medicaid agency already had partnership with state Veterans Affairs department.
- For last twenty years, the two departments have worked together to screen applicants and beneficiaries for military background.
- When PARIS implemented, simply increased scope of existing partnership.



California's Veterans

- California has significant population, therefore, there are many veterans.
- California has larger rural areas, where most veterans return from service.
- There are many VHA facilities in California.
Telemedicine, community based outpatient clinics, and the private choice provision help California veterans.



Medicaid Estate Recovery

- This is a provision where states can recover the medical care costs from a deceased recipient's estate.
- Many veterans enrolled in Medicaid do not realize this.
- Veteran health benefits have been earned through service to nation.



Medicaid Challenges

- Unconditional Available Income. Requiring this before granting eligibility has become difficult with online applications.
- Verifying CHAMPVA Enrollment. Using telephone verification service is time-consuming.
- States have lost access to DEERS recently. This has caused an interruption in the ability to verify TRICARE enrollment and residency.



Recommendations

- Review your program's enrollment procedures to ascertain the extent of military background screening and how PARIS can help identify veterans.
 - Partner with state VA or other veteran outreach organizations to speak with recipients that have a military background.
 - Help veterans get access to high quality federal health and income benefits.
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California Results

- The budget that was recently released projects that the California PARIS Veterans project will save \$33,000,000 in the upcoming fiscal year (18-19).
- This is achieved by getting veterans the benefits they earned through their service to the nation. Many veterans do not realize that they qualify for these rich federal benefits. California's outreach motto is, "if you served, you earned."

Questions?

More Information:

<http://www.dhcs.ca.gov/services/medi-cal/Pages/VBE.aspx>

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