

Economic Support policy Advisory Committee Meeting
Thursday, October 16, 2014 9:30-12:00
Dane County Job Center Room 16
1819 Aberg Avenue, Madison, WI 53704

Minute Takers this Month: WKRP

Department of Children and Families (DCF) Topics

- I. Child Care agency monitoring plan – John Tuohy and Dave Timmerman
- II. Updates on Child Care integration into CCA call flows – Groups 1, 2 and 3
- III. WREA Child Care Pilot Updates and State report on pilot
- IV. Other DCF Discussion Items

Department of Health Services (DHS) Topics

- I. Updates from WCHSA's IM Funding Committee – 2015, 2016-2017
- II. Updates from REN Sustainability Workgroup – Western/East Central
- III. Discuss DHS Outreach Funding for REN Coordinators – (share ideas for implementing)
- IV. PPACA Updates and Concerns
 - A. Feedback on outreach efforts to those who lost Badgercare before 4/1/2014
 - B. REN Coordination for 2014/2015
 - C. Discuss PPACA open enrollment projections
- V. Updates regarding the FSET RFP and Existing Contracts
- VI. FSET Pilot Implementation (Southeast Region)
- VII. Medicaid Transportation Provider Updates/Legislative Audit of Program (if available)
- VIII. Discuss DDB backlog and any current issues
- IX. Other DHS Discussion Items

Standing Subcommittee Updates

- | | |
|-------------------------|--------------------------------------|
| -Workload and Finance | - FSET |
| -Process Support | - Training |
| -Information Technology | - Performance Measures and Reporting |
| -Program Coordination | -Fraud |

WCHSA Upcoming Meetings

- I. Next Executive Committee – November 6th– Stevens Point
- II. Next Secretaries Meeting – *November 4th* – Madison
- III. WCHSA Fall Conference – December 11 & 12 – Wisconsin Rapids

Next Meeting will be will Thursday, November 20 at 9:30 a.m. at Dane County Job Center

Minute Takers for November: WREA

To participate by phone, please call (888) 273-3658, and enter in access code 6450020. If you call in before the host does, you will hear music until the host signs in.

CHILD CARE (CC) SUBSIDY AGENCY REVIEW

Agency Name Address Address City, WI Zip Code	Review Date List agency staff who will participate with the review																																												
CC Subsidy Agency Representative E-mail address Telephone number	DCF Reviewer Name Title																																												
<p>State and County Contract Reference: County and tribal agencies (local agencies) contract with the Department of Children and Families to deliver program services to families that qualify for Wisconsin Shares child care subsidy.</p> <p>Pursuant to Contract Agreement Section XII, A., the Department will monitor the local agency's general compliance with and adherence to the terms of the contract and the Scope of Service provisions on a periodic basis. The Department reserves the right to monitor all aspects of the contract, including: agency performance, adherence to the terms and conditions of the contract, adherence to state and federal laws, achievement of program performance standards, adherence to fiscal reporting and cost allocation requirements, and customer satisfaction and quality of service provided.</p>																																													
<p>Agency Organization Chart Please provide a copy of the agency organization chart.</p>																																													
I. AGENCY PROFILE																																													
<p>A. County Population: _____ 2010 population per U.S. Census Bureau (Complete by Reviewer) http://www.indexmundi.com/facts/united-states/quick-facts/wisconsin/population#map</p>																																													
<p>B. Agency Structure:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">1. Agency Director:</td> <td style="width: 15%;">Name</td> <td style="width: 15%;">Phone number</td> <td style="width: 10%;">E-mail</td> </tr> <tr> <td>2. ES / IM Manager/ CC Supervisor:</td> <td>Name</td> <td>Phone number</td> <td>E-mail</td> </tr> <tr> <td>3. CC Coordinator:</td> <td>Name</td> <td>Phone number</td> <td>E-mail</td> </tr> <tr> <td>4. CC Provider Subsidy Contact Person:</td> <td>Name</td> <td>Phone number</td> <td>E-mail</td> </tr> <tr> <td>5. Agency WI Shares Quality Assurance Person:</td> <td>Name</td> <td>Phone number</td> <td>E-mail</td> </tr> <tr> <td>6. Agency Financial Manager:</td> <td>Name</td> <td>Phone number</td> <td>E-mail</td> </tr> <tr> <td>7. CC Fraud Contact:</td> <td>Name</td> <td>Phone number</td> <td>E-mail</td> </tr> <tr> <td>8. Security Officer/Functional Agency Security Liaison (FSAL):</td> <td>Name</td> <td>Phone number</td> <td>E-mail</td> </tr> <tr> <td colspan="4"><i>(Individual responsible for security of CARES/CWW/CSAW/CCPI/WISCCRS/YoungStar/Web1 systems.)</i></td> </tr> <tr> <td>9. IM Consortium Name:</td> <td colspan="3">Name</td> </tr> <tr> <td>10. Lead Agency for IM Consortium:</td> <td colspan="3">Name</td> </tr> </table>		1. Agency Director:	Name	Phone number	E-mail	2. ES / IM Manager/ CC Supervisor:	Name	Phone number	E-mail	3. CC Coordinator:	Name	Phone number	E-mail	4. CC Provider Subsidy Contact Person:	Name	Phone number	E-mail	5. Agency WI Shares Quality Assurance Person:	Name	Phone number	E-mail	6. Agency Financial Manager:	Name	Phone number	E-mail	7. CC Fraud Contact:	Name	Phone number	E-mail	8. Security Officer/Functional Agency Security Liaison (FSAL):	Name	Phone number	E-mail	<i>(Individual responsible for security of CARES/CWW/CSAW/CCPI/WISCCRS/YoungStar/Web1 systems.)</i>				9. IM Consortium Name:	Name			10. Lead Agency for IM Consortium:	Name		
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10. Lead Agency for IM Consortium:	Name																																												
<p>REVIEWER NOTES:</p>																																													

CC Subsidy Agency Monitoring

C. Agency Hours

Customer Walk-In Hours: AM to PM
PM to PM

Child Care Provider telephone hours if different: AM to PM
PM to PM

Other:

REVIEWER NOTES:

D. Agency Child Care Subsidy Staff

1. How many Full Time Equivalent (FTE) employees are dedicated to child care activities?
2. Describe how your agency processes child care cases.
3. Have all agency staff that process child care eligibility and authorizations completed "Child Care Subsidy New Worker Training," as required per DCF 201.05(2)?

REVIEWER NOTES:

E. Agency CC Caseload Information – (Complete by Reviewer)

1. Number of Families Served by WI Shares (most recent month and year) SharePoint - families
2. Number of Children Served by WI Shares (most recent month and year) Webl - children

REVIEWER NOTES:

II. PROGRAM PERFORMANCE & IMPROVEMENT

A. Performance Indicator Chart (Complete by Reviewer)

Column 1	Column 2	Column 3	Column 4
Performance Indicator Baseline performance monitoring began in 2012.	2012 Data Baseline	December Previous Year	Current Month/Year
1. SSN Collection Percentage - not to exceed 3%	%	%	%
2. SMRF Processing Percentage – not to exceed 25%	%	%	%
3. Call Answer Time - not to exceed 5 minutes			

CC Subsidy Agency Monitoring

	minute	minute	minute
4. Client Overpayment Collections -% of WI Shares payments (no performance standard has been set)	%	%	%
5. Targeted Case Review, not to exceed 20%	%	%	%
6. Attendance-based authorizations for Group CC (Suggested guideline 20 to 40% range Attendance-based authorizations for Group CC programs.)		%	%

REVIEWER NOTES:

B. Agency Performance Improvement Measures <http://dcf.wisconsin.gov/childcare/admin/default.htm>

- For each performance area, describe your agency's internal process for monitoring the performance indicator.
- List actions taken to improve performance and how performance efforts are communicated with staff.

1. SSN Collection:

2. SMRF Processing:

3. Call Answer Time:

4. Client Overpayment Collections (% of WI Shares):

5. Targeted Case Review:

6. Attendance-based authorizations Group CC:

7. Describe any factors which may contribute to agency performance:

8. Best Practices: List additional steps or practices that resulted in improved program performance:

REVIEWER NOTES:

III. INTERNAL QUALITY ASSURANCE

1. Describe your agency's quality assurance or audit activities related to child care program eligibility, authorization, or payment processing.

CC Subsidy Agency Monitoring

2. Describe how your agency ensures child care cases are documented correctly and required information is scanned into ECF.
3. How does your agency utilize Webl or other reports for quality assurance?

REVIEWER NOTES:

IV. CHILD CARE PROGRAM INTEGRITY ACTIVITIES

1. Was the agency child care fraud plan approved by DCF? *(Complete by Reviewer)*
 Yes No
2. How do you ensure that your agency's child care fraud plan is being implemented by staff?

REVIEWER NOTES:

V. COMPLAINTS

WI Admin. Code 201.07(1), (Provider Appeal Rights)

WI Admin. Code 227, (Administrative Procedure and Rule)

Identify and correcting complaints:

1. Does your agency regularly examine the types of child care subsidy complaints received in order to identify and correct any systemic problems?
 Yes No
2. Describe the types of complaints and the process used to examine and correct problems/issues identified in complaints.

REVIEWER NOTES:

VI. CIVIL RIGHTS

State/County Contract

XVI. B3. State and federal regulations; Civil Rights Compliance Requirements. See also:

<http://dhs.wisconsin.gov/civilrights/CRC/requirements.htm>, and http://dcf.wisconsin.gov/civil_rights/default.htm

(Must have Civil Rights Compliance Letter of Assurance on file with DCF for current CRC period. Currently 1/1/14-12/31/17.)

1. Current Letter of Assurance on file with DCF: *(Complete by Reviewer)*
 Yes No
2. Indicate the number of child care subsidy civil rights complaints your agency had in the past calendar year:

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REVIEWER NOTES:

VII. TRAINING

1. How is information gained from training sessions shared with agency staff?
2. How are DCF Child Care Operation Memos (OPS) and Technical Assistance Memos (TAMs) information disseminated to agency staff?
3. Please identify child care training needs that your agency has that may not have been listed on the previously submitted Child Care Agency Annual Summary, DCF-F-425-E.
4. What is your agency's child care training delivery format preference: face to face, computer-based, self-paced study manuals, desk aids or other?

REVIEWER NOTES:

VIII. CONFIDENTIALITY AND SECURITY

A. Agency Describe Confidentiality Safeguards

1. Does your agency have written confidentiality policies or procedures for staff?
 Yes No
If yes, attach a copy.
2. How are new child care workers trained about confidentiality and restrictions for disclosing information about program participants?
3. Describe agency procedures for providing ongoing training for staff about confidentiality restrictions including HIPPA.

REVIEWER NOTES:

B. Security Automation - Case Records and Record Retention

1. Describe your agency's processes for ensuring procedures for safeguarding passwords.
2. Describe your agency's process for ensuring that workers who leave employment or no longer require

CC Subsidy Agency Monitoring

access have security access suspended from the State's automated systems; CARES/CWW CSAW/CCPI/WISCCRS/YoungStar/WebI/ECF.

3. If your agency's subcontractors have access to State automated systems, describe security safeguards that apply to subcontractors specific to; CARES/CWW/CSAW/CCPI/WISCCRS/YoungStar/WebI/ECF.
4. Describe how client and provider paper files are secured and maintained for required minimum retention periods.
5. Describe your agency's procedures for granting/approving provider Child Care Provider Information, (CCPI) security clearance, which includes:
 - a) Approving, viewing, or entering attendance in CCPI; and
 - b) Denying CCPI access to a provider (e.g., when the provider has falsely reported attendance or the agency has learned the user has shared his/her user ID with others).
6. Describe your agency's process for obtaining retro security access for staff, which includes:
 - a) CCPI retro attendance of more than 90 days.
 - b) CSAW retro authorization of more than 90 days.
7. Describe your agency's internal steps for changing a provider's attendance reporting from "Weekly" to "Daily," or "In-Out" mode of attendance reporting.

REVIEWER NOTES:

IX. PURCHASED CHILD CARE SERVICES

DCF understands your agency purchases child care functions or services from the following Service Providers. *(Complete by Reviewer)*

Child Care Function/Services	Service Provider Name
Child Care Eligibility	
Child Care Authorization	
Child Care Fraud (Client/Provider investigations, overpayment calculation)	
Child Care Certification	
Other	
Other	

1. Does your agency pay any other service provider for child care functions not already listed above?
 Yes No

CC Subsidy Agency Monitoring

If yes, list service provider name, address, and describe what service you pay for.

2. Describe positive or negative issues as a result of purchasing child care services.
3. Do you anticipate making changes regarding the purchasing of child care services?

REVIEWER NOTES:

X. AGENCY BEST PRACTICES

1. Identify and describe any best practices that your agency wants to share with the reviewer.

REVIEWER NOTES:

XI. DCF SUPPORT

1. What concerns or issues would your agency like DCF to be aware of?
2. Identify any areas of concern DCF can assist with to improve the way your agency administers the child care subsidy program:

REVIEWER NOTES:

XII. POST REVIEW RESULTS *(Complete by Reviewer)*

1. Agency follow up items:
2. DCF/BRO follow up items:

Completed document returned to agency: **Date**