

COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

October 18, 2019

MEMORANDUM

TO:	The Honorable Thomas K. Norment, Jr. Co-Chairman, Senate Finance Committee
	The Honorable Emmett W. Hanger, Jr. Co-Chairman, Senate Finance Committee
	The Honorable S. Chris Jones Chairman, House Appropriations Committee
	Daniel Timberlake Director, Department of Planning and Budget
FROM:	Karen Kimsey Director, Virginia Department of Medical Assistance Services

SUBJECT: Operations and Costs of the Cover Virginia Call Center - FY2019

The 2019 Appropriations Act Item 307 O.1 states the Department of Medical Assistance Services shall report on the operations and costs of the Medicaid call center (also known as the Cover Virginia Call Center). This report shall include number of calls received on a monthly basis, the purpose of the call, the number of applications for Medicaid submitted through the call center, and the costs of the contract. The department shall submit the report by August 15 of each year to the Director, Department of Planning and Budget and the Chairmen of the House Appropriations and Senate Finance Committees.

Should you have any questions or need additional information, please feel free to contact me at (804) 786-8099.

KK/

Enclosure

pc: The Honorable Daniel Carey, M.D., Secretary of Health and Human Resources

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Annual Report: Operations and Costs of the Cover Virginia Call Center-FY2019

A Report to the Virginia General Assembly

August 15, 2019

Report Mandate:

The 2019 Appropriations Act Item 307 O.1 states, "The Department of Medical Assistance Services shall report on the operations and costs of the Medicaid call center (also known as the Cover Virginia Call Center). This report shall include number of calls received on a monthly basis, the purpose of the call, the number of applications for Medicaid submitted through the call center, and the costs of the contract. The department shall submit the report by August 15 of each year to the Director, Department of Planning and Budget and the Chairmen of the House Appropriations and Senate Finance Committees."

Background

The Cover Virginia Call Center began operations in October 2013 to fulfill a mandated requirement of the Patient Protection and Affordable Care Act (PPACA), which became law on March 23, 2010.

The call center offers a toll-free number for individuals to call and apply for Medicaid and FAMIS (Virginia's Children's Health Insurance Program), obtain application status updates and complete annual renewals. There are interpretation services available, as well as Spanish speaking representatives available for callers who designate that they speak Spanish only. The call center assists with sending out Medicaid/FAMIS replacement cards; referrals to managed care plans; assisting with 1095B (IRS proof of insurance) inquiries, and other customer services for the citizens of the Commonwealth. Additionally, during 2018, the Cover Virginia call center staffed up to receive Fast Track enrollments during Virginia's Medicaid Expansion implementation. The call center assisted with 9,423 Fast Track applications during that time.

Call Center Call Volume

Over the last fiscal year, the total number of calls to the call center averaged approximately 83,691 calls per month, which equated to 1,004,291 calls for the year. This is compared to the previous fiscal year monthly average of 52,000 calls. The center answered an average of approximately 52,500 calls per month, compared to 42,600 in the previous fiscal year with an average 37% of calls being handled in the interactive voice response (IVR) system. DMAS requires the call center to meet certain service level deliverables, such as 90 percent of calls answered within 90 seconds, and to maintain an abandonment rate which does not exceed five percent of calls received by representatives.

About DMAS and Medicaid

The DMAS' mission is to improve the health and well-being of Virginians through access to high-quality health care coverage.

DMAS administers Virginia's Medicaid and CHIP programs. Through the Medallion 4.0 and Commonwealth Coordinated Care (CCC) Plus managed care programs, more than 1 million Virginians access primary and specialty health services, inpatient care, behavioral health, and addiction and recovery treatment services. In addition, Medicaid long-term services and supports enable thousands of Virginians to remain in their homes or to access residential and nursing home care.

Medicaid members historically have included children, pregnant women, parents and caretakers, older adults, and individuals with disabilities. In 2019, Virginia expanded the Medicaid eligibility rules to make health care coverage available to close to 400,000 newly eligible, low-income adults.

Medicaid and CHIP (known in Virginia as Family Access to Medical Insurance Security, or FAMIS) are jointly funded by Virginia and the federal government under Title XIX and Title XXI of the Social Security Act. Virginia generally receives a dollar-for-dollar federal spending match in the Medicaid program. Medicaid expansion qualifies the Commonwealth for a federal funding match of no less than 90 percent for newly eligible adults, generating cost savings that benefit the overall state budget.



Time Period By Month, Quarter & Calendar Year	Total Calls to Cover VA	Calls Answered	IVR Served Calls
July 2018	46,710	31,489	14,762
August 2018	51,864	36,479	15,523
September 2018	46,942	33,191	14,598
1st Quarter	145,516	101,159	44,883
October 2018	70,012	46,546	26,325
November 2018	104,961	84,077	27,895
December 2018	133,813	92,417	44,404
2nd Quarter	308,786	223,040	98,624
January 2019	146,228	100,216	42,039
February 2019	99,272	67,008	27,876
March 2019	89,632	62,629	24,436
3rd Quarter	335,132	229,853	94,351
April 2019	82,026	52,555	27,255
May 2019	69,605	47,113	19,619
June 2019	63,226	42,074	18,999
4th Quarter	214,857	141,742	65,873
Fiscal Year	1,004,291	695,794	303,731
Monthly Avg	83,691	57,983	25,311

Data Source: Interactive Intelligence (ININ) Phone System

The graph below provides another visualization of the volume of calls per quarter.



Source: Cover Virginia Monthly Reports

Purpose/Reason for Calls

The chart below lists the top 10 reasons citizens contacted Cover Virginia in the last fiscal year. The top three reasons, general inquiry, benefit inquiry and new application represent 61 percent of all calls received. Some callers may call for more than one reason; however, only one reason is selected.

Top Ten Call Reasons by volume		
General Inquiry – usually callers without a case record		
New Application – new applicants not known to the system		
Benefit Inquiry – caller's inquiries on general benefits		
New Application Status – new applicants inquiry on status		
Change Request – members reporting a change		
Renewal Application – members calling about a renewal		
ID Card Request – member requesting ID card replacement		
MCO Change – caller requesting MCO change (FAMIS)		
Correspondence – caller requesting clarification on a letter		
Cancellation Request – caller requesting cancellation of		
application or coverage.		



Medicaid and FAMIS Applications

The second highest call reason is for assistance in completing a Medicaid or FAMIS application. In fiscal year 2019, Cover Virginia provided telephonic application assistance with 95,804 new applications, compared to 65,927 the previous fiscal year. In addition, the call center assisted with an additional 13,909 renewal applications. The call center assists with an average of nearly 5,500 new applications and over 1,100 renewals each month. The table below shows the number of new applications submitted per month.

Month	New Applications Taken
Jul-2018	5,198
Aug-2018	5,860
Sep-2018	4,528
Oct-2017	5,870
Nov-2018	16,647
Dec-2018	12,208
Jan-2019	11,386
Feb-2019	7,984
Mar-2019	7,619
Apr-2019	6,390
May-2019	6,548
Jun-2019	5,571
Total	95,809

Cost of the Contract

The Call Center's monthly fixed operations fee is \$1,014,821. The annual cost is \$12,177,852.

