**Voice of the Customer**

**Roll-up**

**Early Intervention Program Value Stream Mapping Event**

March 25 – 28, 2013

**Income**

Understanding of how income is defined: understanding of household income, roommate, partner, renter, child support, etc.

Proof of 2 months of income documentation can be difficult for many clients and take a long time to gather, especially when there are job changes or for agricultural workers

Asset definitions are not clear, description of allowable resources

Understanding of “Spend-down”, EIP and “spend-down” data share should be stronger

Case managers would like to have income on auto-renewal letters

**6 Month Renewal**

General dislike of the 6 month renewal versus annual renewal

Request only changes on 6 month renewals

Do not ask for CD4 and Viral Load every 6 months

Federal award letter is annual, don’t request at 6 months

Non-renewals (timely) increased when switched to 6 month renewal

**Short form Application Form**

Short form eliminates travel

Short form works well

**EHIP Requirement**

Client can lose insurance if all paperwork is not in on time

EHIP communication is amazing

**Case Manager**

EIP should inform case managers when policy or procedures change

Suggest a monthly newsletter to case managers

EIP should tell clients to work with a case manager and make EHIP/EIP application at same time

Clients are not always getting letters (in timely fashion), case manager has email copy

Clients should be able to share information with case managers as they get it.

EIP should send list of renewals to case managers at the beginning and end of each month, case Management would like reminders for those late on renewals

Case managers can contact Christina (EIP) for help

Travel time to case manager for client can be long (45+ minutes)

Be transparent, clients and case managers work together

Extra work on case manager if clients don’t get letters

Case manager doesn’t always contact client within 7 days when case manager receives notice from EIP

**Letters**

Letters are outdated or late by the time client receives it

Double sided letters/forms make case managers re-copy to single side for faxing

Dental information not on all letters

Insurance Card not part of letter, card does not equal current eligibility

Pre-fill applications for renewals

**Medical appointments**

Travel to (medical) appointments that don’t coincide with renewal

Have forms ready for doc visit

Non-HIV related care (not covered before disability determination)

**Pharmacy**

Chronic problems with Walgreens

Certain RX might cause problems at Walgreens

Medical provider or pharmacist could verify eligibility and insurance (not the client)

Requiring pharmacy prescription history is extra work for the client

**Release of Information**

WSHIP Release of Information form combined with EHIP form, Client release of information permission of emailed documentation

**Use of electronic methods**

Use email and email attachments from clients or case managers for application information

EIP emails to EHIP with client list for 90 days

Recommendation for electronic application, DSHS accepts secure mail, so why not EIP

Ability to fax all applications

Recommendation for acceptance of electronic signatures

Data sharing in real time (of EIP eligibility status), live data share between EIP and EHIP

Confirmation receipt (by EIP staff) of faxes

HIPPA restrictions/requirements on information sharing

CAREWare would allow document upload/sharing (?)

**Across EIP/EHIP**

After EIP eligibility how long does it take to get the insurance? (EHIP timeframe)

Backlog of application processing creates problems with communication, insurance

Status verification/document chasing

Clients think that when they apply to EIP they are also applying to EHIP