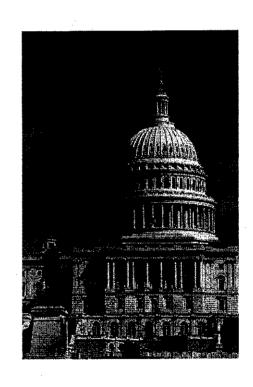
Medical Support: Recent Developments on How We Will Measure Success



The Child Support Performance and Incentive Act of 1998

Required HHS to:

- "develop a performance measure based on the effectiveness of States in establishing and enforcing medical support obligations" and
- "make recommendations for the incorporation of the measure, in a revenue neutral manner, into the incentive payment system".

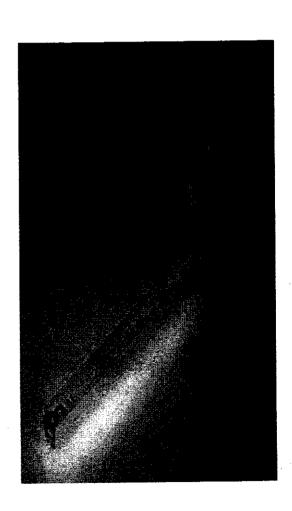




Current Five Incentive Measures

- 1. Paternity Establishment
- 2. Support Order Establishment
- 3. Current Collections
- 4. Arrears Collections
- 5. Cost-Effectiveness

6th Measure to Develop: Medical Support





Goal 3: All Children in IV-D Cases Have Medical Coverage

Objective A: To increase the Percentages of IV-D Cases with Orders for Medical Support Indicator 1: Percentage of IV-D Cases with Support Orders in which Medical Support is Ordered (Possible Incentive Indicator)*

Objective B: To increase the Percentage of IV-D Cases in which Medical Coverage is Provided

Indicator 1: Percentage of IV-D Cases with Support Orders in which Medical Support is Ordered and Provided (Possible Incentive Indicator)*

Indicator 2: Percentage of IV-D Cases with Medical Coverage Provided from Any Source

Indicator 3: Medicaid Cost Savings
Attributed to Medicaid Eligible Children in the
IV-D Caseload Covered by Private Insurance
or Receiving Cash Medical Support

*Excludes Arrears Only Cases



Establishment Indicator: % of Cases With Orders in Which MS is Ordered

Numerator: Cases Open at the End of the FY in Which Medical Support is Ordered (Line 21)

Does not include arrears only cases

Denominator: Cases Open at the End of the FY in With Support Orders Established (Line 2)

Minus: Arrears Only IV-D Cases Open at the End of the FY with Orders Established (Line 2e)



Enforcement Indicator: % of Cases w/ Orders in Which MS is Ordered & Provided

Numerator: Cases Open at the End of the Fiscal Year in which M.S. is Ordered and Provided (Line 21a)

Includes cash and health insurance

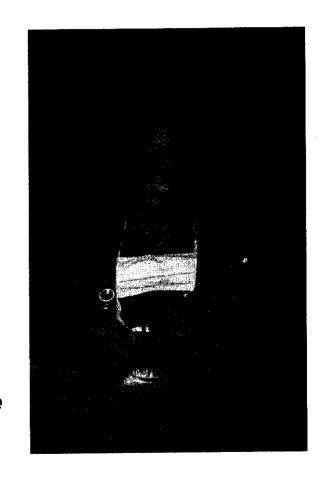
If private health insurance is ordered, it does not include cash unless it is documented that private health insurance is unavailable

Includes publicly-funded health insurance only if it is documented that private health insurance is unavailable and parent help pay the cost of Medicaid or SCHIP

May be provided by any person

Denominator: Cases Open at the End of the FY with Support Orders Established (Line 2)

Minus Arrears Only Cases (Line 2e)





How We Got to These Measures

- Facilitator
- State representative from each region
- Advocates represented
- Reviewed available data
- Reviewed reports and notes on prior MS indicator workgroups
- Considered many possible measures
- Sought comments from states, feds, and advocates



Proposed Timeline for Implementation of Medical Support Incentive Indicator

May 2004	Define the two measures				
May 2004	Strategic Plan Goals, Objectives & Indicators discussed				
June-July 2004	Definitions drafted and review by indicator workgroup				
Summer 2004	Modify OCSE 157 form				
Aug-Sept 2004	OMB Review				
Apr-May 2005	DCL & Form 157 distributed. States change system				
Oct. 2005	States begin collecting data				
OctDec 2006	States report data for 1st year – FY 2006				
Jan-Aug 2007	Data Reliability Audit for year one – FY 2006 data				
Summer 2007	Set the performance levels/weight				
OctDec 2007	States report data for 2nd year – FY 2007				
JanAug 2008	DRA for year two – FY 2007 data				
Effective FY 08*	Regulation and/or legislation				
OctDec 2008	States report data for 3 rd year – FY 2008				
FY 2008*	1st incentive payment for FY 2007 performance				



PERFORMANCE

Percent of Cases with Orders with Medical Support Ordered

- In FY 2006, 73% of cases with orders had medical support included.
- In FY 2005, 65% of cases with orders had medical support included.
 - > Arrears cases account for most of the increase.

Percent of Cases with Orders in Which Medical Support is Ordered and Provided

- In FY 2006, less than 20% of cases with orders had medical support orders that were provided.
 - > Range among states—from 50% to 1%--with the majority of states performing under 10%.

Next Steps

- 1. States report second year of medical support data
- 2. Reconvene Medical Support Indicator Workgroup
 - 3. Review data
 - 4. Set performance standards and weights
 - 5. Consider effect of DRA legislation
- 6. Decide how to incorporate measures in incentive system
 - 7. Write regulation or propose legislation





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Table A CASES WITH MEDICAL SUPPORT ORDERED, ORDERED AND PROVIDED, ORDERS ESTABLISHED, AND ARREARS-ONLY CASES WITH ORDERS, FY 2006

ESTAB	LISHED, AI	ID WUNTUM	3-OHEI CASES			
	Cases Open	Cases Open in Which Medical	Cases Open	Arrears-Only	Percent of IV-D Cases With Orders in Which	Percent of IV-D Cases With Orders in Which Medical
	in Which	Support	With	IV-D Cases With	Medical	Support
	Medical	is Ordered	Support	Orders	Support	is Ordered
AT. 750	Support	and Provided ^{1/}	Orders Established	Established 1/	is Ordered	and Provided
STATES	is Ordered					1.8%
ALABAMA	78,887	2,254	185,315	58,417	62.2%	29.9%
ALASKA	26,450	8,364	41,500	13,481	94.4% 81.8%	12.4%
ARIZONA	97,130	14,727	155,258	36,473 24,073	72.6%	19.5%
ARKANSAS	57,008	15,327	102,559	440,151	82.7%	20.5%
CALIFORNIA	771,953	191,561	1,373,276 122,641	36,173	81.7%	25.5%
COLORADO	70,602	22,042 23,620	143,001	40,144	90.3%	23.0%
CONNECTICUT	92,840 22,483	2,856	42,789	4,134	58.2%	7.4%
DELAWARE DIST. OF COL.	8,859	2,793	35,278	10,889	36.3%	11.5%
FLORIDA	235,695	28,086	547,872	113,506	54.3%	6.5%
PLORIDA	233,033	20,000	•			0.20/
GEORGIA	267,544	28,010	361,008	59,612 NA	88.8% 58.5%	9.3% NA
GUAM	3,975	NA o 570	6,797	16,964	64.1%	22.4%
HAWAII	27,369	9,570	59,672		90.1%	5.5%
IDAHO	55,835	3,395	86,936	24,994 95,933	51.3%	9.9%
ILLINOIS	157,310	30,256	402,438	48,121	67.1%	12.0%
INDIANA	131,015	23,424	243,490		88.9%	35.6%
IOWA	101,266	40,557	158,171	44,245 24,502	75.3%	12.5%
KANSAS	55,176	9,158	97,760		69.0%	7.6%
KENTUCKY	139,148	15,350	255,373	53,804	98.4%	6.5%
LOUISIANA	172,027	11,303	207,781	32,979	96.470	0.570
MAINE	25,572	2,533	58,777	14,859	58.2%	5.8%
MARYLAND	92,894	'NA	205,914	52,829	60.7%	NA
MASSACHUSETTS	94,493	20,011	203,994	40,560	57.8%	12.2%
MICHIGAN	602,165	186,103	764,500	157,569	99.2%	30.7%
MINNESOTA	122,002	58,806	206,309	51,408	78.8%	38.0%
MISSISSIPPI	71,053	4,528	163,133	18,787	49.2%	3.1%
MISSOURI	205,504	49,175	304,641	68,356	87.0%	20.8%
MONTANA	22,546	10,445	33,300	8,694	91.6%	42.4%
NEBRASKA	46,249	13,755	82,324	17,510	71.4%	21.2%
NEVADA	37,818	10,483	74,317	9,145	58.0%	16.1%
NEW HAMPSHIRE	19,079	1,603	30,330	6,324	79.5%	6.7%
NEW JERSEY	154,741	41,385	294,424	51,871	63.8%	17.1%
NEW JERSET	19,037	5,577	37,618	7,837	63.9%	18.7%
NEW YORK	407,209	115,372	728,908	72,007	62.0%	17.6%
NORTH CAROLINA	221,410	51,662	332,631	56,516	80.2%	18.7%
NORTH DAKOTA	21,656	11,243	31,626	5,619	83.3%	43.2%
OHIO	382,770	170,927	701,380	132,906	67.3%	30.1%
OKLAHOMA	78,597	8,428	121,199	27,932	84.3%	9.0%
OREGON .	98,038	16,988	166,833	50,927	84.6%	14.7%
PENNSYLVANIA	230,317	117,621	464,874	87,924	61.1%	31.2%
		56	166,379	21,968	1.1%	0.0%
PUERTO RICO	1,597		34,019	4,578	72.1%	25.8%
RHODE ISLAND	21,241	7,591	160,444	7,402	29.7%	6.3%
SOUTH CAROLINA	45,489	9,672	30,119	8,907	85.9%	34.5%
SOUTH DAKOTA	18,216	7,328	246,671	58,991	62.9%	12.9%
TENNESSEE	118,131	24,186	811,184	68,720	79.8%	41.8%
TEXAS	592,602	310,296	68,269	12,236	95.2%	50.8%
UTAH	53,336	28,467	19,496	3,692	60.1%	20.9%
VERMONT	9,498	3,308	6,510	2,340	13.3%	1.3%
VIRGIN ISLANDS	555 188,007	54 21,966	299,804	49,583	75.1%	8.8%
VIRGINIA				100,359	93.8%	39.8%
WASHINGTON	196,608	83,417	309,979	19,051	60.9%	8.6%
WEST VIRGINIA	47,422	6,671	96,915	71,185	89.6%	10.3%
WISCONSIN	205,932	23,737	300,940	11,973	86.7%	49.4%
WYOMING	14,952	8,523	29,215	·	72.9%	19.8%
TOTALS	7,039,308	1,914,570	12,215,891	2,559,160		21a / (2 - 2e)
Source: OCSE- 157.	Line 21	Line 21a	line 2	Line 2e	21 / (2 - 2e) for before percei	

^{1/}New reporting requirement. Arrears only cases are subtracted from the number of cases with an order before percentages

vare determined.

NA - Not Available.