Grant Outcomes Report

Increasing Health Insurance Enrollment by Transitioning from a Paper-Based to an Electronic Application Process

The Problem:

Approximately one million New Yorkers are estimated to be eligible for public health insurance but are not enrolled. To help reach these people, New York State designates a network of “facilitated enrollers” (FEs) to identify and assist eligible individuals with signing up for public health insurance programs such as Medicaid, Child Health Plus, and Family Health Plus. FEs are community-based organizations and health plans that are deputized to conduct face-to-face interviews with applicants and provide assistance with filling out applications, gathering and verifying documents, submitting applications to county agencies, and following up to ensure that enrollments are processed.

Public Health Solutions (PHS) has been an FE since 2001 and is active in Kings County, New York County, and Queens County. PHS has been the single most productive and accurate FE in the State for many years. Since 2001, its’ FE staff has helped complete and submit applications for more than 50,000 individuals. In 2008, they enrolled 12,204 individuals—a number higher than any other FE in the State. Demand for its services grew because of the recession; compared with the same period in 2007, PHS helped 25% more clients obtain health coverage during the fourth quarter of 2008.

Until recently, FEs had to rely on an entirely paper-based process that is time-consuming, error-prone, and redundant. Given these inefficiencies, the New York City Human Resources Administration (HRA) began accepting and processing fully automated applications.

Grant Activities & Outcomes:

The goal of this grant was to allow PHS to fully implement an electronic application process, thereby increasing enrollment by 40% in one year. Major activities of the grant included:

- Increasing Health Insurance Enrollment by transitioning from a Paper-Based to an Electronic Application Process
- Purchasing an annual subscription to certified software (Bluemark), laptops, scanners, and printers to fully automate the application process;
- Training FEIs to use the electronic application software;
- Conducting four months of formal testing of the system by submitting applications electronically to HRA; and
- Transitioning all processing of applications to the automated system.

PHS completed all grant activities. The transition to automated processing took nine months, with the formal testing phase taking longer than anticipated. Since then, PHS has been submitting all new applications electronically to HRA.

As a result of the automated processing, the number of daily applications completed per FE increased from 4.8 to 5.9—a 24% increase. Overall, PHS completed 9,603 applications in 2010 compared to the 8,900 completed in 2009—an increase of 703 applications, or 8%. The disconnect in the per full-time equivalent productivity and overall increase in applications is due to attrition among PHS FEIs during the grant period.

In addition to the increase in the number of applications processed, the shift to electronic applications reduced processing time for HRA determinations from 45-90 days to 7-15 days. Program efficiencies also allowed PHS to convert a full-time administrative position to an additional enrollment position.

PHS summarized the lessons learned from transitioning from paper-based to electronic applications in an issue brief that was disseminated to other FEIs.¹

The Future:

PHS is continuing to process applications in a fully automated way and plans to do so indefinitely. Its experience provides important lessons learned for other FEIs that may be contemplating a transition to electronic applications. Federal health care reform requires a web-based portal to make eligibility and enrollment decisions, and the experience obtained through this grant has prepared PHS to participate in that new landscape.

# BACKGROUND INFORMATION:

## ABOUT THE GRANTEE
Established in 1957, Public Health Solutions is a nonprofit organization that provides health and related social services, conducts demonstration and research programs, and offers management services to improve community health and strengthen health policy. Programs operated by Public Health Solutions include neighborhood WIC, early intervention service coordination, health insurance enrollment, nutrition outreach and education, and public health emergency preparedness among others.

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