

Note: Some information, such as email addresses and direct phone numbers, have been removed from the original email.

From: Pamela A. Keene
Sent: Wednesday, December 04, 2013 1:23 PM
To: jim michael-burriss
Subject: RE: "Flat File" inquiry/WABE

Jim – here's our response:

The interim enrollment option recently released by the Centers for Medicare and Medicaid Services (CMS) does create concern for the Georgia Department of Community Health (DCH) as we continue to work with the Federally Facilitated Marketplace (FFM) to appropriately enroll individuals in Medicaid and the Children's Health Insurance Program (CHIP). This proposed process requires DCH to manually input the files, creating a process that is administratively inefficient and increases the risk for duplication of members in the State's system. Any duplicate files will have to be eliminated once the electronic FFM account transfers begin.

Further, accepting the AT flat file would effectively move Georgia from using the FFM as an assessment tool for eligibility to determining eligibility. Georgia has held that the state -- not the FFM -- should evaluate and determine eligibility for Georgia Medicaid.

The SHO/SMD letter offers that the state could use the AF file but caveats that the file would not be the file that is received today. The file would be enhanced to add other fields that the states are not receiving today. The accuracy and completeness of this new file would have to be assessed by the State to determine if it is a viable option.

Additionally, it is anticipated that problems may arise in synching Georgia's data with the FFM. States have built their systems to connect to and from the FFM, rather than the AT flat file. There is no automated support in the AT flat file, nor has there been any testing on the AT flat files.

Finally, this interim process may prevent members from receiving timely notifications regarding their eligibility and enrollment. DCH is committed to providing its members the best in customer service, and looks forward to any further guidance from CMS to ensure a seamless transition.

Thanks.



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