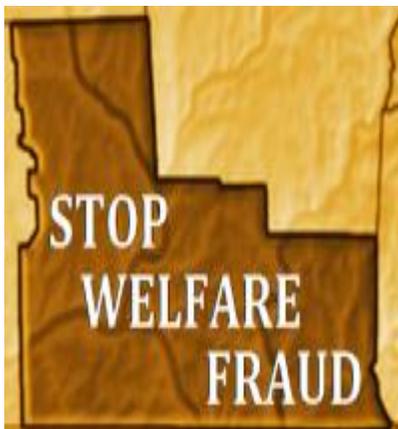


### UPCOMING CWFC/SSTABS CONFERENCE

In late February you will receive information on the upcoming conference to be held at the Embassy Suites in Loveland, Colorado from May 3 through 5, 2017.

Registration will be done online this year beginning in March, 2017. You will find the registration process to be exceptionally easy and informative.



# BENEFITS OF MEMBERSHIP IN CWFC

Most non-profit membership driven organizations only offer no-cost incentives. In fact, one magazine of American nonprofits states one strategic mistake often made by nonprofits is “thinking [tangible] membership benefits are important” and advises nonprofits to focus on the other reasons most people join nonprofit organizations “not on key chains, magnets and other gewgaws”.

As a member of CWFC, here are some of the benefits you will receive.

- Education
- Networking
- Access to specialized non-profit advocacy, news, information and expertise
  - Certain basic rights such as the power to vote for directors and approve laws/by-laws
  - Direct access to email communication
  - Opportunities to participate in the annual conference with early notice of the “call for participation” in the conference with information about the theme and how to submit proposals for presentations
  - Correspondence with and from executive staff, board of directors, general membership and partner organizations
  - “a membership fee is a small price to pay for the abundance of knowledge, benefits, education, and genuine care that they give each of their members”
  - E-newsletter, free live and recorded webinar trainings, access to online library of articles, free job listings
  - Gives an opportunity to reach out to a network of professionals in the field
- Discounts on professional development trainings and leadership gatherings, exclusive access to our help desk to answer your most pressing questions, networking
- Serves as your voice and advocate on public policy issues that impact the ....by state and federal legislative monitoring, including lobbying when and where appropriate, public policy updates throughout the year,

legislative alerts regarding policy action, long-term agenda development through ..., ongoing education of elected officials and the general public, general advocacy efforts.

- Builds leadership and management capacity
- Deepens the understanding and builds awareness of public assistance fraud

Aleissa Thomas

## TIME TO JOIN OR RENEW YOUR MEMBERSHIP

It's that time of year again when CWFC asks for your new/renewed membership to Colorado Welfare Fraud Council. Our distinguished membership consists of state and local human/social services directors, investigators, eligibility staff, program administrators, along with individuals from other agencies.

As a member of CWFC, you will be able to collaborate with other members, learn other county processes in addition to receiving a subscription to our quarterly newsletter the Informer; our Resource Guide; receive training that assists you with a welfare fraud investigation or eligibility interviews; and a membership directory of other CWFC members throughout the state. You will also receive an e-mail address that links you to the CWFC Board that will help any of our members with a problem case or other questions; CWFC posters to display; a video library of some of the past training sessions; and our annual conference. Members will also have voting privileges, be eligible to seek elected officer positions, be eligible for appointment as a Board of Directors Member, and other benefits for only \$20.00.

I encourage you to renew or become a new member and help us keep integrity in program integrity.

If you have any questions about your membership, please contact myself at either [Shawnnielsen@elpasoco.com](mailto:Shawnnielsen@elpasoco.com) or (719)520-6965 or Sonia Salas at [ssalas@larimer.org](mailto:ssalas@larimer.org) (970)498-7634.

Thanks again for being part of the CWFC family and becoming a vital part of a respected, trusted and committed organization.

CWFC President,

Shawn Nielsen

## Reforming Medicaid, Beginning on Day One

By Chris Jacobs

A recent article listing five ways in which Health and Human Services Secretary-designee Tom Price could reform health care surprisingly excluded solutions for our nation's largest taxpayer-funded health care program—Medicaid. That's right: While Medicare spends more federal dollars, state and federal taxpayers spend more on Medicaid overall. With federal program spending scheduled to top \$400 billion next fiscal year, and Medicaid consuming a large and growing share of state budgets, Dr. Price should waste no time making critically important reforms.

Ultimately, conservatives should work to convert Medicaid into either a block grant or per capita cap, where states would receive fixed payments from the federal government in exchange for additional flexibility to manage their programs as they see fit. While Congress must approve the legislative changes necessary to create a block grant or per capita cap, Dr. Price and Centers for Medicare and Medicaid Services Administrator-designee Seema Verma—who has a great deal of experience managing state Medicaid programs—can take steps, beginning on Day One, to give states more flexibility and freedom to experiment.

The prime place for Price and Verma to start lies in Medicaid’s “1115 waivers,” so named for the section of the Social Security Act (Section 1115) that created them. Under the 1115 process, HHS can waive certain requirements under Medicaid and the State Children’s Health Insurance Program (SCHIP) for “any experimental, pilot, or demonstration project which, in the judgment of the Secretary, is likely to assist in promoting the objectives” of the programs.

Unfortunately, such waiver authority is only as effective as the Administration that chooses to exercise it—or not, as has been the case for much of the last eight years. One section of Obamacare actually increased the bureaucracy associated with 1115 waivers, requiring states to undertake a lengthy process, including a series of hearings, before applying for a waiver (because Obamacare itself was written in such a transparent manner). Subsequent legislative changes have sought to streamline the process for states requesting extensions of waivers already granted.

However, Dr. Price and Ms. Verma can go further in allowing states to reform Medicaid. They can, and should, upon taking office immediately propose a template waiver application for states to utilize. They can also publicly indicate their intent to approve blanket waivers—that is, waiver applications meeting a series of policy parameters will be automatically approved. While Congress should ultimately codify state flexibility into law—so no future Administration can deny states the ability to implement needed reforms—the new Administration can put it into practice while waiting for Congress to act.

As to the types of waivers the Trump Administration should look favorably upon, House Republicans’ “Better Way” proposal and a report issued by Republican governors in 2011 provide two good sources of ideas:

**Work Requirements:** Despite repeated requests, the Obama Administration has steadfastly refused to allow states to impose a requirement that able-bodied Medicaid beneficiaries either work, look for work, or prepare for work through enrollment in job-training programs. Because voluntary job-referral programs have led to impressive success stories, states should have the ability to impose work requirements for Medicaid recipients.

**Cost-Sharing and Benefit Design:** Whether through enforceable yet reasonable premiums, modest co-payments, Health Savings Account-like mechanisms, or a combination of all three, states should have greater freedom to utilize consumer-directed health care options for beneficiaries. These innovations would not only turn Medicaid into a product more closely resembling other forms of health insurance, they can also help reduce costs—thus saving taxpayers money.

**Premium Assistance and Wellness Incentives:** Current regulatory requirements for premium assistance—in which Medicaid pays part of the cost associated with an eligible individual’s employer-based insurance—have proven ineffective and unduly burdensome. States should have more flexibility to use Medicaid dollars to subsidize employer coverage, without providing additional wrap-around benefits. Likewise, states should have the ability to offer incentives for wellness and healthy behaviors in their Medicaid programs, just as successful employers like Safeway have done.

**Payment Reforms and Managed Care:** With health care moving away from a fee-for-service model, in which doctors and hospitals get paid for each service performed, states should have the ability to innovate. Some may wish to implement bundled payments, which would see Medicaid providing a lump-sum payment for all the costs of a procedure (e.g., a hip replacement and associated post-operative therapy). Others may benefit from a waiver of the current requirement that Medicaid beneficiaries have the choice of at least two managed care plans—a requirement that may not be feasible in heavily rural areas and states.

**Program Integrity:** With fraud endemic in federal health care programs, states should receive flexibility to track down on scofflaws—for instance, the ability to hire contingency fee-based contractors, and more scrupulously verify beneficiary eligibility and identity. By monitoring suspicious behavior patterns through the use of “big data,” these efforts could save both Washington and the states billions.

Reforming a program that will cost state and federal taxpayers an estimated \$607.2 billion this fiscal year will not be easy, and will not happen overnight. But the sprawling program’s vast size and scope also demonstrate why the new Administration should start its work immediately. While Congress can and should fundamentally reform Medicaid, HHS can use blanket 1115 waivers to allow states to experiment as soon as they can. In this way, the “laboratories of democracy”

can drive the innovation needed to bring Medicaid into the 21st century, lowering health costs and saving taxpayers money.

- Chris Jacobs, the Founder and CEO of Juniper Research Group, is a policy writer and analyst based in Washington, DC. He brings with him over a decade of policy experience in a variety of roles on and off Capitol Hill. Chris previously worked as a Senior Policy Analyst for the Heritage Foundation and the Joint Economic Committee's Senate Republican staff. Before that, he worked as a Policy Advisor for the House Republican Conference under Chairman Mike Pence during the debate surrounding the Patient Protection and Affordable Care Act, and as a Health Policy Analyst for the Senate Republican Policy Committee during the first two years of the law's implementation. He got his start on Capitol Hill as an intern for then-Congressman Pat Toomey of Pennsylvania.

# **CWFC** *olorado Welfare Fraud Council*

## Membership Form

- I am a:  New Member  
 Returning member (after more than one year's absence)  
 Renewal

NAME: \_\_\_\_\_

AGENCY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

TELEPHONE: Desk: \_\_\_\_\_ Cell: \_\_\_\_\_

FAX: \_\_\_\_\_

Email: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Please report changes in your contact information as soon as possible.*

Annual membership dues are \$20.00. Memberships are not transferrable from one individual to another. Please make checks payable to CWFC and mail to:

1963 South Vivian Street  
Lakewood, CO 80228

*Thank you for working to uphold the mission and goals of the Colorado Welfare Fraud Council.*