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ACCESSNebraska Special Investigative Committee
July 17, 2015

[LR33]

The ACCESSNebraska Special Investigative Committee met at 1:30 p.m. on Friday, July 17, 2015, in Room 1525 of the State Capitol, Lincoln, Nebraska, for the purpose of conducting a public hearing on LR33. Senators present: Sara Howard, Chairperson; John McCollister, Vice Chairperson; Joni Craighead; Matt Hansen; Merv Riepe; and John Stinner. Senators absent: Sue Crawford. The Committee on

SENATOR HOWARD: Good afternoon and welcome to the ACCESSNebraska Special Investigative Committee. This is our first hearing. I'm Senator Sara Howard. I represent District 9 in the Nebraska Legislature and I'll be chairing the investigative committee this year. We'll start with introductions and I'll start on my far right with our committee clerk.

JAMISON WYATT: My name is Jamison Wyatt, committee clerk today.

SENATOR STINNER: John Stinner, District 48.

SENATOR HANSEN: Matt Hansen, District 26.

SENATOR MCCOLLISTER: John McCollister, District 20, Omaha.

SENATOR CRAIGHEAD: Joni Craighead, District 6, Omaha.

SENATOR RIEPE: Merv Riepe, District 12, which is Millard and Ralston, Omaha.

SENATOR HOWARD: Now we ask that you turn off or silence all of your cell phones. And today we're only going to have invited testimony. And we ask that each testifier will be allotted five minutes for the committee. And we're going to use the light system but very gently. (Laugh) So if it goes on red, I won't wave my arms and stop you then. We...let's see. Testifiers should bring the appropriate number of copies and handouts. I see we already have yours. This committee requires 12 copies. And let's see, we already have the sheets. And I think we'll get started. You ready to go?

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

COURTNEY PHILLIPS: Yep.

SENATOR HOWARD: Okay. Thank you, Ms. Phillips. [LR33]

COURTNEY PHILLIPS: (Exhibits 1, 2) So, thank you, Senator Howard. Good afternoon, Senator Howard and members of the LR33 ACCESSNebraska Special Investigative Committee. I'm Courtney Phillips and I serve as the CEO for the Nebraska Department of Health and Human Services. Thank you for asking us to be here this afternoon. Again, we value your interest and willingness to talk with us about your concerns, and I know our team at the Lincoln Customer Service Center appreciated your time in visiting with them this morning. Just, I'll deter a little bit from my written remarks that you all have in front of you. And, Senator Howard, based on our conversation this morning, for those members that were not able to attend the meet-and-greet and walk-through at the customer service center, just a little bit in terms of what is ACCESSNebraska. And that's the name that we selected here in our state for people that are accessing services for Medicaid and Economic Assistance benefits. It includes an on-line portal where people can apply for benefits, check the status of their benefits, as well as report changes and collect the documentation that we've requested. It includes four customer service centers, as well as a mail operation unit where we sort through mail, scan and index the information that's sent to our workers. It also includes local offices where our individual customers can go through and use the computers to submit information, drop off documents, as well as request meetings with a caseworker. So that's just a brief description in terms of what ACCESSNebraska is in a nutshell. Is that what you were looking for? [LR33]

SENATOR HOWARD: Perfect. [LR33]

COURTNEY PHILLIPS: Okay, great. Again, today I'm joined here by Felix Davidson, the Governor's chief operating officer, right here to my right; Calder Lynch, the director of Medicaid and Long-Term Care; Tony Green, acting director for Children and Family Services, right here on my left--those gentlemen. I very much look forward to hearing the testimony of the other groups and individuals appearing here today. We've spoken with many of them and we recognize the challenges they and those they serve have faced with ACCESSNebraska. We've also spent a considerable time meeting and talking with our staff who are on the front lines in the call centers

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

and offices. The insight we are gaining from these conversations are critical. They are key in identifying where some of the biggest opportunities lie to make the needed improvements, and those efforts have already begun. To be clear, ACCESSNebraska has had problems and still has problems today. We still have areas that we need to improve. I know you've heard that before, and I know that you and many of those that will be speaking later today are tired of hearing how things will soon get better and really want action. You want action, they want action, and so do we. I can tell you I feel a great deal of support from the Governor's Office. He made it quite clear in his State of the State when he said we need a culture in our state agencies that are people-centric. We need a system that cares for the entire person. He acknowledged though there are people who will continue to need our help and that they should be served effectively and with dignity and respect. And at the end of the day, that's why we are in our roles. The history of ACCESSNebraska has been well documented and I've had the opportunity to talk with many of you about it. I think it is important to recognize that we are talking about a complex system of interrelated parts. And you saw a lot of that today. As I know you heard in the visit this morning, ACCESSNebraska encompasses more than just a call center. It also represents the work of hundreds of...dozens of...staff in local offices, scanning and mail operations, complex eligibility policy development, and significant IT systems. It was developed over years and it will take additional time to get it right. Our focus now is on stabilizing the operation and making measured improvements that will truly impact our operations. And then we will work towards what are the long-term goals that we need to work through with the system? Before we began making changes, one of our first steps was to develop the metrics which we would measure success by. That's why we built the ACCESSNebraska dashboard to measure and demonstrate publicly how we're doing in an easy-to-understand format that's updated monthly on our Web site. And I believe you each should have a copy of it. The metrics show that for the past four months, we've met the federal standard for SNAP application processing time lines for both the expedited and nonexpedited applications. If you look in your chart, you'll see a year ago we were not meeting those measurements for either side. We're also meeting the federal payment accuracy rate. But we're still falling short on two of the SNAP performance metrics. We're falling short on our denial accuracy rates as well as our call times. If you look at the Economic Assistance customer service center call times, we're still high--a little over 23 minutes. Definitely we have some work to do in that area. The federal USDA Food and Nutrition Services has provided consultants for our SNAP program and they have been very helpful. They will release

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

their next report on the state data fairly soon, and we expect to see some improvements. On the Medicaid side you'll see that the call wait times are slightly over four minutes--looking pretty good on that side. We're exceeding the federal standards for application timeliness, and we have nearly 99 percent accuracy on determining Medicaid eligibility. But with that, we still face challenges here as well. I know today you will continue to hear concerns regarding lost paperwork and challenges with the universal caseload model. We take these concerns very seriously and we want to work with our stakeholders to find the appropriate solution. But these indicators are telling us that much of the immediate efforts should be focused on stabilizing operations on the EA side of ACCESSNebraska, and that's what we've been doing. With the help of Felix, we have a renewed approach. Rather than taking a more macro approach, we've narrowed our focus to a top ten list. These ten issues have been identified as being barriers to efficient operation. The list isn't extraordinary, but the activity behind it is. We have a cross-department team who's digging deep and making decisions based on research and data. We believe that concentrating on these ten items has the potential to make a dramatic improvement in our operations for both sides--EA and Medicaid. And you guys have a pretty detailed about the top ten and I'll just briefly touch upon them. And then in Q&A, if you have additional questions, we can just go through. So number one, a review of the mail operations. And what that entails is what does it look like in terms of us getting our mail in the door, getting it indexed and scanned so when the worker hits the call they have as much information as possible, which also would help reduce the call volume in terms of the number of people requesting their information. The second piece is looking at the interactive voice response, our call routing menus. And this is how many queues do we have in the systems, how clear is it for our individuals that we're serving that when they're accessing the call system that they can easily know which queue they need to be selecting--one, two, three, or four--how descriptive is it, and how many do we have? And so we're looking at condensing those and making them quite clear so an individual can access that information to reduce the number of calls that are needed to actually talk to someone on the line. Another area that we're looking at is our retention and recruitment of employees. This is a key area. And you'll notice that as we continue to have vacancies, increased vacancies will result in higher call volumes in terms of the length of time that an individual has to be on hold because there are not enough people answering those calls. So it's very important that we look at who we're getting in on the front door, what's that profile of the individual that's going to make a good employee at that particular area, and longevity of

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

that...the retention of that individual. So we're looking at developing that profile, what are some of the other areas that we could look at in terms of containing our individuals and retaining them. And then another piece that we've heard from some of our employees that are employees for a long period of time, what does it look like if I want to go back to school? Is there other opportunity for me to go to part time versus full time? And that's of benefit for the department, that we don't lose them completely, but how do we transition them to a part time? So that's another thing that we're looking at. We're also working with some of the colleges in those areas in terms of describing what do we do, who we are, and what's our need to try to build that pipeline. Another area that we're looking at is review of our policies. And you all have heard from both sides of the equation in terms of our policies from our employees in terms of the number of policies we have, the massive composite of information that they have to digest through, as well as sometimes, as policy changes, the misinformation. And we also heard from those that we serve on our customer side in terms of sometimes getting misinformation. And again, that goes back to how much information is being pushed and how is a policy changing. And so one of the things that we're looking at, the standing operating procedures that we put together, how do we streamline that, how do make it clearer for our employees. Medicaid did this on their side when we did the split, and so it's time we have to take that same look on the EA side. We're also spending a lot of time looking at the reasons individuals are calling our entity. What are those top ten reasons and how does that impact some of the areas in terms of our measures? And so you all know because you're getting the same type of calls in terms of, we're looking for our application, have you received it? Have you received our additional documentation? We may have lost our card; we need another one. So, really focusing on what are those top ten areas and how do we attack them. Another area we're looking at is after-call work. How do we define it? Is it measured the same across all areas? And what is encompassed in there that we can help streamline our employees that, once they're off a call, how much information and work they're having to do after they hang up a call in order to get back on another call. So what are some of the queues that we can put in place to help with this? Are there search criteria that we can put in, in terms of the N-FOCUS system? Can we really narrow down what they're having to put in the narrative? Can some of those things be standard? And so we're really taking a look back at some of the elements they're working on. Another area that we're looking at is our communications, and that goes for multiple sides. Internally and externally, how are we communicating with our team? Is it clear when we're sending a new policy, maybe a

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

federal change or a state change, can they clearly understand it? Is it just through a memo or do we have to do a training? And is that training clear for everyone? The other side is in terms of for our customers. Is our Web site very clear? Are the applications very clear? And so how do we make sure that it's clear not just for us that are working on our side, but for those that are accessing the system maybe for the first time or doing a renewal. Another area is our work force management. And something like this is one of the things that we have to look at and we've been taking a look at. What does our work force look like in terms of the work capability and capacity that we have? What does it look like in terms of our operation, our peak times, and staffing appropriately for that? And you all know you can expect that on a three-day weekend, that we would have when we come back the volume is going to be a lot higher. And so how do we staff appropriately? What does it look like when there's capacity in the local offices? How does some of that shift to them for that overflow of call volume? So those are some of the other areas that we're looking at. Another thing we're looking at is work task in terms of the things that come through the queue, they're not through the calls but information that the team has to work on whether it be change in income, additional documentation that comes in, other paperwork that's verification that they have to work outside of the calls--so again, those work tasks. The other area we're looking at is analyzing the data requested for reports. And this is one of the elements that was in the previous report from this committee in terms of what we've supplied and how concise and easy is it to understand. The report is going to be submitted at the end of the month. It's going to be in the same format from previously. But after that, we have...are working to develop a concise model that really is clear for everyone to understand and not just the true metric reporting, and a little bit more concise for the committee to understand. So these are the ten items that are a priority and is occurring every day. We believe this phase hold significant promise in stabilizing and improving our operations in the short term. As we work through improving these, we often find new improvement opportunities. If we believe adding it to the mix will result in dramatic improvement, we do it. In addition to the work, the cross-department team of project leads from program and operational areas meet weekly to provide input and updates to discuss and problem solve. On a daily basis, Economic Assistance representatives from the central administrative office, customer service centers, and local offices meet in a morning huddle both in person and via the telephone to discuss our daily operations, which have resulted in small changes that cumulatively should make noticeable differences. As I mentioned earlier, our priority right now is to make improvements in the system and operations so everyone,

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

including you, is comfortable with it. When that's stabilized, we'll broaden our work to included the long-term goals for the system as a whole. We're not yet at that point, but the push is there to make change happen. We'll all know we're being successful when we see the lines on the dashboard and the metrics move. Our calls will go down. Your calls will go down. Our clients and our partners will be less frustrated and our team's morale will be improved. Until then, we have work to do and our team is working hard and is committed to do that. If you have individuals who are experiencing problems and reaching out to you, please share that information with us. If you're hearing concerns, share it with us. But if you're also hearing good feedback, please let us know as well so we can share it to our team. The input is important because we are partners in the efforts to improve. So, thank you for your support, and I and our team are happy to answer any questions you may have. [LR33]

SENATOR HOWARD: Are there questions from the senators? Senator McCollister. [LR33]

SENATOR MCCOLLISTER: Yeah, thank you, Senator Howard. Compliance with federal standards is fairly important to us all and to you as well. You indicated there are two standards we aren't currently meeting with SNAP. Are we in any danger of losing our federal funds or having to pay some money back? [LR33]

COURTNEY PHILLIPS: So, earlier this year we received the warning letter from the feds in terms of our application processing time lines. That's one of the areas that we've been measuring very closely on a monthly basis, although the feds do a six-month rolling compromise process in terms of what that average is. We've been looking at it on a monthly basis. And right now we are meeting that target in terms of what the element was for the warning, the early warning letter, that \$17 million that you had inquired about. What we've asked the feds is could they share their methodology with us, because the feds do a sample of the entire population, where we're calculating our methodology on everyone. And so if we can get their methodology to make sure we're in line with our monthly reporting of what that would look like, the six-month rolling. What we don't want to happen is to believe that we're on target, and because of their methodology, not so much. Typically what you see is a 2 (percent) to 4 percent variation between the state reporting and federal reporting. But I think we're very close to approval on getting that methodology. But you see in terms of that application processing time lines where we received

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

the early warning letter, we seem to be doing...we've stepped it up and we're meeting those targets right now. [LR33]

SENATOR McCOLLISTER: Are there any other standards we're not meeting which would jeopardize current funding? [LR33]

COURTNEY PHILLIPS: So the other standards that we're not meeting is the denial accuracy rate. At this point, we haven't received any indication in terms of federal funding and the possibility of losing anything. [LR33]

SENATOR McCOLLISTER: Great. Do you care to comment on the data system that you're looking at? I understand that our current data system is woefully inadequate. Care to comment on that? [LR33]

COURTNEY PHILLIPS: So currently, within ACCESSNebraska we have multiple systems that interact with it. So we have the N-FOCUS system which EA and Medicaid both utilize. That system interfaces with numerous systems on the EA side as well as the MMIS system on the Medicaid side. There are some things in terms of the N-FOCUS that we would like to see in addition to in terms of search options, draw down buttons that we can use to help our teams streamline some of the work they're doing. And so it really is right now the system that we have. And so how do you make the best of what you have and some of those capabilities? Medicaid will be shifting to a different system in 2017. We are exploring, what does that look like for EA to utilize that system? And we're still in the exploration phase of that right now. But right now, those...in N-FOCUS, the data is shared between EA and Medicaid. And with the shift to the new system, that's something that we will ensure that even if EA doesn't go on board that system, that interface still exists to make sure that data is able to be shared. [LR33]

SENATOR McCOLLISTER: I'd just like to thank you for your testimony and your willingness to make changes. I'm quite impressed and hope we can work together and improve the situation. [LR33]

COURTNEY PHILLIPS: Thank you, Senator McCollister. [LR33]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR McCOLLISTER: Thank you, Senator. [LR33]

SENATOR HOWARD: Senator Riepe. [LR33]

SENATOR RIEPE: Thank you, Senator. Thank you, Ms. Phillips, for being here. How many months have you been in the role now? [LR33]

COURTNEY PHILLIPS: April 2, so a little over...so four months and, what, 15 days if today...what's today's date? Something like that. [LR33]

SENATOR RIEPE: I had told my staff, I said with your coming that I thought that all the problems would be resolved by this hearing date. (Laughter) [LR33]

COURTNEY PHILLIPS: I tried to have them fixed before I got here on April 2, but. [LR33]

SENATOR RIEPE: Well, I think you've made a good effort to that. With your leadership and a lot of the terms that you used which impressed me as well where you were talking about "we" and "team" and those kinds of things, and so I would like to afford you an opportunity to maybe, if you'd like, to expand a little bit on how your team works, how your philosophy works, and I think in terms of working with the Governor's Office. Because it is primarily an executive responsibility with legislative oversight, we're more of an advisory or interested party than we are here to tell you how to run things. But if you could talk maybe a little bit about how your team, that would be helpful to me. [LR33]

COURTNEY PHILLIPS: Yeah, I would love to talk about our team. [LR33]

SENATOR RIEPE: Thank you. [LR33]

COURTNEY PHILLIPS: And so when I consider our team, I consider our whole team. I'm not just referring to our executive management level team. Our team is everyone from the front lines all the way up. And we have external partners on our team which include you all and the stakeholders that advocate on behalf of our customers. But it's really important for me in terms

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

of our team of the efforts that they put in on a day-to-day basis on the call lines. Some of the improvements that we have, it's not because our team isn't working hard. It's some of the processes and improvements that we need to put in place. And so we have dedicated people who are in many of your areas who put in good work, who sacrifice themselves and their own families to serve others. And just a shout out to them because they really are doing a good job. A lot of the information we're getting comes from them. The ideas, the things that they've seen working on the call lines, interacting with our customers. And a lot of that feedback is being filtered in, in terms of our top ten. Felix has been absolutely a gem to work with in terms of his operation and professional, his process experience; that adds something to our department in terms of the programmatic expertise that we have in the programs that we operate, building it with the operation and process side. And so I think you guys will see...you will be happy with some of the changes that are coming down the pipeline to make some of those improvements. But our team really has been great and are working hard. And you know, when I...I went out to meet with a couple of them and so has Calder, so has Tony, so has Felix and numerous other people have gone out into the field. And I just ask them to hang in with us for a little while. I know they've had a lot of changes thrown at them with ACCESSNebraska. And it's tough to constantly switch and maneuver. But I do ask that they hang in with us. We'll have a couple of more changes, but hopefully those changes will be to the betterment for the processes they're working through. So, thank you for that question. [LR33]

SENATOR RIEPE: Thank you. Thank you, Senator Howard. I have a follow-up question. I think when one starts looking at processes or process, you have to...first question is do you want to throw the whole thing out? And I know that in 2012 there was an authorization of like 45 FTEs which would amount to about \$1.25 million, \$1.5 million of additional funds. If I recall, there may have been some number in there was \$3 million that was authorized by the Legislature to add to it. And I know originally this was approved, ACCESSNebraska was approved with the idea of being a cost-saving kind of an operation. With those 45 new FTEs, is that still the case in your opinion? [LR33]

COURTNEY PHILLIPS: So I have not done the analysis in terms of have we saved money historically. For me, it really is getting in there and how do we make it work for our customers. We have a system now in terms of whether we're going to throw it out or not. For me, it's how do

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

make it stable enough that we can do a true evaluation of where we are? In terms of the additional positions, we have...some have been added over time. And I think those probably were needed. Right now we have...I think our vacancy rate is about 66 across EA and Medicaid. And so it's critical that we fill those positions. That's the critical piece, making sure we have individuals in those seats and we can retain our individuals. So I think that's the focus right now. [LR33]

SENATOR RIEPE: Thank you. [LR33]

COURTNEY PHILLIPS: Thank you. [LR33]

SENATOR HOWARD: Senator Stinner. [LR33]

SENATOR STINNER: [LR33]

COURTNEY PHILLIPS: So I...yeah. So today I can't give you a time line in terms of this will be fixed in the next two months, three months, four months. I honestly do not know. We are spending a lot of time and attention on it. And so I can tell you that it's a priority in the department. And we will not slack until we hit the areas that we need to hit on. Our customers are being affected, our team members are being affected, and you all are being affected. And so you have my commitment and our team's commitment that we will spend the right amount of effort making sure this works. So I can't tell you how long this phase one will take in order for us to move to the long-term phase, but we will put the time in necessary to make sure it happens. [LR33]

SENATOR STINNER: It will vary based on the bullet points,... [LR33]

COURTNEY PHILLIPS: Yes. [LR33]

SENATOR STINNER: ...some of it on technology and the... [LR33]

COURTNEY PHILLIPS: Yes. [LR33]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR STINNER: ...switching of technology, some of it really is an evaluation of personnel, and some of it could be also training. Is that what I'm gathering? [LR33]

COURTNEY PHILLIPS: Training is a big...that's accurate, that's very accurate. [LR33]

SENATOR STINNER: Okay. There was a report that was issued. I don't know if you saw it, the Economic Assistance call center services. And I believe it was it was a process or a review process. And these folks are Nelnet...or it's called Proxi. And in the...it was extremely helpful because...at least to me, to take a look at and get familiarized with what call centers are about and the like of that. [LR33]

COURTNEY PHILLIPS: Yes. [LR33]

SENATOR STINNER: So this one just focuses in on your Economic Assistance channel and the four core objectives and the existing pain points were really the focus of this report. And it's: achieve service levels and timeliness metrics; identify opportunities to leverage technology; evaluate processes for efficiency gains and re-engineering; and improved experience for the constituents of Nebraska. Does that kind of resonate with you and would you like to comment? [LR33]

COURTNEY PHILLIPS: Yeah, I think those are very key elements. And I've gone through the Proxi report as well. And if you look, I think they probably had 20-something different recommendations. [LR33]

SENATOR STINNER: Yes. [LR33]

COURTNEY PHILLIPS: I don't remember the exact number. But many of those fit directly into the top ten that they outline that we need to consider or look at and what's the exploratory in order to get to those next steps. And you're right, they do look at...data is very important in terms of what they spelled out, in terms of what other reporting looks like, what information were collected in order to do some of those analysis and predictions. [LR33]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR STINNER: Okay. And the money coming for the change in technology is coming 90 percent from the federal government, 10 percent from state. Is that...? [LR33]

COURTNEY PHILLIPS: So that's on the Medicaid side in terms... [LR33]

SENATOR STINNER: Okay. Right. [LR33]

COURTNEY PHILLIPS: ...of the 90/10 FMAP. EA is a little bit different, but in terms of...some of the technology that we're talking about were some of the quick fixes that we can actually do with the system that we currently have. And that's some of the internal workings that we can actually put in place. And so those are the things that we're exploring initially. [LR33]

SENATOR STINNER: [LR33]

COURTNEY PHILLIPS: Yeah. So in terms of internal exploration of how quickly we can access the system, that's kind of what we're looking at in terms of N-FOCUS, what's the capability? And it goes back to, Senator McCollister, what you talked about, how much the system can do. And those are some of the elements we're looking at. Can we put some of the additional search components in there that may not exist right now? How much we can add in terms of some of those drop down key functions that would allow our team to move a little bit quicker. And so those are some of the things that we're exploring. What's the touch point and how quickly can you put some things in place and what's the impact of it? And so you want to put your most focus in what has the greater impact in terms of some of those technological features. So we are working through that with our IT team. [LR33]

SENATOR STINNER: Okay. Thank you. [LR33]

SENATOR HOWARD: Senator Craighead. [LR33]

SENATOR CRAIGHEAD: Thank you, Senator Howard. Ms. Phillips, thank you for all your good work. One of the questions that I've gotten actually a number of times from constituents... [LR33]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

COURTNEY PHILLIPS: Okay. [LR33]

SENATOR CRAIGHEAD: ...or, you know, people working with our constituents is that they'll call the call center and there is some missing information. So instead of a "save" button somewhere then what happens when they call back with that information, they have to start over at the very beginning of the process rather than where they were. [LR33]

COURTNEY PHILLIPS: So is this when they're giving some of their personal information, or they have already provided all their personal information? [LR33]

SENATOR CRAIGHEAD: All their information, this would be when they're already in the system, if there's a question or something or a "recert" or something like that that comes up. [LR33]

COURTNEY PHILLIPS: An additional documentation. [LR33]

SENATOR CRAIGHEAD: Right, but it's like there's no "save" button. [LR33]

COURTNEY PHILLIPS: And if you have some specific examples, that probably would be very helpful for me so we can have our team track down,... [LR33]

SENATOR CRAIGHEAD: Okay. [LR33]

COURTNEY PHILLIPS: ...because we should have a component in terms of most of that information being in there and our workers writing up some of the narratives and some of the after work so when another...so when a call comes in, someone else can access that information. [LR33]

SENATOR CRAIGHEAD: I'd love to share that with you. [LR33]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

COURTNEY PHILLIPS: So maybe...yeah, I can...and it may be at what point the call has ended terms of what information has been collected or hasn't. So that's why if you could share that information it would be helpful to track it through. [LR33]

SENATOR CRAIGHEAD: Okay. Let's talk (inaudible). [LR33]

COURTNEY PHILLIPS: Okay. Excellent. Thank you. [LR33]

SENATOR HOWARD: Other questions? Senator Hansen. [LR33]

SENATOR HANSEN: Thank you, Senator Howard. Ms. Phillips, earlier you mentioned, and we heard this in the tour, that some of the technology and software side is being updated on the Medicaid side first before EA. Why just the one side first? [LR33]

COURTNEY PHILLIPS: And so, the system was initially explored on the Medicaid side and looking at shifting from N-FOCUS. An so now that we have that process and we've explored where we're going, what does it look like, what are those components, before we just dump EA in, we need to truly understand the functionality and what's needed on the EA side. Remember, these are two separate entities who do different things. And so on the Medicaid side it's one program, 20 different eligibility, numerous service; on the EA side, nine programs and numerous services within. And so before we just piggyback off of it we need to make sure it does the right thing, what's the functionality and really exploring some of those functions of it. [LR33]

SENATOR HANSEN: So has the Medicaid side been chosen as, say, like the guinea pig to work out some of the kinks... [LR33]

COURTNEY PHILLIPS: I wouldn't...no, I wouldn't say... [LR33]

SENATOR HANSEN: ...before we get to the EA side? [LR33]

COURTNEY PHILLIPS: I wouldn't say guinea pig. [LR33]

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ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR HANSEN: Sure. [LR33]

COURTNEY PHILLIPS: But that we are moving forward with them first. [LR33]

SENATOR HANSEN: Okay. [LR33]

COURTNEY PHILLIPS: I wouldn't say guinea pig because we want to make sure it's pretty good before we move forward with it. So again, 2017 is when that actually goes into effect. [LR33]

SENATOR HANSEN: Fair enough. Thank you. And a second question is you said there were 66, approximately, vacancies throughout the call center. Is there any element in which either employee turnover or employee recruitment is causing issues or could be improved? Just your thoughts on that generally. [LR33]

COURTNEY PHILLIPS: No, definitely, that's one of our top ten areas that we're focusing on in terms of our recruitment, retention, and development of employees. So yes, anytime we have a turnover or a vacancy, that will trickle to other areas in terms of us being able to answer the number of calls, call wait times; it's all connected. It is. And so we have to touch upon and drive in what's the root cause to it and what are the elements to drive down that root? [LR33]

SENATOR HANSEN: Thank you. [LR33]

COURTNEY PHILLIPS: Thank you. [LR33]

SENATOR HOWARD: Senator McCollister. [LR33]

SENATOR MCCOLLISTER: Just a few follow-up questions, Ms. Phillips. Are you having trouble hiring employees, qualified employees? [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

COURTNEY PHILLIPS: In some areas. That's why we have a higher vacancy, in some areas. I think we need to look at what's the profile of the person that we need. And we might need to try some other elements in terms of our recruitment and marketing. [LR33]

SENATOR McCOLLISTER: Okay. And you indicated that you have essentially two systems-- the Medicaid system and the EA system, correct? [LR33]

COURTNEY PHILLIPS: Yeah, two different operations. [LR33]

SENATOR McCOLLISTER: Okay. Do you have people that access or use both programs? [LR33]

COURTNEY PHILLIPS: Oh, definitely, definitely. [LR33]

SENATOR McCOLLISTER: And so when a person calls on the Medicaid side, does the information transfer over to EA... [LR33]

COURTNEY PHILLIPS: Yes, sir. [LR33]

SENATOR McCOLLISTER: ...or do you have to start over? [LR33]

COURTNEY PHILLIPS: No, it's...so in the N-FOCUS it's one case file for the individual. [LR33]

SENATOR McCOLLISTER: Okay. [LR33]

COURTNEY PHILLIPS: And so the information can be seen both by the Medicaid and the EA side. [LR33]

SENATOR McCOLLISTER: Okay. [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

COURTNEY PHILLIPS: So you won't have to worry about individual calling in, having to reprovide all the information again just to the other side of the system. [LR33]

SENATOR McCOLLISTER: I understand. Thank you. [LR33]

COURTNEY PHILLIPS: Thank you. [LR33]

SENATOR McCOLLISTER: Thanks, Sara. [LR33]

SENATOR HOWARD: I see that we have two, sort of...we've got Medicaid and we've got Economic Assistance. And right now Economic Assistance is at 23 minutes for the average wait time... [LR33]

COURTNEY PHILLIPS: That's correct. [LR33]

SENATOR HOWARD: ...and Medicaid is at 4 (minutes) and 23 seconds, 4 minutes and 20... [LR33]

COURTNEY PHILLIPS: Four (minutes) and maybe 18 or 19 (seconds), but I'll tell you that (inaudible) in a minute. [LR33]

SENATOR HOWARD: It's much better I guess is...in short. [LR33]

COURTNEY PHILLIPS: Yeah. And those are, again, two systems. And so EA, definitely we want to get down some. It probably will never be as low as Medicaid because keep in mind on the EA side they are doing interviews with our customers on that side. [LR33]

SENATOR HOWARD: Right. [LR33]

COURTNEY PHILLIPS: And so...but we can get it lower. [LR33]

SENATOR HOWARD: What is the ideal time then for each side? [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

COURTNEY PHILLIPS: Well, on the Medicaid side I think we're pretty good on where we want to be on the Medicaid side. On the EA side I think we're targeting less than 15 percent. Is that correct? Not percent, minutes. Yeah. [LR33]

SENATOR HOWARD: And so how are you sharing best practices between Medicaid and Economic Assistance? [LR33]

COURTNEY PHILLIPS: Yeah, so the work group that we're kind of talking about that we meet weekly then, and then the actual morning huddles, we have a lot of individuals on the Medicaid side that when we were together have that EA experience. So it really is just digging information out of people in terms of what was done on this side that we can replicate on the EA side, whether it be from policy, system...the technological things that we've put in place with the system. And so that work is...it's just sharing information and it's starting to happen. [LR33]

SENATOR HOWARD: And then so are there best practices for Medicaid that you're starting to implement in Economic Assistance? [LR33]

COURTNEY PHILLIPS: Yeah. So we're not just going to directly dump them in, because again we have to make sure it fits for the EA system. But there are some things that we're exploring that have been in place in Medicaid that we could possibly put in on the EA side. [LR33]

SENATOR HOWARD: Okay. And then remind me what's the turnover rate for each side currently. [LR33]

COURTNEY PHILLIPS: Yeah. So I haven't...I'll have to break it down for you, Senator,... [LR33]

SENATOR HOWARD: Okay. [LR33]

COURTNEY PHILLIPS: ...because I have it overall by call center. [LR33]

SENATOR HOWARD: Okay. [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

COURTNEY PHILLIPS: But I can give you by call center but then we'll break it down after for you. [LR33]

SENATOR HOWARD: That's great. [LR33]

COURTNEY PHILLIPS: So for the average call time between the four centers is 26.52 percent; Scottsbluff, 36 percent; and then Lexington has the lowest at 15.58 percent. But I'll try to break down between each category. [LR33]

SENATOR HOWARD: That would be great. Thank you. [LR33]

COURTNEY PHILLIPS: Okay. [LR33]

SENATOR HOWARD: And I just have one more. Is there anything in your opinion that the Legislature could do to assist you in streamlining services and reducing wait times? [LR33]

COURTNEY PHILLIPS: I think as we move forward with the top ten we will have some recommendations for you all of how you can assist. I mean again, you see things from your side and information you're getting from your constituents. And we'll get different information. But as we work through a little bit more on the top ten, I think there will be some elements that we can partner on to move it forward. [LR33]

SENATOR HOWARD: Okay. Thank you. [LR33]

COURTNEY PHILLIPS: Thank you. [LR33]

SENATOR HOWARD: Are there any other questions for Ms. Phillips? Seeing none, thank you for your testimony today. [LR33]

COURTNEY PHILLIPS: Did I miss anything on our side? [LR33]

SENATOR HOWARD: Did we miss anything? [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

COURTNEY PHILLIPS: Okay. I just wanted to make sure. [LR33]

SENATOR HOWARD: Thank you. [LR33]

COURTNEY PHILLIPS: Thank you. [LR33]

SENATOR HOWARD: Good afternoon. [LR33]

JULIE PHAM: (Exhibit 3) Good afternoon, Chairwoman Howard and committee members. My name is Julie Pham, J-u-l-i-e P-h-a-m. Can you hear me okay? Last time I testified they couldn't hear me. I'm here today to discuss an ACCESSNebraska employee survey which was done by the Ombudsman's Office around the same time last year, as well as to discuss the current ACCESSNebraska employee survey. To start off with last year's survey, the Ombudsman's Office sent out an invitation to 931 ACCESSNebraska employees, and 69 percent of the 931 completed the on-line survey. The survey consisted of multiple choice questions as well as open-ended questions. For the multiple choice questions, we covered...it covered five topic areas: employees' background, such as length of time working for DHHS, job titles, responsibilities, and work locations; training on public benefits programs, telephone, and computer system; employees' workload and time to perform work duties; client interactions on issues such as accuracy of work performed and clients' level of satisfaction from the employees' perspective; and levels of difficulties in serving certain populations, such as elderly, people with disabilities, mental illness, non-English speaking clients, and families in crisis. For the four open-ended questions, the survey covered aspects of ACCESSNebraska system that are working well, aspects that are needing improvements, whether the system is improving, and the last of the open-ended questions asks for additional comments that employees would like to make regarding their jobs. Some of the highlights from the 2014 survey, the highest percentage of respondents, 36 percent, have worked at DHHS for 10 years or more; 72 percent of respondents felt that the initial training for public benefit programs was either excellent, more than adequate, or adequate; and a little bit of a reduction, 60 percent of respondents felt that ongoing training for the same program benefits was either excellent, more than adequate, or adequate. Although only 3 out of 14 multiple choice questions addressed work duties, this section of the survey along with responses to open-ended questions seemed to reveal where the highest level of discontentment among

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ACCESSNebraska Special Investigative Committee
July 17, 2015

ACCESSNebraska staff lies. For example, 56 percent of respondents felt that there was a consistent backlog in work duties to be performed. A similar percentage of respondents felt that they have less than enough time to complete their work duties. Seventy-three percent of respondents had the view that the clients who they serve are either very satisfied, somewhat satisfied, or satisfied with the service clients receive. However, in the open-ended portion, it provided the rest of the picture. Many of ACCESSNebraska employees mentioned the delay in process application along with long wait time for callers as factors which ultimately resulted in clients not receiving their benefits in a timely manner. Close to half of the respondents, from 42 percent to 46 percent, experience either some significant or extreme difficulties serving elderly population, people with disability, or people with mental illness. A little more than half, 64 percent, of respondents had experienced some significant or extreme difficulty in serving non-English speaking clients. So from the written portion, respondents from all areas of ACCESSNebraska convey that they believe that they cannot perform satisfactory work collectively unless more workers are hired to help out. So I should mention here that when we conducted the survey last year, we received 941 ACCESSNebraska employees' e-mail. This year, we received 876. And we'll discuss that later in our report for this year's survey. I'm going to skip. So with this year's survey, I passed out a copy. And back in June, Senator Howard had asked the Ombudsman's Office to conduct a second ACCESSNebraska employee survey. This year's survey has the same questions as the 2014 survey. The only minor difference is that this year's survey we decided to have the results from each division, EA and Medicaid side, separate because they are two different divisions even though they're under DHHS. So the minor difference is the last page, page 6. Last question asks about call centers. I believe you have the Medicaid side where it listed call centers, which is reflective of only Medicaid. And then EA would have the relevant call centers equivalent. So we sent out that survey on-line to 870...oh, let me break it down. So last Monday, July 13, we e-mailed 477 EA employees and 399 Medicaid employees. The survey will close on July 27--two weeks to participate, same limit as 2014. As of this morning, 31 percent of EA employees completed the survey; 23 percent of Medicaid employees completed the survey. The high participation rates reflect employees' responsiveness to the Ombudsman's inquiries, not only past and present surveys but also on specific cases that we've been dealing with. I know my time is up. Thank you for giving us the opportunity to conduct another interview...or survey. And I look forward to reporting updates based on this year's survey. [LR33]

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ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR HOWARD: Are there questions for Ms. Pham? Senator Riepe. [LR33]

SENATOR RIEPE: You know me, Curious George. I always have some questions it seems. Thank you for being here. My questions, I have a couple. One is, how many years has this survey been conducted? Maybe you said this, but. [LR33]

JULIE PHAM: The first survey, last year. This is the second. [LR33]

SENATOR RIEPE: [LR33]

JULIE PHAM: Yes. [LR33]

SENATOR RIEPE: [LR33]

JULIE PHAM: Yes. Thank you for asking that. It's anonymous. And for instance, with imaging center, we're not going to report. If there are two people who have taken it, we're not going to say "imaging center states" because it's meant to be anonymous. [LR33]

SENATOR RIEPE: Yeah, population is too small. [LR33]

JULIE PHAM: So we're sensitive to that promise and we'll keep that promise. [LR33]

SENATOR RIEPE: I just have two more. How does feedback go? How do you take this back to your staff to say these were the concerns expressed? And I'm a little curious that I think you said you went from 900-some last year and 800-some this year. Is that correct? [LR33]

JULIE PHAM: Yes, and... [LR33]

SENATOR RIEPE: Was there...I mean was that a perception that nothing happened, therefore, it doesn't do any good and so don't fill it out? [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

JULIE PHAM: I don't know. Or it could mean, you know, things are going better, maybe not as motivated to fill out the survey. But once it's completed, a lot of the information comes from the open-ended, the written portion. [LR33]

SENATOR RIEPE: Yes. [LR33]

JULIE PHAM: So I'm excited to read that. And I have read each and every comment last time. I intend to do the same for this year. In terms of speculating, we haven't ended the survey. So percentage of participation, last year was 69 (percent). That's really, really high. I think we're on target for around 31 (percent) for EA and 23 (percent) for Medicaid. You mentioned a number of 931 ACCESSNebraska employees. That's just how many employees were there at the time we took the survey; this year, 876. [LR33]

SENATOR RIEPE: I see. [LR33]

JULIE PHAM: Yes. [LR33]

SENATOR RIEPE: So it was the number of employees, not necessarily the number of responses by any means. [LR33]

JULIE PHAM: Correct, the number of employees at the time. And I mention the number because the written portion from last year across the board mentioned we need more workers to help out; we can't do this. So that's why I mentioned the number, just to point out. [LR33]

SENATOR RIEPE: I think that's probably typical of most organizations in the whole world. [LR33]

JULIE PHAM: Sure. [LR33]

SENATOR RIEPE: We need more. Do you perceive that the staff members see that this is a worthwhile effort? [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

JULIE PHAM: Based on last year's survey, I know some mentioned, you know, we have filled out so many surveys and we never hear back; we don't know if it ever gets heard. So I hope, based on last year's report if any of them have read, we put a lot of effort. And as I stated, I've read each and every written comment. So I'm hoping they know that we will take the survey results seriously and report back as fast as we can. Hopefully, it will be helpful to this committee. [LR33]

SENATOR RIEPE: Thank you. [LR33]

JULIE PHAM: Thank you. [LR33]

SENATOR RIEPE: Thank you, Senator. [LR33]

SENATOR HOWARD: Senator McCollister. [LR33]

SENATOR McCOLLISTER: Yeah, thank you, Senator. I'm a little confused on the response rate. [LR33]

JULIE PHAM: Sure. [LR33]

SENATOR McCOLLISTER: I think the department has, what, 5,000 employees? [LR33]

JULIE PHAM: Can you ask that question again? [LR33]

SENATOR McCOLLISTER: Yeah. How many employees does the department have? [LR33]

JULIE PHAM: The department has 876 ACCESSNebraska employees. [LR33]

SENATOR McCOLLISTER: How about the entire department? [LR33]

JULIE PHAM: I would have to defer that to the DHHS staff. I don't know. This... [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

_____: (Inaudible.) [LR33]

SENATOR McCOLLISTER: Okay. So...and you're saying...yeah, apparently the Medicaid department doesn't do a survey? [LR33]

JULIE PHAM: So on the Medicaid side, let me see, the number of total employees on Medicaid side is 399. And for the Economic side it's 477--ACCESSNebraska employees. [LR33]

SENATOR McCOLLISTER: So what you're saying is approximately half the employees are surveyed? [LR33]

JULIE PHAM: No. I'm saying that all ACCESSNebraska employees were requested to do the survey. And as of today, 31 percent of Economic Assistance employees completed the survey. The survey hasn't closed. The survey will close on the 27th. And Medicaid employees, 23 percent completed the survey as of today. [LR33]

SENATOR McCOLLISTER: Okay. How many employees are invited to participate? [LR33]

JULIE PHAM: A total of...all that we were...we asked DHHS to please provide an e-mail list of all ACCESSNebraska employees. [LR33]

SENATOR McCOLLISTER: Okay. [LR33]

JULIE PHAM: And we've asked all ACCESSNebraska employees via e-mail, as this is an on-line survey. [LR33]

SENATOR McCOLLISTER: Okay. Thank you very much. [LR33]

JULIE PHAM: Sorry I didn't make that clearer. I'm glad I clarified that. [LR33]

SENATOR McCOLLISTER: Thank you very much. [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR HOWARD: Senator Stinner. [LR33]

SENATOR STINNER: Thank you very much for you testimony. [LR33]

JULIE PHAM: Hi. Thank you. [LR33]

SENATOR STINNER: On the first page you had employee type: less than 6 months, 6 to 12. I didn't get the breakdown of the responses. Were the majority of the responses coming from the people who have been with the department a long period of time? [LR33]

JULIE PHAM: In, again, last year's survey: the highest percentage, 36 percent, ten years or more. [LR33]

SENATOR STINNER: Okay. [LR33]

JULIE PHAM: Uh-huh. The next highest is the two to five years, which is 23 percent. [LR33]

SENATOR STINNER: Tell me your conclusions based on that, on that returned survey of at least 36 percent of the employees were over ten years did respond. [LR33]

JULIE PHAM: You want my conclusions on why that rate is high, or why... [LR33]

SENATOR STINNER: Yes. [LR33]

JULIE PHAM: ...that's the highest? I'm hoping that this 2015 survey results will show us similar, the highest percentage being ten years or more, because both sides the programs are very complicated. It would be beneficial to the department and Nebraskans to have experienced employees to know and to provide accurate information and...but I don't know. [LR33]

SENATOR STINNER: So I would conclude the longer term employees responded heavier than the rest of the population because they... [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

JULIE PHAM: I don't know. [LR33]

SENATOR STINNER: ...they are more invested in the organization and think that this is a way of effecting some change. [LR33]

JULIE PHAM: You know, I could go back and look at that and find out. I don't think I would be able to find out. [LR33]

SENATOR STINNER: Okay. Thank you. [LR33]

JULIE PHAM: So, that's one conclusion for sure. [LR33]

SENATOR HOWARD: Any other questions for Ms. Pham? What's your time line for concluding...for bringing your conclusions to us? [LR33]

JULIE PHAM: I will...it's up to you. You're the one that had asked for a survey. It closes the 27th. I know I'll need at least a week, so. And the next hearing is sometime in the fall. [LR33]

SENATOR HOWARD: Uh-huh. [LR33]

JULIE PHAM: But we can talk about it and you can give me a deadline. I certainly will try to meet that deadline. [LR33]

SENATOR HOWARD: Fantastic. [LR33]

JULIE PHAM: Okay. [LR33]

SENATOR HOWARD: Thank you so much for your testimony. [LR33]

JULIE PHAM: Sure. Thank you. [LR33]

SENATOR HOWARD: Good afternoon. [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

MOLLY McCLEERY: (Exhibits 4, 5, 6) Good afternoon. Senator Howard, members of the committee, my name is Molly McCleery, it's M-o-l-l-y M-c-C-l-e-e-r-y, and I'm the staff attorney for the Health Care Access Program at Nebraska Appleseed. Nebraska Appleseed is a nonprofit legal advocacy organization that fights for justice and opportunity for all Nebraskans. For the last several years since the transition to the ACCESSNebraska system was announced, Appleseed has been involved in advocacy around the system, as one of our core purposes is ensuring access to public assistance and healthcare for low-income Nebraskans. Starting in 2009 when DHHS took steps to modernize our system, we moved away from the traditional local office model, reduced some staff, and moved more towards a modernized on-line and call center-based model. This was touted as being based on goals related to efficiency, accuracy, and responsiveness to client needs. What we have seen since that transition has been a number of serious problems that have created difficulties for clients in accessing the services to which they are entitled. Some of those have been mentioned this morning...or this afternoon and are also outlined in great detail in the LR400 report which provides recommendations around some of those as well. A number of the main issues that we've talked about over the years have been call wait times, lost paperwork, requiring repeated submission of verification documents, and erroneous benefit terminations or eligibility determinations. Additionally, we have seen that processing time lines for applications, especially in SNAP, had gotten progressively worse. What we have seen recently is that problems with the system continue to persist. We have heard from clients, community organizations, and other advocates that they're seeing a lot of the same problems that they saw roughly five years ago. They are things like clients struggling to navigate through the phone system, completing the application process, and many clients receiving inaccurate information from caseworkers when they call in. I've attached to my testimony a letter from an Economic Assistance client that contacted our information line and she provides some examples of her experiences over the last few months in dealing with the system. And it's largely the same thing that we saw several years ago. We've also heard from some Medicaid clients that have called our intake line that have stressed that they are receiving inaccurate information about Medicaid eligibility and also their right to appeal eligibility determinations. Ultimately, these are issues that create barriers for clients in accessing the services that they need. In August 2014, Appleseed, along with the National Center for Law and Economic Justice, filed an ongoing class action lawsuit against department administrators challenging the department's systemic failure to process SNAP applications in a timely manner. At the time of filing, roughly 30 percent of all

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

applicants waited beyond the federally mandated time lines to receive assistance. So under federal law, in order to comply with the time lines for SNAP, applications have to be processed in 30 days for initial staff (sic) applications or 7 days for emergency assistance. And so in August 2014, only 69 percent of the time was that being done correctly. We filed this lawsuit when we saw that the processing delays continued to get worse. It was a sort of last resort after attempting to work on legislation in previous sessions and handle things administratively. This case is ongoing and a plaintiff class of SNAP applicants has been certified in this case. We are very hopeful with the new administration that we will see system improvements. We've been very impressed with the transparency and the willingness of the new administration to meet with clients, to meet with advocates, and to really hear what's going on, on the ground. However, we feel that continued investigation and legislative oversight is crucial in this process to ensure that the system functions effectively. Attached to my written testimony I've included a statement of principles that the ACCESSNebraska working group, which is a group of advocates, community organizations that work with clients, and other entities, put together in December 2013 I believe. And a lot of those recommendation or statements of principles still hold true today, over two years later. So we are hopeful that there can be improvements made regarding staff training and standards to combat some of that misinformation I spoke of; also, exploring potential investments in staffing increases and things like that. I will...I see my time is running short, so I will just say the ACCESSNebraska working group, a number of the advocates in that group will testify behind me today. And we were part of the LR400 process in terms of providing information and are more than willing to do so again with this process if there are specific questions that the committee has. With that, I would be happy to answer any questions. I tried to keep it short. [LR33]

SENATOR HOWARD: Senator Riepe. [LR33]

SENATOR RIEPE: Senator Howard, thank you. I'm going to come at this a little bit because my background is health administration,... [LR33]

MOLLY McCLEERY: Right. [LR33]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR RIEPE: ...so I'm going to look at it. When you talk to a surgeon or a surgeon sees a patient, you know, they see it as the eyes of a surgeon and the opportunity. I also see it from a standpoint of attorneys that there's a tendency, when they see a problem, they see the opportunity to file a suit. My question is what process prior to that lawsuit did Appleseed take to work out this...as opposed to being a hair trigger and going right to a lawsuit? [LR33]

MOLLY McCLEERY: Well, I would note that the processing rates for SNAP had continued to decline since 2008, and we filed in 2014. So I would not characterize this as jumping into litigation by any means. We continually monitored the processing rates. We were involved in the LB374 report legislation which was targeted at trying to get at some of the data metrics around processing and where some of those issues were. We also, along with the working group, were involved in legislation or interim studies in every session between 2011 and 2015 trying to get at different pieces of the system that would impact that processing. And it continued to get worse. And at that point, clients have a right under federal law to access these services and we continued to receive calls from clients saying that they had either waited 45 to 60 days for much needed food assistance for their families, or that they had been recertifying and, due to the delays in process, had resulted in not receiving...having a gap in receiving benefits. And so we felt that the situation, over that period of time, had gotten to the point where litigation was the only option. And I appreciate your perspective of, you know, we try to not see it just as the litigator's perspective. I see what you're saying. [LR33]

SENATOR RIEPE: Had you requested and been denied a meeting with DHHS in terms of seeking resolve and knowing the urgency of your concerns? [LR33]

MOLLY McCLEERY: I don't think that there was a specific denied meeting. I know throughout...part of this was I have been at Appleseed for three years, and part of this was before me. But I know that attorneys in our office had, to the best of their ability, attempted to communicate with administrators in the department prior to that. And it's...we...I think there's a perception that lawyers want to be litigious. And our approach is always to try everything else first. And when that doesn't happen then we have that as a tool in our toolkit. [LR33]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR RIEPE: I suppose. But I would also say that actions speak louder than words and you did sue, so. [LR33]

MOLLY McCLEERY: I suppose so, yes. I don't know if that's a question. [LR33]

SENATOR RIEPE: Thank you though. [LR33]

SENATOR HOWARD: Senator Stinner. [LR33]

SENATOR STINNER: Just a couple questions: Do you keep statistics on the number of calls, what they were about, and kind of have a little bit of a scorecard? [LR33]

MOLLY McCLEERY: Yes, yes, we do. And I don't have that information with me. We have an intake person who handles all of the calls that we get and keeps a database of all calls, which area of our work they fall into--so whether it's healthcare, immigration, Economic Assistance, or child welfare--and then detailed information about what issue they called about. [LR33]

SENATOR STINNER: Would your statistics go back before they started ACCESSNebraska? [LR33]

MOLLY McCLEERY: I believe so. And we transitioned to a new system recently. So I don't know that it would be...it might be like not in the database back that far. But we did have an intake system prior to that, yes. [LR33]

SENATOR STINNER: Was there a spike in the number of complaints when ACCESSNebraska was first put out? [LR33]

MOLLY McCLEERY: I can't speak to that. I do know that it is a consistent...it is consistently something we get calls about. It has stayed consistent. [LR33]

SENATOR STINNER: So as far as a trend line is concerned, if I took year after year, that trend would be pretty flat or would it be starting down? [LR33]

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Transcriber's Office
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ACCESSNebraska Special Investigative Committee
July 17, 2015

MOLLY McCLEERY: What do you mean by starting down? I'm sorry. [LR33]

SENATOR STINNER: As far as complaints about ACCESSNebraska. [LR33]

MOLLY McCLEERY: Would there be a decrease in calls now, is that what you're asking?
[LR33]

SENATOR STINNER: Yes, complaints. [LR33]

MOLLY McCLEERY: No, we're getting calls now not maybe at the level as we were before because I think clients are tired. A lot of times we'll get calls and they will...it will be people that just don't think that there's anything that can be done because the system, and it started in 2009; we're in 2015. They're used to having to wait on the phone for a long time. So they're not going to call us like they did in 2010 when it may have been their first encounter with some of these issues. But we are still getting calls around issues that folks maybe haven't encountered in the past, like some of those misinformation examples that I was giving. So when someone has been eligible for Medicaid and they're recertifying and they're being asked to submit a document that they have never had to submit before, or when like a caseworker is helping...a caseworker at a community organization is helping a client enroll in a program and they run into an issue they haven't seen before, they'll call us. And so I think the issues that we're getting calls on are a little bit different...but I don't know. We're not...we haven't stopped hearing about the same issues as before. Does that answer your question? That was a really long answer. [LR33]

SENATOR STINNER: Yeah, I think it does, but I'd be curious to see what the trends are and the type of questions because programs do change. [LR33]

MOLLY McCLEERY: Yes. [LR33]

SENATOR STINNER: More information is required. I know that the Affordable Care Act came in and I think that that's more in line with income tax information maybe than we had in the past. I know there's a different application, a more simplified application, those types of things. I'd be interested in looking at those types of trends. And then as we incorporate some of these phases

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

that Courtney, Ms. Phillips was talking about to see if we can't see a trend line going down. Does your organization also conduct any kind of surveys? [LR33]

MOLLY McCLEERY: We conduct a survey of the people that call us, but it's more of a customer service survey. And then one of the questions in there is whether or not the issue that they called us about has been resolved. So that's our only formal survey that we continually do. We have in the past done focus groups on specific issues or held listening sessions. The working group held listening sessions several years ago talking to clients that are navigating through the ACCESSNebraska system. And we got a lot of...it wasn't quantitative data, but it was good qualitative data. [LR33]

SENATOR STINNER: And this is public information that I could get my hands on? [LR33]

MOLLY McCLEERY: We could provide that, yeah. [LR33]

SENATOR STINNER: Okay. [LR33]

MOLLY McCLEERY: I think there's electronic versions. [LR33]

SENATOR STINNER: And I think management would like to see it as well... [LR33]

MOLLY McCLEERY: Yes. [LR33]

SENATOR STINNER: ...just to kind of analyze the type of questions that you're getting. [LR33]

MOLLY McCLEERY: And that's one thing that we have spoken with Ms. Phillips about providing, is a breakdown of the types of calls that we're receiving and trying to categorize, okay, we seem to be getting a lot of this type of call. What is the breakdown there? Is it a staff training issue? Is it some sort of...like are the clients just not understanding what they're being asked, like what is the breakdown? And so that's something that I have our intake person working on right now, is looking...coming back through the past couple months and putting something like that

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

together. And if that would be helpful for you to see as well, we could try to provide that to you.
[LR33]

SENATOR STINNER: That's a good measurement tool. Thank you. [LR33]

SENATOR HOWARD: Senator McCollister. [LR33]

SENATOR McCOLLISTER: Thank you, Senator. I understand Appleseed has a national perspective. [LR33]

MOLLY McCLEERY: Yes, we are part of a national network of 17 Appleseed centers, but we all are independent in that we can focus on local issues. And so Chicago Appleseed works on their own thing; D.C. Appleseed works on different issues than we do. But we do have a national board and can tap into national partners for information. So if we are interested in something that is happening in a different state, we can ask about that. [LR33]

SENATOR McCOLLISTER: What's your...when you talk to your colleagues in other states, are they having the same kinds of problems with their...inside their states? [LR33]

MOLLY McCLEERY: Yes. We have been working with the National Center for Law and Economic Justice on this ongoing piece of litigation. And they have worked in a number of states on these modernized benefit systems. And I think their perspective has been that the...a lot of states move to these systems thinking that it would be a cost-saver and more efficient. If you're doing things in a call center and you don't have these individualized workers, it's going to save the state money. And I think a lot of states have seen that that isn't...they've ended up in a situation much like what we're having here. And a lot of states have ended up in similar litigation as a result, at least on the Economic Assistance side. [LR33]

SENATOR McCOLLISTER: Okay, thank you. We've talked about the satisfaction rates. And I think our measurement is the federal standards. And Nebraska has gone down since 2009.
[LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

MOLLY McCLEERY: Uh-huh. [LR33]

SENATOR McCOLLISTER: Have you known of any other state that has dropped as far as we have? [LR33]

MOLLY McCLEERY: I don't know of any state that's dropped...I haven't watched other states as closely as I've watched Nebraska. But I do know...I think the only other states I've been watching are ones that are close to us in the rankings, so I can't really answer that question. But I do know that in a couple other states that have changed their systems they have dropped or have seen an impact in some of the quality control measures around SNAP and that that wasn't expected when they moved to a more sort of modernized system. [LR33]

SENATOR McCOLLISTER: Have...to your knowledge, has there been a great deal of difference in the way states have approached the call centers? Have they reverted back to the old model? [LR33]

MOLLY McCLEERY: I think some have. I think some are sort of doing like a hybrid model where they might have in-person assigned assisters for certain groups but then keep the call center model for others. I really...I'm not sure. It's sort of an area in flux at this point. But I could...I'd be happy to provide you with more information if you're interested in that. [LR33]

SENATOR McCOLLISTER: Like Senator Stinner, I'm anxious to find out the kinds of questions you get from constituents. Is it a training issue, a system problem, telephone issues, the kinds of things that you're running across, because that would be very useful. [LR33]

MOLLY McCLEERY: Yes. [LR33]

SENATOR McCOLLISTER: Well, thank you very much. Thank you, Senator. [LR33]

MOLLY McCLEERY: (Inaudible) [LR33]

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Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR HOWARD: Other questions? Would you say that the Nebraska model is shifting into the hybrid model? [LR33]

MOLLY McCLEERY: I think that as a result of LB825 and some of the legislation of the past few years where there was more of a focus on clients being able to access an individualized caseworker or ask for one if they need it, then it is kind of, in that respect, yes. But I think it's still pretty much a call center model as we heard from testifiers earlier today. [LR33]

SENATOR HOWARD: And then just in regards to litigiousness... [LR33]

MOLLY McCLEERY: Um-hum. [LR33]

SENATOR HOWARD: ...can you help the committee understand why timeliness is so important, especially when they're processing SNAP applications. [LR33]

MOLLY McCLEERY: Yes. So SNAP, we...one thing I think that is hard for me and one thing I always have to step back and think about is SNAP processing is based...the measures around it are based entirely on percentages and whether you are meeting the 95 percent threshold of the federal government. And we were at the 69 percent threshold. And for me, all...I think of that in terms of numbers. But what...at the time where we filed the lawsuit, the average application load for SNAP every month was roughly 35,000 applications. And so if...and that includes both recertifications and initial. And so if you think about that, if only 60 percent of those are getting processed timely, several thousand people are waiting beyond the mandated time line to get services to which they are entitled. And this is food that people are not able to put on the table for their families. I have a number of stories of clients calling and saying, you know, this is a service that we are using. I'm a working parent. I'm trying to get food for my child. And I've had to submit verifications over and over. It's taking forever to get my application processed. By the time I get the service, I've gotten myself back on my feet again and I don't need it anymore. So I think it's helpful to step back sometimes and think about this in terms of not numbers but people struggling to put food on their table or struggling to get the healthcare services that they need. [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR HOWARD: Thank you. Are there any other questions for Ms. McCleery? Seeing none, thank you for your testimony today. [LR33]

MOLLY McCLEERY: Thank you. [LR33]

SENATOR HOWARD: I think we're going to skip Mr. Intermill; he's going to be our last testifier. So our next testifier is Joyce Kubicek from Aging Partners. Good afternoon. [LR33]

JOYCE KUBICEK: (Exhibit 7) Good afternoon, Senator Howard and committee. Our Area Agency on Aging, Aging Partners, cares deeply about this issue. As a community partner, we have assisted older people with using the call center system since its inception. I lead a team of 16 care managers and also interact regularly with information, referral, and Medicaid Waiver service coordinators, all of whom have a lot of interaction with the Department of Health of Human Services. ACCESSNebraska continues to be a topic of energetic discussion every time we meet. Many staff members tell of situations they encounter with the call centers that lead to delays and frustration for older people. ACCESSNebraska has evolved over time, but the problems have not gone away, although some of them have changed. Based on our experiences, we have several suggestions to improve services. Several care managers I work with at a recent meeting--and I'm talking last week--told stories of applications that got stuck in the systems or documents that were lost or cases that were closed where clients were not even aware of that until after a period of time. We notice that when an older person is assigned to a worker, as they are in the Medicaid Waiver program now, that's one of the changes that was made since the call centers came on board, their annual reviews and applications are processed more smoothly. We suggest that categories of disabled or older people receive an assigned worker when they're unable to use the call center successfully. Limiting the number of people involved in a case application and providing consistency with people would help those who cannot communicate effectively by phone or computer. A second suggestion is to allow community partners to have read-only access to N-FOCUS files for our clients, if they give us that permission. Often, Medicaid cases get bogged down because clients have difficulty interpreting the letters they get asking for verification. Some of these people have Alzheimer's disease or other problems but they still live in the community. That's the people we serve a lot. If we could go in and look at those verification letters, we could help speed up the process, help our clients find that

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

information, explain it to them because they're not accustomed to the language or what is being asked for. If we can't have that, if that's not possible, we suggest a designated supervisor whom we could contact to help us solve problems--so not everyday things that go through normally, but when we hit a problem. Release of information forms are another ongoing source of confusion and frustration. Some care managers are routinely submitting five different releases to Department of Health and Human Services when they send in applications because different workers ask for different ones and it's different sometimes depending on who you're talking to. Even when we do that, within the last two weeks, one of the care managers I supervise said, I have been asked to note when I send in my release of information, when I scan it in and put it into the computer record. It's hard for the worker to find it if I don't tell them the date I send it in. Well, you can imagine along your caseload how many people you would have to remember that date for; it would be really hard. So we often resend things and we would wonder if it would be possible to have one release for Community Partners that could be redone annually, or whatever the time frame is, if our clients agree to it, so that we could talk to the person doing food stamps, the person doing Medicaid and be more helpful. Finally, the most recent roadblock has been the requirement for marriage licenses, divorce decrees, and death certificates for deceased spouses. If those events occurred recently...and in the state of Nebraska it's fairly easy to obtain those documents, although it can be a problem and there is a cost. But many of our clients are like Mrs. C. She is someone I worked with who is over 80 years old, lives on \$861 a month, and has been on Medicaid for quite some time. She divorced 40 years ago. We had to provide the proof of that divorce. It was done out of state by her husband. She did not even know what county. If I didn't have a family member that she knew that could help with that, I don't know what I would have done to help her. I can write away to get them or that type of thing, but I have to know what county it was in. We also had another care manager who was helping someone get a similar document out of the state of Colorado. The divorce was in the 1960s. Their computer records start in the 1970s. So you have to physically show up at that county office. Luckily, the care manager knew someone who lived in that town who was willing to go down and look in the microfiche. But it seems to me that there must be a simpler way. And what if someone doesn't have an advocate? So that is something that's fairly recent that we've encountered. And we don't know, we can't find that it's a state or federal law, according to Appleseed. So I think it's an internal requirement, and we're wondering if that could be adapted, because what it means is someone doesn't get the benefit that may need to go into assisted-living instead of nursing home

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

or may need medical care. In summary, these issues are still ongoing. We share the same goal as all those who have spoken today. We're trying to keep older people in their own homes. We want to help with that and we would ask that some of these suggestions be considered that I've outlined in my letter. We appreciate the willingness of the department to listen to those. And we think this would save time for the Department of Health and Human Services, would be less frustrating for our consumers, and provide better care for older and disabled Nebraskans. And I want to thank you for continuing to say we can do better. And I just want to...can I say one thing about Economic Assistance and Medicaid? Although it is true they can look at the N-FOCUS for both programs, you do now have to fill out two applications. So if I have an older client, I have to fill out Medicaid application and a SNAP. Before the split, I could fill out one application and one release of information form. We would be glad to give more detailed information on some of the requests that seem more onerous. For example, I got an email today of a care manager who the person has to provide that they have a burial fund. We have a copy of the contract that says it's irrevocable. So it is allowed. But now we're being asked to provide a copy of the CD that the funeral home holds with that irrevocable burial funds. It seems a little more of a burden than a lot of our older clients can handle. Thank you so much. [LR33]

SENATOR HOWARD: Thank you. Are there questions? Senator Riepe. [LR33]

SENATOR RIEPE: I have a question. It sounded like in some of your earlier comments that some of this may, if not, it certainly flirts with HIPAA concerns and violations. And you know, my understanding is Appleseed has attorneys. You might go to them and ask them about how you can legally circumvent or work with HIPAA to be able to get authorization for people's...to represent them and those kinds of pieces. [LR33]

JOYCE KUBICEK: Sure. Well, we do have our own internal release of information, but we do have to use the Department of Health and Human Services. And one of my points was there are several of those releases: one for Economic Assistance, one for Medicaid. Then there's several versions and that we would welcome training and/or information about when they are required. And we would like to ask for less of them because it just seems like it could be done more easily. We don't want to violate any of the privacy rights of our clients, but they are often asking us to access that information on their behalf. I have clients who can't hear, who buy their cell phone

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

minutes so they don't want to burn them up, you know, because they can't afford to be without their phone, people who speak English as their second language, who have memory loss. So those are the kinds of things when I'm wanting to access the information. But thank you. [LR33]

SENATOR RIEPE: Thank you. [LR33]

SENATOR HOWARD: Senator Stinner. [LR33]

SENATOR STINNER: Thank you, Joyce. Is Aging Partners the same thing as the Aging Office? [LR33]

JOYCE KUBICEK: There's a State Unit on Aging. We are one of the eight Area Agencies on Aging in the state of Nebraska. And we cover eight counties. And we are actually part of the city of Lincoln. I'm an employee of the city of Lincoln. [LR33]

SENATOR STINNER: Okay. Is Cheryl Brunz part of your...from Scottsbluff? [LR33]

JOYCE KUBICEK: She may be with the... [LR33]

SENATOR STINNER: She's with the... [LR33]

JOYCE KUBICEK: ...Area Agency on Aging in Scottsbluff, yes. [LR33]

SENATOR STINNER: Okay, because are you aware of LB320? LB320 basically creates a pilot project for the Aging offices to take disability as well as Alzheimer's as... [LR33]

JOYCE KUBICEK: Oh, at the ADRC? Yeah. [LR33]

SENATOR STINNER: ...as a single touch point so that your 85-year-old or your 80-year-old client could go there and basically navigate the system, making it a whole lot easier. And I think, in talking to Cheryl Brunz out west, they want to break this in, this pilot project. Instead of having three offices, each one take a person and try this out throughout the system. And many of

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

the things that you point out are valid points. I think a lot of what I'm hearing from the Aging office is that they do need to have the expertise in their office to help navigate, to know all the programs and how it will all works. So maybe somebody from the DHHS could be embedded in those offices to help navigate the system and maybe mitigate that. [LR33]

JOYCE KUBICEK: We would welcome that also. That would be great. [LR33]

SENATOR HOWARD: Other questions for Ms. Kubicek? Seeing none, thank you for your testimony today. [LR33]

JOYCE KUBICEK: Thank you. [LR33]

SENATOR HOWARD: Our next testifier is Mr. Marvin from NAPE/AFSCME. Good afternoon. [LR33]

MIKE MARVIN: Good afternoon, Senator Howard, members of the committee. I'm here as the executive director of NAPE/AFSCME. We're the union representing the vast majority of state employees. And I appreciate the invitation to appear today. I'm here today to basically give you the feedback we're getting from the employees. I'm not here to talk about what's happening with the clients. They have their advocates here who are speaking for them. But we are getting feedback from our employees. I do want to say one thing on the outset. We're not hearing from our Medicaid people anywhere near as much as we are our EA people. That seems to be where the vast majority of our problems lie at. You know, problems have been ongoing since the beginning of ACCESSNebraska. I will address that maybe just a little later here. But one of the first things I do want to talk about is what's gone on since Ms. Phillips has come on board. We think it's a very positive thing. Most of you may have seen the article in the World-Herald where she said she's a see me, touch it, feel it, you know, kind of like Pete Townshend and The Who in "Pinball Wizard" there. And she is true to that. She is out there in the field. She's been meeting with front-line staff, talking to them, getting feedback from them, working with them, has opened up her office to them to e-mail her directly if they have issues. And that has gone a long way on employee morale just to see somebody at her level coming out and meeting with them and speaking with them. And we really appreciate that. We think that...she's met with me on

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

several occasions. We have another meeting scheduled next week. Things happen, she calls me several times, tell me if something was happening. So her communication with us and her communications with the employees has been very good, and we do like that. You know, some of the other things that I wanted to talk about, we have seen a few other things that are helping employee morale. When we went to the same-day processing of SNAP benefits, that helped immensely. When we were at the top of the list and we were getting bonuses and everything, our employees took a great deal of pride in that. They took ownership. When it fell to where it was, it was very hard on them. It was very hard on them to see. And we appreciate the steps that have been taken to get that back in shape. But now I've sung some praises, I'm going to do some criticisms. I realize that this staff has only been on board, this leadership team, for about four months, but I think they should have solved everything by now from nine years of mismanagement or (laugh) or whatever we have here. But we do see several mistakes, that we believe happened before, happening still but happening much less. There is always a change in the way a program is being processed. Things are constantly in flux. The workers have a hard time keeping up with things and knowing what the new policy is or how to do things. Those types of things have to be worked out. It is better--I will say that now--than it has been. But one of the other problems that we've had--and again, this was just before Ms. Phillips came on board--we had a statewide labor management meeting with workers and management from ACCESSNebraska. We left the rest of DHHS alone. We just dealt strictly with ACCESSNebraska. The caseloads were way behind. Things were happening out there. They weren't able to retain staff, and I'll touch on that again in a minute. But they were looking at this. They were mandating overtime, which happens. But they were doing simple math work to determine how much a person has to do in a week or a day. They would divide the number of cases by the number of employees and that's what you've got to do in a period of time. Didn't matter if you took your earned vacation, your earned sick leave, bereavement leave; your caseloads were not...your expectations were not adjusted. They just said, this is what you have to do, period. We don't think that's an efficient way to do things, because people push and they do things and it creates more problems down the line. Some of that, it does seem to have gotten better. I know it has in many of the places, but I'm not sure the message has gotten across to everywhere in the state on that because we get certain calls from certain areas and some of these things are still happening in some offices, you know, those kind of things. Another step that has happened that is positive but I still have a few concerns about, when workers are making

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

mistakes. In the past they have been come down on severely, as hard as they could. And some of it was due to the flux in the programs and how they changed and the expectations of how much work you would have to do just simply based on the number of pending cases out there. People were not being counseled; they were just brought in. In the last several months, we have seen that they have been engaging employees in counseling. Now I'm not 100 percent sure the counseling...what they're calling counseling is what I call counseling. But they are lesser disciplined. They're trying to take steps to encourage the employees to stay. I think more could be done. That's one of the things that is on my agenda to speak with Courtney about next week when we meet. So we do see some positive things happening. But employee retention is still an issue. It is still a problem because they still feel a lot of pressure on the job. And I think it's going to continue to be a problem for a while. And we knew it was going to be problem when ACCESSNebraska came in. I was here in 2009 when they first started to bring it in. But at that time I was leaving. When it was fully implemented, I was not here. But prior to us...prior to that, when I was still here, we were telling the department, we were telling the Governor's Office, this isn't going to work, it hasn't worked anywhere. It's not. Senator Riepe talked about efficiencies. For the life of me, I will never see how a system like this can be efficient. When a client calls in, they're never talking to the same person. That person has to pull up a file. They have to look at the file. They have to look at the wrap-up from the call. They have to look through the narrative of what it is. But that's all paper. They don't know that person. They haven't established a rapport or a relationship with that person. We think that is a serious, serious problem. It doesn't lead to a continuity of care. And there's no way that can be efficient when you're taking that much time to look at every case again and again. Technology is wonderful, but technology also brings its own problems with it. And they're on both ends. Maybe the users are having problems communicating what they need, the clients, and our people. So we think there's some issues there that need to be addressed. As I heard earlier, we think it will be more efficient to go to more of a dedicated caseload. I know we're looking at kind of a hybrid and there is a place for ACCESSNebraska because it works for some people. But it doesn't work for all and it creates more problems in the workplace, I believe, than what it has really, truly solved. I know my red light is on. I'll try wrap up here. We stand ready to work with the agency. And I firmly believe that, under Ms. Phillips' leadership, the agency is ready to work with us. We've never seen that before and we're very, very happy to see that. We probably will never quit saying that

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

ACCESSNebraska is not the right thing. So with that, I will probably follow up with you with a written statement later on. [LR33]

SENATOR HOWARD: Senator McCollister. [LR33]

SENATOR McCOLLISTER: Yeah, thank you, Senator. You indicated that you have relationships with your employees. Have you reviewed the 2014 survey from the ACCESSNebraska, and do you see any significant differences in your perception? [LR33]

MIKE MARVIN: I have not reviewed it, Senator, I'm sorry, so I can't really comment. You know, my perceptions are that things were getting better but not where they need to be, so. [LR33]

SENATOR McCOLLISTER: Okay. [LR33]

MIKE MARVIN: Just...that's from my conversations with state employees. [LR33]

SENATOR McCOLLISTER: Yeah, you...well, we're also talking about a bonus system. Has that been reinstated or what's the status of the bonus system? [LR33]

MIKE MARVIN: Are you talking about the bonus that we...I was talking about the bonus that we would get from the feds for doing... [LR33]

SENATOR McCOLLISTER: Oh. [LR33]

MIKE MARVIN: ...accurate, you know, processing of SNAP apps. [LR33]

SENATOR McCOLLISTER: My mistake. [LR33]

MIKE MARVIN: So the state would get...when I say "we," I include all of us as a state. [LR33]

SENATOR McCOLLISTER: Okay. [LR33]

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

MIKE MARVIN: So as far as bonuses for employees, no, there's nothing been approached to us about that. [LR33]

SENATOR McCOLLISTER: I see. You indicated the programs are in flux. Is that initiated by the federal government or did Nebraska initiate? [LR33]

MIKE MARVIN: I think some of it's negotiated by the federal or is done by the federal government, but I think there's constantly, as they evaluate things, this isn't working, let's try a new thing, you know. And so it's hard for people to keep up with that and know where they're at. It's frustrating to them. It doesn't lead to retention for employees when they come in frustrated because we're constantly changing things. [LR33]

SENATOR McCOLLISTER: You indicated you were around in 2009. Have you seen that the employee stress is greater now than it was in 2009? [LR33]

MIKE MARVIN: I would say, yes. [LR33]

SENATOR McCOLLISTER: Okay. And finally, are employees given an adequate opportunity to make suggestions for system improvements? [LR33]

MIKE MARVIN: In the past I do not believe they were. Today I believe that that is happening. You know, I honestly believe that there is much more openness and willingness of the agency to listen to employees. [LR33]

SENATOR McCOLLISTER: Thank you, Mike. Thank you, Senator. [LR33]

SENATOR HOWARD: Thank you. Any other questions for Mr. Marvin? Senator Hansen. [LR33]

SENATOR HANSEN: Thank you, Senator Howard. Mr. Marvin, I want to just kind of get your perspective of the question I asked Ms. Phillips which, to refresh you, was just asking for your

Transcript Prepared By the Clerk of the Legislature
Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

perspective on kind of both the causes and impact in employee recruitment and employee turnover. [LR33]

MIKE MARVIN: Could you repeat that again? I'm sorry. [LR33]

SENATOR HANSEN: Just asking what your perspectives on kind of employee turnover, employee recruitment are, what are common problems, what are common... [LR33]

MIKE MARVIN: Well, one of the serious problems is the same as I've said in hearings on many other agencies. There is no means for a person, since 2002, to advance through a pay line. A person hired today makes the same money as a person hired in 2002. What incentive do they have to stay? We need to find a way to advance people, reward their loyalty and their experience with the state. I think that is probably what we hear more complaints about than anything. I think that is huge. I think there are other things that could be done that would help, maybe not as much in ACCESSNebraska as in others, but we can start looking at things for single parents on how do we assist them with childcare, those kind of things, because it becomes a problem, particularly when we start mandating overtime with people who are single parents. So we could look at those kind of things. I think that the employees often don't hear...when I talk about counseling employees, I think counseling also includes, "You're doing a good job, this is what you're doing right, this is what we appreciate," you know, and also asking them and encouraging them to work with their coworkers when things that they're doing right and they know a coworker is not doing right, maybe personally work with that coworker and mentor them a little bit on those kind of things. I think that would go a long way towards retention. [LR33]

SENATOR HANSEN: Okay, thank you. [LR33]

SENATOR HOWARD: Senator Stinner. [LR33]

SENATOR STINNER: So do I hear you say that the number-one reason for employee turnover is that they don't hit certain levels and advance in pay? [LR33]

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Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

MIKE MARVIN: That is one of our biggest complaints that we get from long-term employees. [LR33]

SENATOR STINNER: Okay. [LR33]

MIKE MARVIN: They get frustrated with it. Can I say that that is the reason they're leaving? I can't say that for sure. I don't have the data to show that. But I can tell you that we hear constant complaints about that. [LR33]

SENATOR STINNER: Respond to this for me: It's a performance-based pay for a compensation; in other words, when you hit a level of competency or proficiency you would move up on a pay scale and maybe you'd have two or three levels of that. Are you opposed? Or what's your reaction to that? [LR33]

MIKE MARVIN: My first reaction is I would need to see how it was structured. It would...it couldn't be something that could be subjective by supervisors, employee evaluation, those kind of things. It would have to be something that has some hard, hard ways to measure. [LR33]

SENATOR STINNER: So we'd have to have metrics that shows that you can handle this much in the caseload, that you have passed certain tests, that you're certified to go to another level. [LR33]

MIKE MARVIN: We would be willing to look at that. Now let me qualify that also, Senator Stinner. Whatever we agree to at a bargaining table or everywhere else has to go out, must go out to a vote of the workers. [LR33]

SENATOR STINNER: How many workers do you have? Tell me the percentage of union workers. [LR33]

MIKE MARVIN: We're running about 20 percent is all of the... [LR33]

SENATOR STINNER: Twenty percent of the labor force is going to... [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

MIKE MARVIN: Yeah. [LR33]

SENATOR STINNER: ...dictate to the rest? [LR33]

MIKE MARVIN: That's how it goes. They're the only ones that are allowed to vote and the law says that when we do an agreement the...it has to be voted on by the membership. [LR33]

SENATOR STINNER: So if we were able to put together a system where people could have proficiency levels or career paths, you wouldn't necessarily be opposed to it, you'd like to look at it, and you've have to pass it out to the entire membership, regardless if it's in ACCESSNebraska or not? [LR33]

MIKE MARVIN: Well, here's what...yeah, it would have to go to all the HHS membership. We have different bargaining units. I could go into a long list on how that's structured, but we'd be here for awhile. But based on the structure it would have to go out to the people on something like that that are affected by the bargaining unit that is affected by that and that bargaining unit would have to vote on it. [LR33]

SENATOR STINNER: Okay. You also said that you didn't feel that there was...that people don't get complimented enough or that there isn't a coaching and mentoring system in place. [LR33]

MIKE MARVIN: Honestly, I do not believe that there is a coaching/mentoring system in place. When they get counseled they're being told, this is what you're doing wrong, this is what you're doing wrong, not looking at it to evaluate how can we help this person do it right, coach them through, sit with them, watch them, see what's happening. Now, granted, there are some who will never get it right, and I understand that. But you do...you can't just simply say, you're doing it wrong. You have to work with them to improve it, to retain them, to get the most out of them that you have. [LR33]

SENATOR STINNER: Okay. I'm just referring to a report. And it's not my report but I'm going to read to you: Union labor contracts inhibits the organization's ability to financially motivate

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Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

results and build performance as cornerstones of the culture. Tangible monetary rewards would be difficult to implement. [LR33]

MIKE MARVIN: Is that talking about labor contracts in general or is that talking about the NAPE/AFSCME labor contract? [LR33]

SENATOR STINNER: My understanding is it just says: Union labor contracts inhibits the organization's ability to financially motivate results and build performance. [LR33]

MIKE MARVIN: Senator, if you want, you could actually go out and look at our contract. It is on our Web site at www.napeafscme.org. And DAS also has a copy of it. Article 11 deals with wages. Article 11.1.1 of our contract says, nothing in this agreement shall prohibit the employer from giving out bonuses or merit increases. Now, that being said, there is another article that says if I don't think it's being done fairly, we could grieve it, you know, if it's not being applied evenly and fairly. [LR33]

SENATOR STINNER: One of the biggest challenges ACCESSNebraska has is employee turnover, attracting and retaining people. And sometimes employers, at least in the private sector, have tied performance-based pay and have been able to solve that challenge through that methodology. So this might be a little bit different animal than maybe most places. [LR33]

MIKE MARVIN: It might be, you know, but, you know...and I will tell you that HHS and ACCESSNebraska is not the only state agency that is having that issue of turnover and retention. [LR33]

SENATOR STINNER: Okay, thank you. [LR33]

SENATOR HOWARD: Any other questions for Mr. Marvin? Seeing none, it's always nice to see you. Thank you for your testimony. [LR33]

MIKE MARVIN: Thank you very much, appreciate the opportunity. [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR HOWARD: We'll now hear from Mr. Wyvill from the Nebraska Commission for the Deaf and Hard of Hearing. Good afternoon. [LR33]

JOHN C. WYVILL: (Exhibit 8) Good afternoon, Madam Chairperson. Members of the committee, my name is John Wyvill, W-y-v-i-l-l. I am the executive director of the Nebraska Commission for the Deaf and Hard of Hearing. And we're very grateful for Senator Howard to invite us to the committee and to share some of the concerns in the deaf community and the hard-of-hearing community about the accessibility of ACCESSNebraska. Before I do that I would like to share with you a quote from a famous disability rights advocate, Helen Keller. In describing herself she said, being blind cuts me off from things, being deaf cuts me off from people. And what we are talking about here today is that some of ACCESSNebraska's services are not accessible or can be accessed by the deaf and hard-of-hearing community. Before you is a handout that we distributed before the committee. In the interest of time, just want to let you know that I met with Director Phillips to go specifically over, point by point, the concerns and issues. So I'm just going to summarize the three areas that we talked about, in the area of technology, training, and language. First of all, in terms of technology, in the past TTYs were employed for deaf individuals to call in. That is a little box with a telephone on it and which you would type on one end. Technology is changing and more deaf consumers and hard-of-hearing consumers are using different technology, such as video phones and CapTel phones. So we have suggested to Director Phillips to be looking at making changes there. Also, with...in terms of CapTel phones, those are telephones that an individual has who is deaf or hard of hearing and which the words come up on the phone and they have someone typing that up for them. So they may be talking on the phone, and the person on the other line is talking back and the words come up. Occasionally when they're using a CapTel phone dealing with ACCESSNebraska employees, there will be a pause while they're typing and then the person assumed that there's a dropped call and would hang up. So those are some of the technology issues that we feel need to be addressed. Second, in terms of training, shared with Director Phillips some of the ways to change the culture of HHS by providing training on deaf culture and hard of hearing to address the concept of paternalism on the deaf community, a term called "audism" in which individuals are not treated with dignity and respect and there's a very condescending approach. The third area is basically language. Basically in Nebraska 1 percent of the population is estimated as being deaf and those communicating with American Sign Language. The Hearing Loss

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

Association of America basically says there's about 20 percent of all Americans have some form of hearing loss and over the age of 65 it goes to one in three. My comments about the language is very specifically relating to a person that communicates in American Sign Language. That's their primary language. English is a second language. So if they go on to the Web site and attempt to read the Web site and the language, that can be very complex and confusing because they may be only reading at our equivalent of a third- or a fourth-grade level. And so that becomes challenging when it's on the Web site or when they are working with a sign language interpreter or relay trying to understand and comprehend the language. It's not a competency issue of the individual. It's trying to understand those languages. So basically, in a nutshell, that concludes my comments as I see my yellow light is about up. And we met with Director Phillips, like I said, and she has pledged to specifically address all of those issues that I bring before the committee and she looks forward to working with me in the year ahead, as well as I. [LR33]

SENATOR HOWARD: Thank you. Senator McCollister. [LR33]

SENATOR McCOLLISTER: Thank you, Senator. Thank you for your testimony. The Public Service Commission levies a fee that appears on my monthly cell phone bill. Have they been of any help to you as you work through some of these issues? [LR33]

JOHN C. WYVILL: The Public Service Commission has been very helpful and that program been very successful. It's called the NSTEP program in which those who are deaf or hard of hearing can get an accessible phone to communicate. And that has been very helpful with consumers and that's part of our mission. We work with individuals that have trouble communicating. They can fill out an application and we help them get a voucher so they can purchase an accessible phone. It could range from an amplified phone to a CapTel phone. It just depends on the level of hearing loss. [LR33]

SENATOR McCOLLISTER: Are you getting the same level of support from HHS? [LR33]

JOHN C. WYVILL: I've met with Courtney Phillips and she pledged that she's going to work with me, so we're very excited about that. I can share with you that my colleagues from

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

Louisiana have spoken very highly of Ms. Phillips, so that's a very positive and encouraging thing. [LR33]

SENATOR McCOLLISTER: Thank you very much. Thank you, Senator. [LR33]

SENATOR HOWARD: Thank you. Other questions for Mr. Wyvill? We're running out of steam. Thank you very much for your testimony today. [LR33]

JOHN C. WYVILL: Okay. Thank you for your time. [LR33]

SENATOR HOWARD: And last, but not least, we will hear from Mr. Mark Intermill from AARP. Good afternoon. [LR33]

MARK INTERMILL: (Exhibit 9) Good afternoon, Senator Howard and members of the ACCESSNebraska Investigative Committee. I do understand I am the only thing standing between you and the weekend (laughter), so I will abbreviate my comments here. [LR33]

SENATOR HOWARD: Thank you. [LR33]

MARK INTERMILL: AARP has been engaged in the issues related to ACCESSNebraska almost from its inception. And in my opening paragraph, I say that ACCESSNebraska is not working well. It hasn't worked well. We have seen varying degrees of dysfunction over the years. Actually, we're probably a little less than we have seen in the past. But I'm going to go back to the 10,000-foot level. You've heard some specific issues that have been raised. I appreciate following Joyce Kubicek because she's identified a lot of the issues at the aging services level. But I think there are a just a couple of basic questions I think this committee needs to deal with and the first one is, can ACCESSNebraska work? There has been a point in time when I would have leaned towards no. But I've had an opportunity to talk to people who it works for very well, and these tend to be people who have some ability to use information technology. They have communication skills. They are able to work within those types of parameters. That doesn't necessarily describe a lot of the 85-year-olds that we hear from who don't have the technology skills who may have difficulty, as we just previously heard, in terms of communicating

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

telephonically. So I think in the final analysis the answer to the first question depends on the second question, which is, is the state of Nebraska willing to expend the resources that are needed to make it work? And there are two basic types of resources I think we need to be looking at. First of all, the human resources, do we have enough people to do the job that we're asking them to do and are they trained adequately? We heard the discussion of the workers in ACCESSNebraska and I think some of the issues might be that we need to invest a little bit more in the training of those individuals so that they are more comfortable in their roles. And do we have them deployed correctly? I think we've seen some willingness on the part of the department to offer more face-to-face counseling between those workers and people who might need that. So those human resource issues are one piece of the puzzle. I think the other has to do with information technology. It's my observation that we're asking the Department of Health and Human Services to perform 21st century information management processes with a 20th century information management system. And I think until we address that we will continue to have those problems. And then the third question I think we...the committee needs to consider is, if the answer to the second question is no, if we're not willing to commit the resources, are we willing to accept the consequences of ACCESSNebraska not working? And I think there are two...a couple of consequences. The first one is the impact on community-based organizations. And you've heard from several of them today. I talked to aging services, county-based aging services offices who are using up a significant portion of their staff time to help people navigate ACCESSNebraska, rather than doing the things that they were hired to do. So I think those...that's one element that is important to keep in mind as you consider what to do about ACCESSNebraska. But the other is, are we denying people services because have made the process for enrolling so difficult that people just give up? And in trying to come to term...or to bring you some information about whether that's happening, I did look at the information on the dashboard that HHS has and noted that for the aged and disabled, from I believe April of 2014 to May of 2015, we've had an 8.8 percent drop in the number of aged and disabled individuals who are enrolled in Medicaid. And Medicaid is probably the issue that AARP is most interested in. We provide...a lot of our long-term care services are financed through Medicaid, so most of the paper that you have in from of you from me tries to identify what those possible explanations might be for that 8.8 percent reduction, the diagnosis of exclusion being that the system has become too difficult for people to maneuver, to manage. And in talking to some Area Agency on Aging directors, some have seen some reductions in the numbers of people who are enrolled in,

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ACCESSNebraska Special Investigative Committee
July 17, 2015

for example, and the home and community-based services waiver, which is the program that helps us avoid higher cost and long-term care in nursing homes. So those are just something else that I wanted to bring to your attention, something that I think we need to be taking a look at to make sure that we're not creating barriers to getting needed services by virtue of the process for enrolling in those services. Thank you. [LR33]

SENATOR HOWARD: Thank you. Are there any questions? Senator Craighead. [LR33]

SENATOR CRAIGHEAD: Thank you, Senator Howard. Mr. Intermill, thank you for being here today. [LR33]

MARK INTERMILL: Thank you. [LR33]

SENATOR CRAIGHEAD: You know, your arguments here are what we've all heard. And what's your understanding of the cost of a new computer system for the state? [LR33]

MARK INTERMILL: I am a former administrator in HHS and had to put together a computer system with \$60,000 that didn't work, so I'm not sure I'm the right person to answer that and that was several years... [LR33]

SENATOR CRAIGHEAD: What did you say... [LR33]

MARK INTERMILL: \$60,000. [LR33]

SENATOR CRAIGHEAD: Okay. [LR33]

MARK INTERMILL: It was inadequate. Those, it takes a lot more than that to get the type of computer system that we need. But on the other hand, if we don't have the type of ability to manage the information that we need to manage, we keep...we'll be on this cycle of just trying to keep up with things and not be able to get ahead. [LR33]

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Transcriber's Office
Rough Draft

ACCESSNebraska Special Investigative Committee
July 17, 2015

SENATOR CRAIGHEAD: That's interesting. The reason I ask is, of course, you know, you hear all these. Now I had heard the number of \$20 million, so. [LR33]

MARK INTERMILL: That wouldn't surprise me. [LR33]

SENATOR HOWARD: Senator McCollister. [LR33]

SENATOR McCOLLISTER: Yeah. Thank you, Mark, for testimony. Thank you, Senator. Grill in on that computer system issue. Are there states that have done it right that we could look to? I know you have a national perspective on... [LR33]

MARK INTERMILL: Yeah. Yeah, I think there are and it just...the whole information management, I think many states we could look to, to try to identify options that might work better. But...and part of the challenge of...in the Medicaid program is that we are kind of changing. As we move more to a managed-care system, it takes a different...may take a different type of information system to do that rather than one that pays claims. But I think there are a number of states that we could look to that would be able to provide some assistance in that. There's a...the national association of state health programs is an organization where state health programs come together and share information about best practices, and I think that would be one of the first places that I would look to try and find that type of information. [LR33]

SENATOR McCOLLISTER: Do these computer systems that are working well, are they integrated or do they have a silo component approach? [LR33]

MARK INTERMILL: I think they've got to be integrated. And that was, you know, going back to the earlier developments in Nebraska's development of information systems, that was one of the things that was intended was to try to develop that integrated system so that you could share information across programs that we just really, in my observation, haven't been able to achieve yet. But, yeah, I think...and, you know, that kind of gets to the issue of some of the things that Joyce was mentioning that when you have to submit the same information more than once or if you have to submit multiple authorizations to share information, that's what really starts to frustrate the public is, you know, these...why am I having to do this over and over again? So if

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ACCESSNebraska Special Investigative Committee
July 17, 2015

that can be addressed, I think that gets us a long way in improving the public perception of the program. [LR33]

SENATOR McCOLLISTER: Thank you, Mark. Thank you, Senator. [LR33]

SENATOR HOWARD: Thank you. Are there any other questions for Mr. Intermill? Seeing none, thank you for your testimony. [LR33]

MARK INTERMILL: Thank you. [LR33]

SENATOR HOWARD: This concludes the ACCESSNebraska Special Investigative Committee hearing for today. Everybody have a good weekend. [LR33]