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March 30, 2023
Senate Committee on Licensing, Constitution and Federalism Testimony from Rep. Will Penterman in favor of SB 129

Chairman and members of the Senate Committee on Licensing, Constitution and Federalism:

Thank you for the opportunity to testify in favor of Senate Bill 129, relating to participation in the federal Public Assistance Reporting Information System.

The Public Assistance Reporting Information System (PARIS) is a computer data matching and information exchange system administered by the federal Administration for Children and Families (ACF) to provide states with a tool to improve program integrity in administering public and medical assistance programs. PARIS is designed to match state enrollment data from the Temporary Assistance to Needy Families (TANF) Program, the Supplemental Nutrition Assistance Program (SNAP), the Workers' Compensation Program, the Childcare Program, and Medicaid, with data from other participating states and from a selected group of Federal databases. PARIS matches help identify improper payments and minimize fraud and abuse.

PARIS has a couple of data matching functions. One is an "interstate" match that is basically used to determine whether someone is enrolled for various benefit programs in more than one state. It is mandatory for Wisconsin to participate in these matches. But there is also a veteran match process, which is currently optional. Wisconsin does not participate in the veterans match.

The Wisconsin Department of Health Services (DHS) under this bill is to enter into any necessary agreements with the federal Department of Health and Human Services and neighboring states to join and participate as an active member in the PARIS. DHS is to be required to identify any veterans, dependents of veterans, and survivors receiving benefits under the Medical Assistance program that are eligible for federal military-related health care benefits and encourage those individuals to apply for the federal benefits for which they are eligible.

This common sense bill will help cut down on fraud in veterans benefits. Other states have seen several million dollars in savings from using the PARIS veterans benefits match. It will save money in Wisconsin while ensuring those who deserve benefits receive them.

Thank you again for your time and consideration of SB 129. I hope you will join Senator Jacque and me in supporting this legislation.

State Capitol - P.O. Box 7882 Madison, WI 53707-7882

## Testimony before the Senate Committee on Licensing, Constitution and Federalism

## Senator André Jacque March 30, 2023

Colleagues on the Senate Committee on Licensing, Constitution and Federalism:

Many of America's veterans say they have little or no understanding of the benefits due them, despite efforts over recent years to match returning soldiers with the help and services they need. America's veterans are eligible for a range of benefits, from access to the Department of Veterans Affairs (VA) medical system to lifetime payments for disabilities suffered during military service, to access to education, life insurance and home loan programs, but VA data shows that participation varies widely by geography, and a veteran's understanding of what is available varies greatly by period of service.

Veterans who are in need of medical benefits often turn to state Medicaid programs for help, not realizing that they may qualify for more generous benefits from the US Department of Veterans Affairs.

A little over a decade ago, when State of Washington employees considered interactions with hundreds of veterans they were encountering every year, they launched a state partnership with the Washington State Department of Veterans Affairs to coordinate referrals. In response, the veterans have been receiving better benefits, and the cost is picked up by the Federal government rather than the state. Even better—while Medicaid must try to recover costs from client estates, which may require selling a family home—Federal veterans programs have no strings attached. Veterans earn their Federal benefit with their military service.

Since Washington became the first state to launch this initiative, more than 30 other states have established similar efforts. Credited with avoiding over \$100 million in state costs since it was started (and over \$40 Million just in the most recent recorded two year span), the program also enhances some veteran's benefits by lining up monthly cash payments and dependent benefits. The average savings per veteran per month is running close to \$400.

Senate Bill 129 is the core of the solution. It would join Wisconsin to the Public Assistance Reporting Information System (PARIS), a computer data matching and information exchange system administered by the Administration for Children and Families (ACF) to provide states with a tool to improve program integrity in administering public and medical assistance programs. PARIS is designed to match state enrollment data from the Temporary Assistance to Needy Families (TANF) Program, the Supplemental Nutrition Assistance Program (SNAP), the Workers' Compensation Program, the Childcare Program, and Medicaid, with data from other participating states and from a selected group of Federal

databases and was originally created to allow both state and federal programs the opportunity to compare public assistance files to assure no one was double dipping by drawing the same kind of benefits from different programs.

Using the client's Social Security number (SSN) as the unique identifier, the files submitted by the States are matched against:

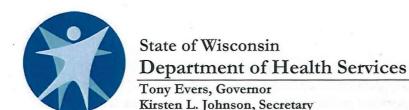
- The Interstate match, where SSNs of public assistance clients are submitted by participating PARIS states and matched with data from all other participating states to determine if participants are enrolled in two or more States.
- The VA match, which provides States with information on clients' eligibility for veterans' benefits and also allows States to confirm if their clients are receiving income and medical assistance payments from the Department of Veterans Affairs (VA).
- The Federal match, which matches State data with information from the Department of Defense (DoD) and the Office of Personnel Management (OPM) to determine if clients are receiving income from any of these sources or are eligible for Federal health care coverage.

State health department participation in PARIS is mandatory; the PARIS Veterans match is optional, however and can be used by states for multiple purposes. In Wisconsin, the Department of Health Services (DHS) (or the county income maintenance agencies that handle enrollment) <u>may</u> do some reviews to determine whether someone is eligible for federal veterans' benefits, but they don't use the PARIS match process for that purpose.

Wisconsin is leaving millions in Federal dollars on the table by not utilizing this program for veterans and their survivors. The data can also be used by state Medicaid programs to coordinate health benefits between Medicaid and the VA, thus saving the state's Medicaid expenditures and providing veterans with appropriate health coverage to which they are entitled. This coordination results in savings to state Medicaid programs because they would be shifting the cost of health care services for these individuals to the Federal government. There are multiple health care coverage programs for which a veteran may be eligible, but for which they have not applied.

Senate Bill 129 was developed on the advice of Brown County Veterans Service Officer Joe Aulik, and requires the Department of Health Services (DHS) to enter into any necessary agreements with the federal Department of Health and Human Services and neighboring states to join and participate as an active member in the Public Assistance Reporting Information System. The bill also requires DHS to identify any veterans, dependents of veterans, and survivors receiving benefits under the Medical Assistance program that are eligible for federal military-related health care benefits and encourage those individuals to apply for the federal benefits for which they are eligible.

Thank you for your consideration of Senate Bill 129. I'm happy to answer any questions committee members may have.



TO: Members of the Senate Licensing, Constitution & Federalism

FROM: HJ Waukau, Legislative Director

**DATE:** March 30, 2023

RE: SB 129 relating to: participation in the federal Public Assistance Reporting

Information System (PARIS).

The Department of Health Services (DHS) would like to submit written testimony for information only on Senate Bill 129 (SB 129), as drafted, requiring DHS to enter into any necessary agreements with the federal Department of Health and Human Services (HHS) and neighboring states to join and participate as an active member in PARIS.

The goal of assisting veterans with obtaining additional health care benefits is consistent with the DHS requirement to reduce Medicaid expenditures by billing other insurance coverage first. The PARIS Veterans Affairs Match File User's Manual includes a section titled, "Coordination of Benefits between Medicaid and the VA to Reduce State Medicaid Expenditures." It provides directions for how states could use the veteran's data in PARIS to identify veterans, their spouses and/or children who could be eligible for Department of Defense (DoD), or Veteran's Affairs (VA) health care benefits.

The DHS Office of Inspector General (OIG) already participates as an active member in PARIS. This activity is consistent with current state law at Wis. Stat(s). 49.197(5), 49.32(7)(b) and 49.845(1), and is already required under federal Medicaid law under s. 1903(r)(3) of the Social Security Act. PARIS Match data includes three components: Interstate Match Data, Veteran's Assistance (VA), and Federal Match. Both DHS and the Department of Children and Families (DCF) are active participants in addressing the Interstate component of the PARIS report. DHS OIG addresses Supplemental Nutrition Assistance and Program (SNAP) and Medicaid matches, while DCF addresses Temporary Assistance for Needy Families matches. Wisconsin does not currently participate in the VA Match or Federal Match.

DHS is committed to improving its program integrity efforts particularly with regards to veterans, which could be enhanced under SB 129 through verification with other veterans programs like TRICARE. However, even if the state were able to identify veterans eligible for health care benefits beyond its current capacity, it may be difficult to verify coverage and file claims with DoD due to both system and staff limitations. Due to a long-running data use disagreement between the Centers for Medicare & Medicaid Services (CMS), DoD, and the U.S. Department of Veterans Affairs (DVA), DHS at this time is unable to compare our records with DoD to file claims. This data issue limits DHS' ability to bill DoD for Medicaid members who are also enrolled in military-related health care benefits.

Matching all three components of the PARIS report would result in increased costs to DHS of \$1,050,000 (\$525,000 GPR) to create a new data interface. SB 129 does not provide additional funding for this effort. As a result, DHS does not project that any cost savings could be realized due to data discrepancies between state and federal systems. DHS has heard interest from counties about leveraging DoD data to assist veterans in our communities as well as other states and stakeholders. However, DHS is unable to identify cost savings in either the reduction of duplicative benefits, or cost savings to participants by reducing inappropriate payments under current systems capacities. Additionally, DHS has heard anecdotally that other states are also experiencing similar issues interfacing their state data systems with DoD data.

DHS is committed to working to improve the health, well-being, and access to services for Wisconsin's veterans across the continuum of services that DHS provides. We thank the Committee for the opportunity to provide written testimony for information only on SB 129 and we offer ourselves as a resource for Committee members for any follow up or additional information that may be needed.