



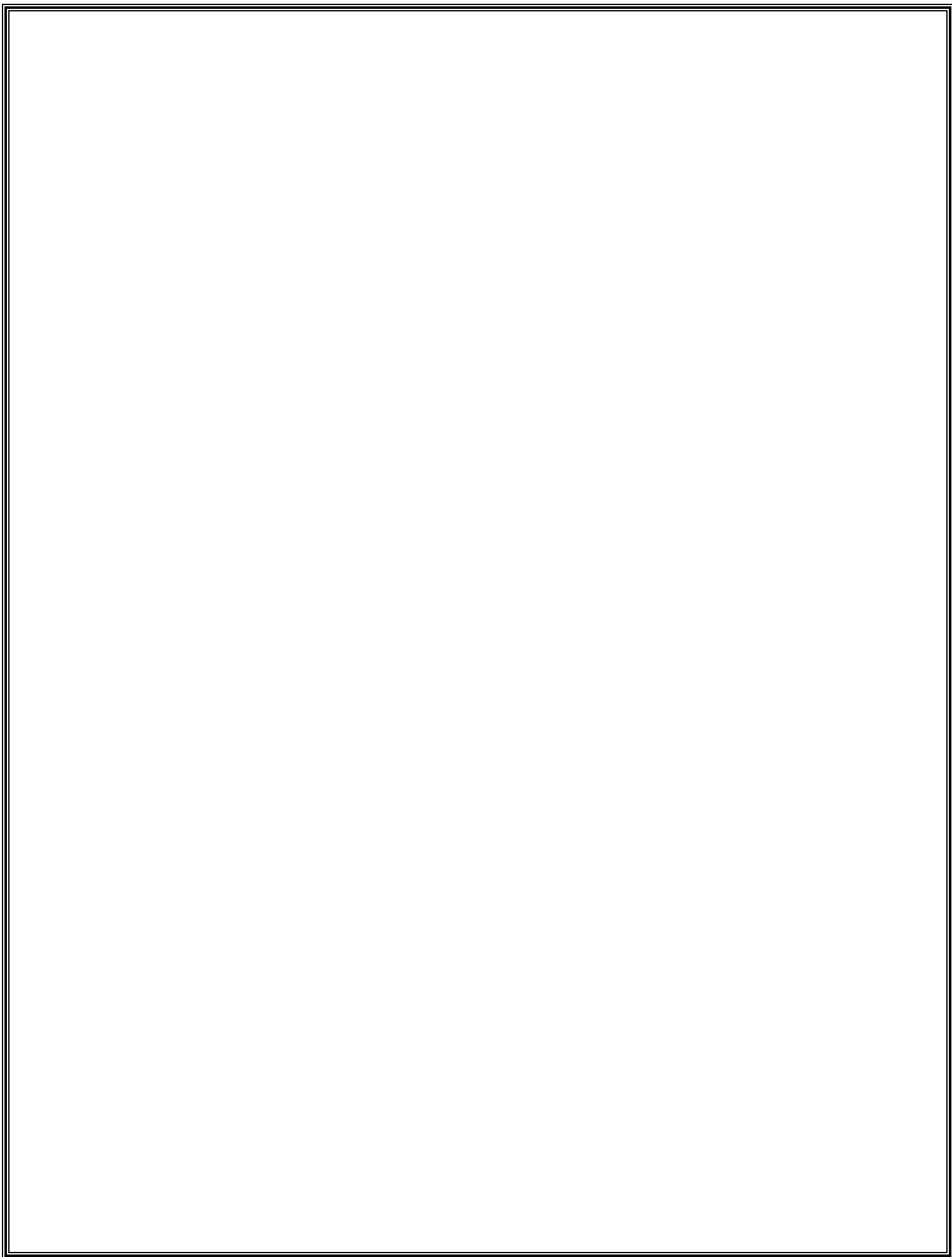
**Report to the Legislature**

**Offering Unemployment Insurance Applicants  
Assistance Obtaining Health Care Coverage for Their  
Households**

As Required by Engrossed Substitute House Bill 2687,  
An Act Relating to Fiscal Matters

November 2008

Department of Social & Health Services  
In Collaboration with the  
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# Highlights of Access to Health Care –Executive Summary

November 2008

## Why we did this study

Over the course of the last two legislative sessions, the state Legislature directed the Department of Social & Health Services to increase access and outreach about health care coverage for children in our state.

This one-time study was specifically mandated by Engrossed Substitute House Bill 2687 Section 209, Subsection (19).

The goal is to assist unemployment insurance applicants seeking health care coverage for members of their household.

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The complete report is available online at:

<http://www.dshs.wa.gov/Legrel/LR/index.shtm>

For more information, contact DSHS/Health and Recovery Services Administration at 360-725-1894.

or

The Unemployment Insurance Division 360-902-9303

## What we found

### Background:

The legislature has an ambitious and visionary goal: for all children in Washington State to have health insurance by 2010. One aspect was to have Department of Social & Health Services implement a proactive, targeted outreach and education effort to reach out to households with uninsured children.

The outreach plan identified several promising strategies, all with the goal of finding and enrolling eligible children in health insurance programs. One of the 13 strategies was to help families who had lost employment.

To implement that strategy, the Legislature put a budget proviso in Engrossed Substitute House Bill 2687 Section 209(19) (b) for the Department of Social and Health Services--Medical Assistance Program. They asked for an implementation plan, due November 2008, that would allow Unemployment Insurance applicants to request assistance obtaining health care coverage for household members, and allow the Department of Social and Health Services and Employment Security Department to exchange information to help ascertain eligibility for health care coverage.

The goal is to find cost effective ways to assist unemployment insurance applicants seeking health care coverage for members of their household.

### Findings:

Some methods are cost effective and easy to implement.

Other methods are very costly or they offer little value-added as they target the same populations that receive the same information through other sources.

We can do data sharing, but DSHS already has access to all the data that Employment Security gathers. Also, Employment Security Department does not ask the questions about dependents or households that are necessary to screen for or apply for health care coverage.

The state cannot use unemployment insurance funds for non-unemployment insurance purposes. Employment Security can use federal Wagner-Peyser funds or state Employment Services Administrative Account funds.



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## Introduction

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The legislature has an ambitious and visionary goal: for all children in Washington State to have health insurance by 2010. Over the course of the last two legislative sessions, the state Legislature directed the Department of Social & Health Services to increase access and outreach about health care coverage for children in our state.

An outreach plan published in late 2007 identified several promising strategies, all with the goal of finding and enrolling eligible children in health insurance programs. One of the 13 strategies was to help families who had lost employment.

This report was specifically mandated by Engrossed Substitute House Bill 2687 Section 209, Subsection (19).

The goal of this plan is to find cost effective ways to assist unemployment insurance applicants who are seeking health care coverage for members of their household. Employment Security can best accomplish this by getting pertinent information to their customers and referring them to the Department of Social and Health Services or others who can screen for health care coverage eligibility.

The study team was charged with identifying and costing out the ways that the goal could be met, and developed several objectives and criteria to meet the goal:

- Implement with minimal additional calls or impacts to UI TeleCenter agents.
- Make no changes in the weekly UI claim process until 2010 due to system limitations.
- Implement without requiring ESD staff to do eligibility screening or plan enrollment.
- Recover costs involved in programming and data sharing.

## Background

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In 2007, the Washington State Legislature enacted Second Substitute Senate Bill (2SSB) 5093, the Cover All Kids law. One aspect of that bill was for the Department of Social & Health Services to implement a proactive, targeted outreach and education effort to reach out to households with uninsured children, and to report back to the Legislature on their efforts.

In late 2007, the Department of Social & Health Services Health and Recovery Services Administration published that report to the Legislature “*Concerning Access to Health Care Services for Children*”. It described the outreach plan put in place by the Department of Social and Health Services and a Children’s Health Outreach Workgroup. The outreach plan consisted of identifying several promising strategies, all with the goal of identifying and enrolling eligible children in health insurance programs. Each strategy was to be evaluated to determine its success, and then enhanced or discontinued accordingly.

One of the 13 strategies was to help families who have lost employment. Naturally there is a connection to families of the unemployed worker through the Unemployment Insurance program. The workgroup recommended exploring whether unemployment insurance applicants should be asked during weekly certifications if they (and their children) have health insurance or would like assistance getting insurance.

To help implement that strategy, the Legislature put a budget proviso in ESHB 2687 for the Department of Social and Health Services--Medical Assistance Program. The proviso asked for an implementation plan that would allow unemployment insurance applicants to request assistance obtaining health care coverage for household members, and authorize the Department of Social and Health Services and Employment Security Department to exchange information to help more efficiently determine eligibility for the health care coverage that is currently available under Chapter 74.09 RCW (Medicaid, etc.). It also required the agencies to identify permissible uses of federal employment security funding and infrastructure, and to identify any statutory changes required to implement the plan. Finally, an outline of the costs of these actions and activities was requested. This was all to be reported back to the Governor and appropriate legislative committees in November 2008.

*Apple Health for Kids* is available for all children 18 or younger who are citizens and non-citizens. The program is a new state initiative aimed at streamlining applications for children’s medical coverage. Up to 75,000 Washington children are still uninsured. Many families are eligible but just don’t know it. The program is free for children in families below 200 percent of the Federal Poverty level (\$42,400 for a family of four) and is based on the household actual income. Families above that level may be eligible for the same coverage at low cost: \$15 per child. The premiums max out at three children so the most these families would pay in premiums would be \$45 a month.

The unemployment-insurance system is funded by employers’ tax dollars. Taxes employers send to the Internal Revenue Service fund the administration of the unemployment insurance and employment services programs across the nation. There are limitations on the use of these federal dollars.



## Part I

# Plan for Applicants and Recipients of Unemployment Insurance to Request Assistance with Obtaining Health Coverage for Household members

### Purpose of this Plan

Outreaching with unemployment applicants has tremendous value. Unemployment changes may push families into state assistance who have never needed it before. This outreach is an avenue whereby families are informed that there is an affordable option for their children, especially if they no longer have dependent coverage for their kids due to job loss or cuts in employer-coverage plans.

### Possible Processes to Request Assistance with Obtaining Health Coverage for Household Members

- A: Recorded Message during phone “hold”
- B: Link to *Apple Health for Kids* website
- C: Incorporate into Module 1 Sessions
- D: Post flyers in all WorkSource locations
- E: Offer information to WorkFirst clients
- F: Hire staff to provide relevant services
- G: Provide information in UI Claims Kit
- H: Include health care information with direct deposit and debit card usage
- I: Provide information when sending the UI Benefits Monetary Eligibility Document
- J: Asking each claimant relevant questions during initial and weekly claims process



## ***Apple Health for Kids - Possible Process (A)*** **Recorded Message During Phone “Hold”**

### Brief Summary of Idea

Employment Security Department (ESD) would provide a recorded message about *Apple Health for Kids* to claimants when they are calling the TeleCenter to file their unemployment claim. Claimants would receive the message while they are waiting on hold for an agent to complete their unemployment claim. The message would be in addition to existing messages that play during the wait time on hold.

### Background

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed.

ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact Apple Health For Kids for information and enroll their children for medical coverage.

The TeleCenters' phone system provides pre-recorded messages to callers while they are waiting on hold to speak to a claims agent. Current technology allows three messages at 30 seconds each. Messages can be changed but must not exceed the maximum number or duration. The three current messages provide information on call wait times, how to use the website for unemployment insurance claim business, and TeleCenter hours of operation. All are needed in response to the high volume of calls being received. All three messages are at the maximum 30 second length. Therefore, the system is currently operating at full capacity for both quantity and length.

### Affect on ESD, other agencies, customers, stakeholders, etc.

Major costs and staff impacts could occur with this proposal, but with minimal estimated effectiveness.

#### Positive Impacts

- The message would play during calls from an estimated 1 million unemployment insurance callers.

#### Negative Impacts

- The message would be regularly repeated to many hundreds of thousands who do not need or do not qualify for health care services for household dependents. (Each claimant calls three times on average.)
- Adding another message would require a very costly system upgrade to handle the extra capacity.
- Recording different messages to combine elements of all three existing messages (in order to have room for a new message about *Apple Health for Kids* is not an option as it would increase the length of messages beyond the 30 second limit.
- A pre-recorded message may impact and increase the number of questions that TeleCenter agents receive about *Apple Health for Kids* that they are not prepared or educated to answer. This would increase call length and wait times for other customers.

Recommendation(s)

Do not implement this idea due to cost and staff impacts.

Next Steps/Actions Needed

None.

## ***Apple Health for Kids - Possible Process (B)*** ***Link to Apple Health for Kids Website***

### **Brief Summary of Idea**

Employment Security Department (ESD) would provide a link to the DSHS *Apple Health for Kids* website to inform unemployment claimants about potential medical coverage for children in uninsured households that meet the income eligibility requirements.

### **Background**

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed.

ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact *Apple Health for Kids* for information and enroll their children for medical coverage.

During the summer of 2008, DSHS set up a website for *Apple Health for Kids*. It contains eligibility information, frequently asked questions and answers, application and renewal forms, links to other health programs, a media center and contact information.

### **Affect on ESD, other agencies, customers, stakeholders, etc.**

Impacts to link to an existing website would be very minimal and would reach any unemployment insurance claimant who uses the Go2UI.com website.

#### **Positive Impacts**

- Employment Security served approximately 120,000 claimants through the web in calendar year 2007.
- Internet use has minimal impact to staff, yet provides quality UI service delivery.
- WorkSource and TeleCenter staff would not need to answer program specific or individual eligibility questions related to the program. Information would be supplied by an *Apple Health for Kids* website.

#### **Negative Impacts**

- None.

### **Recommendation(s)**

Incorporate information and links on the Employment Security website.

### **Next Steps/Actions Needed**

Next steps if this recommendation is accepted:

- Notify all staff about the project and new website.
- Determine where link is to be located.

## **Additional Resources**

Marketing materials such as posters are already printed and could also be made available. Customers who do not have access to the internet can call 877-543-7669 for pre-screening and to request an application.

## ***Apple Health for Kids* - Possible Process (C) Incorporate into Module 1 Sessions**

### **Brief Summary of Idea**

Employment Security Department (ESD) would incorporate information about *Apple Health for Kids* into the Unemployment Insurance (UI) Worker Profiling Module 1 to inform claimants about potential medical coverage for children in uninsured households that meet the income eligibility requirements.

### **Background**

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed.

ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact *Apple Health for Kids* for information and enroll their children for needed medical coverage.

New UI claimants are scheduled for an in-person workshop at their local WorkSource Center – the UI Worker Profiling Module 1. Those deemed most in need of reemployment services are scheduled for Module 1. Enrollment rate varies by location and by staff levels. Not all claimants are selected for Module 1 – we do not call in union members, employer-attached workers, victims of domestic violence, or individuals in approved training.

Module 1 contains specific information for UI claimants. It also includes information about community resources, training or retraining, and job search resources. Information is provided using a variety of approaches. PowerPoint is the most common approach used to disseminate the information. About 72,000 claimants participated in Module 1 last year.

### **Affect on ESD, other agencies, customers, stakeholders, etc.**

Using Module 1, information about *Apple Health for Kids* could reach intended audiences at a relatively low cost.

#### **Positive impacts**

- Information on health care services would reach over 72,000 claimants each year through the UI Worker Profiling Module 1.
- Cost impacts of this idea are difficult to calculate because presentation styles, workshop duration, and additional materials vary from location to location. However, costs would be minimal, estimated at about \$20,000 to implement and \$4,000 per year in staffing costs, with \$12,000 per year in materials.
- This could be a good fit for the module. Information provided during the module includes an orientation to services available and community resources.
- Information could be displayed in the orientation room, in some ways reducing the need to modify any materials or change presentation styles.

### Negative impacts

- Incorporating new information might need customized presentation materials in each Module 1 site.
- The unemployment rate is increasing while resources are decreasing. This may impact the number of individuals scheduled for Module 1 and therefore the individuals exposed to health care information.
- Attendees are generally overwhelmed already with the amount and variety of information being provided during Module 1.
- Staff will not be able to answer program specific or individual specific questions about **Apple Health for Kids**, resulting in potential customer dissatisfaction or inability to follow through.
- Module 1 is currently part of a service delivery redesign which could reduce the number of claimants who attend and when/how the information is made available.

### Recommendation(s)

Incorporate information into Module 1.

Note: WorkSource also conducted about 57,000 Job Search Review interviews last year. Almost all claimants who received a Job Search Review interview had already participated in Module 1. The claimants who are excused from Module 1 are also excused from Job Search Review. It would be redundant to provide information in Module 1 and then the same information again in the Job Search Review. For that reason we are recommending information about **Apple Health for Kids** be incorporated only into the UI Worker Profiling Module 1.

### Next Steps/Actions Needed

- Involve WorkSource partners in discussions.
- Have sites identify actions on how they might incorporate information into their workshops.
- Next step if this recommendation is accepted: notify and brief each site about the project.
- Reevaluate once the service delivery redesign of Module 1 is completed.

### Additional Resources

Other outreach materials are already created and could be used with the Module 1 presentation.

The website for DSHS' **Apple Health for Kids** program is available at [www.applehealth.com](http://www.applehealth.com).

Customers who do not have access to the internet can call 877-543-7669 for pre-screening and to request an application.



## ***Apple Health for Kids - Possible Process (D)*** **Post Flyers in All WorkSource Locations**

### **Brief Summary of Idea**

Employment Security Department (ESD) would display posters in WorkSource offices and WorkSource affiliate locations to inform customers about potential medical coverage for children in uninsured households that meet the income eligibility requirements.

### **Background**

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed.

ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact *Apple Health for Kids* for information and enroll their children for needed medical coverage.

DSHS has retained the services of the marketing firm PRR to work in partnership with the Children's Health Outreach Workgroup to market *Apple Health for Kids*. The marketing campaign is applicable to all audiences and when appropriate customized to address unique regional or community circumstances. Local outreach contractors can use materials developed by PRR and do not need to develop their own.

ESD currently informs individuals who apply for unemployment insurance of the availability of the Basic Health Care plan.

In 2007 WorkSource offices helped almost 260,000 customers. These services include unemployment insurance customers and others who received some kind of direct personal service. (There is no method to quantify how many other customers came to the WorkSource office only to use the resource room.)

### **Affect on ESD, other agencies, customers, stakeholders, etc.**

Posting information about *Apple Health for Kids* could reach intended audiences at a relatively low cost.

#### *Positive Impacts*

- Information on health care services would reach well over 260,000 individuals each year through the information posted in WorkSource offices.
- Because WorkSource offices share locations with other partners, displaying the poster would share information with the customers of WorkSource partners too.
- Customers who come to WorkSource may be interested or eligible for health coverage but not receiving unemployment insurance benefits, so a wider audience would be exposed to the program information about health services for their children.
- A poster is informative and offers message consistency.
- Staff will be made aware of additional resources to assist families in need.
- Impacts of displaying posters to share information about *Apple Health for Kids* would be minimal. Costs would be a minute or so of staff time to determine location(s) for the posters and then to

receive and affix the poster in the designated location. Costs for three posters in two languages in all 44 offices, including itinerants, intermittent, and college collocation sites, are estimated at \$40.

### Negative Impacts

- ESD provides services and information to customers in English and Spanish. Posters would need to be developed in both languages and displayed together. The need to affix two posters could impact space availability.
- Most WorkSource offices share locations with other partners. Each location has standards regarding the posting of information. Space availability and the duration an item can be posted can be an issue in shared space.
- Posting information may increase the number of questions our ESD staff and co-located partner staff receive about *Apple Health for Kids* that they are not prepared or educated to answer.

### Recommendation(s)

Participate in the marketing program created by DSHS and PRR by displaying posters where location and space permits in all WorkSource and Affiliate offices.

### Next Steps/Actions Needed

If this recommendation is accepted, we would need to:

- Notify and brief each site about the project
- Determine WorkSource and affiliate needs and standards for displaying the poster
- Distribute posters to all sites that will display the poster.

### Additional Resources

Other outreach materials are already created and could be made available in WorkSource offices as well.

The website for DSHS' *Apple Health for Kids* program is available at [www.applehealth.com](http://www.applehealth.com).

Customers who do not have access to the internet can call 877-543-7669 for pre-screening and to request an application.

## *Apple Health for Kids - Possible Process (E)* **Offer Information to WorkFirst Clients**

### **Brief Summary of Idea**

Employment Security Department (ESD) would provide information about *Apple Health for Kids* to WorkFirst clients. WorkFirst is Washington State's welfare reform program that helps financially struggling families find jobs, keep their jobs, get better jobs and build a better life for their children.

### **Background**

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed.

ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact Apple Health For Kids for information and enroll their children for needed medical coverage.

As of January 2007, almost 53,000 families were in the WorkFirst Program at WorkSource offices across the state. These families also received financial and medical support services, including Medicaid, through DSHS by participating in TANF – Temporary Assistance to Needy Families. Medicaid provides medical coverage for WorkFirst families, disabled adults and seniors, and children in low-income families.

### **Affect on ESD, other agencies, customers, stakeholders, etc.**

This customer group would meet the income criteria for health care assistance, but already have health care coverage for their household dependents through existing programs.

#### Positive impacts

- None.

#### Negative impacts

- Providing health care information to WorkFirst clients is unnecessary because they have household health care services similar to Apple Health due to their participation in TANF through DSHS.
- Many clients qualify for Medicaid and WorkFirst because they do not qualify for Unemployment Insurance (UI) benefits. So they have not applied for nor are they receiving UI services.
- WorkSource and TeleCenter staff will not be able to answer program specific or individual health care eligibility questions related to the program, resulting in potential customer dissatisfaction or possible inability to follow through.

### **Recommendation(s)**

Do not implement this idea as it is unnecessary.

**Next Steps/Actions Needed**

None.

## ***Apple Health for Kids* - Possible Process (F) Hire Staff to Provide Relevant Services**

### **Brief Summary of Idea**

Employment Security Department (ESD) would hire full-time staff members to work in WorkSource and/or Community Service Offices across Washington. Their responsibilities would include giving out information about *Apple Health for Kids* and other health care services, and enrolling families in health care programs.

### **Background**

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed.

ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact *Apple Health for Kids* for information and enroll their children for needed medical coverage.

Individuals who are receiving unemployment benefits regularly visit WorkSource and sometimes visit Community Service Offices for reemployment and income support services. Staff is available during business hours Monday through Friday.

Currently, individuals conduct their unemployment insurance business by telephone or on the internet. In keeping with federal requirements, that exchange is restricted to questions regarding eligibility for unemployment benefits, and does not address household demographics or eligibility for health care coverage.

Unemployment Insurance (UI) administrative funds can only be used for the proper and efficient administration of the UI grant, consistent with the Social Security Act. Other employment security services and any other non-UI benefiting activity are not allowed as a UI expense.

### **Affect on ESD, other agencies, customers, stakeholders, etc.**

This proposal is the most costly option but offers the most guaranteed personalized service.

#### *Positive impacts*

- Providing staff-assisted information and enrollment services at 30 locations across the state gives individuals and families access to health care coverage and support in arranging for appropriate services.
- Information exchange would be relatively seamless because agency staff would be using the data.

#### *Negative impacts*

- The cost to fund 30 staff members in communities served by a WorkSource or a Community Service Office is estimated to be about \$2.4 million per year once the staffing is in place, with \$18,000 for implementation in the first fiscal year. The estimated ongoing cost for staffing in the first year would be just under \$2 million because staff would not start work until October 2009 but would have

workstation setup costs.

- The use of federal unemployment insurance funding/infrastructure would not be allowable for these costs.

### **Recommendation(s)**

Do not implement this idea due to the cost.

### **Next Steps/Actions Needed**

If this proposal is explored further:

- A funding source for these staff would need to be identified by DSHS and ESD.
- An exception to Governor Gregoire's hiring freeze for state workers would need to be requested and granted in order to proceed with this process.

### **Additional Resources**

For information about the UI Administrative Account: <http://www.ofm.wa.gov/fund/100/fund119.htm>

## ***Apple Health for Kids* - Possible Process (G) Provide Information in UI Claims Kit**

### **Brief Summary of Idea**

Employment Security Department (ESD) would include information about *Apple Health for Kids* in the Unemployment Claims Kit. This will provide claimants with information about potential medical coverage for children in uninsured households that meet income eligibility requirements.

### **Background**

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed.

ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact *Apple Health for Kids* for information and enroll their children for needed medical coverage.

ESD mails an Unemployment Claims Kit to every individual who has applied for unemployment benefits. This 48-page booklet contains all the information and requirements a person needs know to claim UI benefits and find new work. It also includes information about training opportunities, community resources, and special programs, as well as definitions. The Claims Kit will next be revised mid-2009.

ESD currently informs individuals who apply for unemployment insurance of the availability of the Basic Health Care plan in the Unemployment Claims Kit.

### **Affect on ESD, other agencies, customers, stakeholders, etc.**

Printing information about *Apple Health for Kids* in the Unemployment Claims Kit could reach intended audiences at a relatively low cost.

#### Positive Impacts

- Information on health care services would reach well over 200,000 individuals each year who receive the Unemployment Claims Kit.
- Printed material is informative and offers message consistency.
- Impacts of including information about *Apple Health for Kids* in the Claims Kit would be minimal. Costs would be a week of staff time to write the information and incorporate it into the booklet. It is assumed that incorporating a paragraph or two into the Claims Kit will not increase its cost for publication or mailing.

### Negative Impacts

- The Unemployment Claims Kit is so full of information that many claimants just don't read it.
- The Claims Kit is delivered during the first week of unemployment, so this information would not be offered many weeks later when circumstances may have changed to make the claimant's household eligible for health coverage.
- ESD provides written information to customers in English and Spanish. Claimants using other languages may experience limited access to this written information; however, they can call the TeleCenter for interpretation of the Claims Kit.
- Including this information may increase the number of calls with questions about ***Apple Health for Kids*** to TeleCenter agents that they are not prepared or educated to answer.

### Recommendation(s)

Include written information about ***Apple Health for Kids*** in the Unemployment Claims Kit.

### Next Steps/Actions Needed

If this recommendation is accepted, we would need to:

- Draft and finalize written information about ***Apple Health for Kids***.
- Notify and brief staff about the new information.
- Begin to print and distribute new Unemployment Claims Kits.

### Additional Resources

Other outreach materials are already created and could be made available as well in WorkSource offices.

The website for DSHS' ***Apple Health for Kids*** program is available at [www.applehealth.com](http://www.applehealth.com).

Customers who do not have access to the internet can call 877-543-7669 for pre-screening and to request an application.



## ***Apple Health For Kids - Possible Process (H)*** **Include Information with Direct Deposit and Debit Card Usage**

### **Brief Summary of Idea**

**Direct Deposit:** Employment Security Department (ESD) would provide an informational flyer about Apple Health For Kids to unemployment insurance (UI) claimants when they sign up for Direct Deposit.  
**Debit cards:** ESD recently evaluated the feasibility of using cash debit cards to eliminate paper checks. Current agency challenges and competing priorities impact the allocation of resources needed to successfully implement a quality debit card program. The decision was made to postpone a debit card project until these challenges are resolved. Therefore, we are not considering the use of debit cards in the foreseeable future, so we couldn't offer Apple Health information during debit card transactions.

### **Background**

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed. ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact *Apple Health for Kids* for information and enroll their children for needed medical coverage.

The Department offers direct deposit to allow benefits to be electronically deposited in a claimant's bank account. This eliminates the need to print and mail a check each week. Direct deposit has reduced costs for the department and provided another means for claimants to receive their benefits. When a claimant applies online for a new claim, they are offered the option of direct deposit. If they are already claiming benefits, or need to re-open a previous claim, the option is offered online. A notice is sent to the claimant by mail or by e-mail confirming their direct deposit request.

### **Affect on ESD, other agencies, customers, stakeholders, etc.**

#### Positive Impacts

- Claimants who apply for direct deposit would receive information about health coverage.

#### Negative Impacts

- The intent of direct deposit is to reduce paper usage and mailing costs by eliminating paper checks. Adding a requirement to send written information would negate some savings.
- The message would be routinely repeated to many thousands of individuals who do not need health care services for household dependents or do not qualify for such services.
- The message would only reach about 46 percent of claimants as the other 54 percent have not elected to receive their benefits by direct deposit.
- Giving out this information may impact and increase the number of questions that TeleCenter agents receive about *Apple Health for Kids* that they are not prepared or educated to answer.

**Recommendation(s)**

Do not implement this idea.

**Next Steps/Actions Needed**

None.

## *Apple Health For Kids - Possible Process (I)* **Provide Information When Sending the UI Benefits Monetary Eligibility Document**

### **Brief Summary of Idea**

Employment Security Department would add written information about Apple Health For Kids on the Unemployment Insurance Monetary Determination document. This will inform claimants about potential medical coverage for children in uninsured households that meet the income eligibility requirements.

### **Background**

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed.

ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact *Apple Health for Kids* for information and enroll their children for needed medical coverage.

When unemployed workers apply for UI benefits, whether by telephone, the Internet, or in writing, the first correspondence they receive in the mail is called a Monetary Determination which tells them how much they will receive in benefits. This document details the individual's work and earnings, and the dollar amounts of weekly and total UI benefits. It offers appeal rights and other important information about the UI claim. Every claimant receives at least one Monetary Determination. If there are wages and hours from federal civilian or military service, or from work performed out of state, then more than one Monetary is sent out. An estimated 500,000 Monetary Determinations are mailed each year.

There is no room left on the Monetary Determination, it is completely filled with required UI information. To add anything, the Monetary Determination would have to be reformatted to a two-page document.

Unemployment Insurance (UI) administrative funds can only be used for the proper and efficient administration of the UI grant, consistent with the Social Security Act. Non-UI benefiting activities such as including non-UI information on the Monetary Determination are not allowed as a UI expense, and would have to be funded by non-UI resources.

### **Affect on ESD, other agencies, customers, stakeholders, etc.**

The costs are high to change the Monetary Determination to print health care information, but it provides information to claimants early in the unemployment process.

### Positive Impacts

- Individuals would receive the information fairly early after becoming unemployed.
- The information would be imparted without staff intervention.

### Negative Impacts

- The cost of changing the Monetary Determination to make it capable of printing health care information would outweigh the benefits of providing that information in that format. Changes would include automation redesign and programming, staff time to create the written changes, and ongoing increased production and mailing costs. Estimated costs are \$150,000 for implementation (programming, staffing); \$225,000 yearly increased cost for ongoing production (materials, postage).
- The Monetary Determination is already a complex document that would be further complicated by adding this non-UI related information.
- Individuals do not read the existing document completely. We are uncertain they would read additional information on the document.
- A subset of individuals who receive multiple Monetary Determinations would receive repeated information about health care coverage for household children.
- At least 25 percent of claimants who do not have household dependents would be receiving this information, sometimes multiple times.
- If the cost of the Monetary Determination increases due to adding information, the increased costs must be paid for by non-UI funds.

### Recommendation(s)

Do not use the Monetary Determination to provide information about *Apple Health for Kids*.

### Next Steps/Actions Needed

If this proposal is explored further:

- Notify and brief each Information Technology Services and Unemployment Insurance Divisions.
- Identify how they will incorporate information into the Monetary Determination.
- Identify a funding source.
- Request and obtain an exception to Governor Gregoire's hiring freeze for state workers.

**Additional Resources**

For information about the UI Administrative Account: <http://www.ofm.wa.gov/fund/100/fund119.htm>



## ***Apple Health For Kids - Possible Process (J)*** **Asking Each Claimant Relevant Questions During Initial and Weekly Claims Process**

### **Brief Summary of Idea**

Employment Security Department would provide an additional question or series of questions about *Apple Health for Kids* to unemployment claimants filing their initial, reopened, and weekly claims. If an affirmative response was received during the filing process, then a phone number or an Internet web address would direct claimants to the DSHS *Apple Health for Kids* website for information about potential medical coverage for children in uninsured households that meet the income eligibility requirements.

### **Background**

The Washington State Department of Social and Health Services (DSHS) sees an opportunity to reach uninsured children in households where parents or guardians have recently become unemployed.

ESD sees value in sharing information with claimants and customers that will allow potentially eligible families to contact *Apple Health for Kids* for information and enroll their children for medical coverage.

The Unemployment Insurance program uses four automated systems to complete its business with an unemployed applicant. Initial and reopened claims use an Interactive Voice Response System (IVRS), a General UI Development Effort (GUIDE) system, an automated staff assistant called Unemployment Claims Graphical User Interface (UC GUI), and then internet claims are also received (Web IC). Paper forms for initial claims are also used by some claimants. Weekly claims are made on the internet (Web CC), by telephone (IVRS), or using paper forms. When a change is made, all systems must be modified.

During 2007, over 400,000 individuals opened or reopened an unemployment claim. Those claimants submitted claims for more than 2.5 million weeks. These counts will be significantly higher for 2008. Household information and details about other income are data that are not needed for unemployment insurance purposes, and not currently obtained from claimants.

### **Affect on ESD, other agencies, customers, stakeholders, etc.**

Asking an additional question or questions would have significant cost impacts to UI systems and staffing and may provide unnecessary complexity to the program.

#### *Positive impacts*

- Employment Security could guarantee that 100 percent of UI claimants were offered information about *Apple Health for Kids*.
- Information exchange would be simple because it would occur directly between the claimant and various agency automation systems.

### Negative impacts

- To add an additional question to the system would require extensive programming modifications to the IVRS, GUIDE, and Web IC to present the new question(s) and process additional information. These changes are estimated to cost almost \$270,000 with 2.37 FTEs.
- The UC GUI application will need to be modified to receive and process the new information from IVRS to present to the intake agent.
- The IVR system is nearly at capacity. It can ask claimants up to 40 questions as they file an initial claim. There is only one vacant question in that 40-question array. More than one additional question would be necessary: one to ask if there are household dependents, another to determine the need for health care coverage for those dependents. A third question might be needed if ESD systems must screen for income eligibility.
- The automated imaging system used to scan and store UI documents would need modification at an estimated cost of \$5,000.
- Adding questions or verbiage to the IVRS would increase call times. Longer calls means increased toll-free phone charges and longer wait times for others in the phone queues. If calls increase an average of one minute, phone charges and staff time (0.02 FTE) are estimated to be about \$140,000 per year.
- Queries about household dependents and health care may increase the number of questions that TeleCenter agents receive about *Apple Health for Kids* that they are not prepared or educated to answer. This would also increase call length and wait times for other customers.
- Use of federal unemployment insurance funding/infrastructure would not be allowed for the costs.

### Recommendation(s)

Do not implement this option due to costs.

### Next Steps/Actions Needed

None.

### Additional Resources

For information about the UI Administrative Account: <http://www.ofm.wa.gov/fund/100/fund119.htm>  
See other Possible Process idea papers for less costly options.



**Summary**

A data sharing agreement is needed by Employment Security Department (ESD) in order to share data with the Department of Social and Health Services (DSHS). This requirement applies to all situations where ESD is asked to share confidential data provided by individuals who have filed for Unemployment Insurance (UI). DSHS intends to use the data to determine if individuals are eligible for health coverage.

**Federal and State Requirements**

Federal and State laws require that we have data sharing agreements in place before sharing UI data:

- Federal rules require an individual's permission to re-disclose their personal information [20 CFR 603.5(d)].
- RCW 50.13.060 establishes the guidelines for sharing UI data with other governmental entities. In summary, ESD shares data for verification, identification or comparison purposes; ensuring compliance with registration and licensing; criminal investigation; and statistical analysis, research, and evaluation studies. ESD will share data with DSHS if the provisions of RCW 50.13.060 are met.
- WorkSource partners are allowed to receive UI data by state law, but each individual has the right to opt out of having his or her data shared. While data sharing to determine eligibility for health coverage is not covered under the current opt-out process allowed in RCW 50.13.060(11), we would recommend using an opt-out process similar to RCW 50.13.060(11), that clearly states what DSHS intends to do with the information.
- With an individual's personal consent, ESD can authorize re-disclosure in accordance to RCW 50.13.100 and 20 CFR 603.5(d). If the provisions are met, sharing personal information requires informing the individual and getting consent to share the information.

The ability to share data is ultimately based on the intended use of the data. In this case, the data would be shared to help determine eligibility for health coverage.

**Data Limitations**

Some of the information that DSHS needs to assess eligibility for health coverage is not currently available from ESD. Household information (details about family members and other household income) is not needed for unemployment insurance purposes, and that data is not currently obtained from claimants.

## **Cost Reimbursement Requirements**

Under the provisions of 20 CFR 603.8 cost reimbursement to ESD is required when there is no reciprocal cost agreement or arrangement in place. There is an exception if the data sharing involves an incidental amount of staff and no more than nominal processing costs in making the disclosure. In that light, ESD would need to recover costs if disclosure necessitates changes to ESD automated systems and/or if a significant amount of staff time is involved.

## **Findings**

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The following findings support the recommendations proposed in this report.

1. Finding the pool of uninsured kids out of the pool of UI recipients has multiple challenges.
2. Providing intensive outreach to UI applicants may not target populations who have not already been targeted elsewhere or who are not already covered. Such an effort may not find those most in need of information.
3. DSHS already has access to all information that ESD collects. This is possible due to existing data sharing agreements. Any collection of additional data by ESD will have costs that are not reimbursed by ESD funding sources.
4. Data sharing is restricted and costly.
5. Federal and State laws require we have data sharing agreements in place before collecting or sharing UI data. The Federal law also requires that the cost of sharing UI data must be paid by the entity that is using the data, unless we can establish that there are reciprocal benefits for collecting or sharing information on UI applicants.
6. Cost requirements apply to all situations where ESD is asked to share confidential data provided by individuals for UI administration. It also applies to any information required to be collected from UI applicants to be used for non-UI purposes.
7. Data sharing is limited to those who agree to share their data.
8. Comprehensive data sharing has informed consent requirements.
9. Sharing data for this purpose will require that each individual give permission to re-disclose their personal information. Seeking that permission must include explaining clearly what DSHS intends to do with their data. This will be cost intensive.
10. Tracking will be expensive.
11. It is not certain what kind of tracking would be expected, but it is certain that any method to track effectiveness or uptake rate would be relatively expensive to implement, whether by a manual counting process or by electronic means.

## Part III

# Permissible Uses of Federal Employment Security Funding

### Background

The state Unemployment Insurance and Employment Service programs are two separate and distinct programs designed to serve specific functions. The federal funds appropriated to these programs cannot be used to fund any other activities. In addition, though the federal unemployment tax (FUTA) funds both programs, funding for one program cannot be transferred to the other.

### Unemployment Insurance

Title III federal funds awarded for the administration of the state unemployment insurance (UI) program, including the Emergency Unemployment Compensation (EUC) and Extended Benefits (EB) programs, must fund activities that are necessary for the proper and efficient administration of the state UI program. Expenditures for non-UI activities or infrastructure cannot be assigned to the UI program without risk of audit exceptions.

### Employment Service

Federal funds awarded for the administration of the state Employment Service (ES) program under the Wagner-Peyser Act may only be used to administer the ES program. The program offers services such as job development, resume writing, interviewing workshops, and job placement activities. Other reemployment services are funded by separate sources, such as state funds (for the Claimant Placement Program). Expenditures for non-ES activities cannot be assigned to the federal Wagner-Peyser grant without risk of audit exceptions.

State funds may be used with more flexibility than federal funds. State funds can be spent on a number of programs, such as the Claimant Placement Program

### Supporting Documentation

General Administration Letter (GAL) 4-91, dated 3/22/91, sets the stage for a discussion about who must pay for UI tax collection activities, but it is instructive for this report:

*“Section 302(a) of the Social Security Act (SSA) provides that the Secretary of Labor shall certify to the Secretary of Treasury, for payment to each State which has an unemployment compensation law approved by the Secretary under the Federal Unemployment Tax Act (FUTA), such amounts as the Secretary determines to be necessary for the proper and efficient administration of such State law. These payments are sometimes referred to as Title III grants. Section 5(b) of the Wagner-Peyser Act provides that the Secretary of Labor shall certify to the Secretary of the Treasury, for payment to each State meeting certain conditions, such amounts as the Secretary determines to be necessary for allotment (consistent with the limitations in the Wagner-Peyser Act) in accordance with the formula set out in Section 6 of that Act. These payments are commonly called Wagner-Peyser or ES grants. These provisions of the Federal laws establish UI and ES as two separate grant programs. Therefore, in accordance with OMB Circular A-87, Title III grants may be used solely for administration of the approved State UI law and Wagner-Peyser grants may be used solely for administration of the ES program under an approved State plan.”*

Since these programs are separate funding streams for separate purposes, as soon as an activity crosses over the threshold from one required to administer the state's UI law (like collecting taxes and paying benefits), into the realm of providing other services, that activity cannot be funded from the UI program. This prohibition extends to the Emergency Unemployment Compensation program since it is awarded as a UI supplemental grant.

Likewise, as soon as an activity crosses over the threshold from one required to administer the state's labor exchange (like job development, resume writing or interviewing workshops, job placement activities, or other reemployment services), into the realm of providing other services such as registration for health care coverage, that activity cannot be funded from the ES program.

The determining factor for a valid UI expenditure is not whether a UI claimant is being served. Rather, only those costs that are necessary for the proper and efficient administration of the state UI law are assignable to the UI Grant. The same applies to valid ES expenditures as provided in the Wagner-Peyser State Plan. The function that is being performed drives the assignment of the cost to the proper program.

## Conclusions

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1. There are ways to get information to unemployment insurance customers.
2. ESD can refer potentially eligible customers to DSHS or others who can screen.
3. No calls to TeleCenter agents
4. Employment and Career Development Division's services draw customers into an office location.
5. No change in weekly claim process until 2010.
6. Recover costs involved in programming and data sharing.

## Key Recommendations

Recommendations
<b>1) <u>Apple Health for Kids Literature and message</u> –</b>
a) <u>WorkSource</u> – Involve WorkSource Partners in the discussion.
b) <u>WorkSource</u> – Have sites identify actions on how they might incorporate information into their workshops. ESD and partners to participate in marketing created by DSHS and PRR.
c) <u>WorkSource</u> – If accepted, notify and brief each site about the project. Determine needs and standards for displaying Apple Health Material.
d) <u>WorkSource</u> – Incorporate Apple Health information into Module 1.
e) <u>WorkSource</u> – DSHS will deliver, to ESD, materials for a wide dissemination of information to increase general public awareness about the <b>Apple Health for Kids</b> programs. Marketing strategies include posters, flyers, rack cards, and brochures in each WorkSource. Materials are in supported languages. Increased public awareness drives referrals from friends and relatives.
f) <u>Scripts</u> – Develop Scripts for Orientation Classes that Re-employment Specialist can refer to about the program.
g) <u>Training</u> – DSHS to develop training for Re-employment Specialists that will orient ESD staff and Partners about the program.
h) <u>Current Contractors and Community Outreach Staff</u> – DSHS to encourage contractors to utilize WorkSource as part of their outreach efforts. Contractors and Outreach workers, upon approval, can deliver a brief message about the program during various workshops.
<b>2) <u>Data Share Agreement</u> –</b> Currently exist. DSHS to develop a contract with ESD and extend current statement of work. The purpose of the data is the possibility of cross-matching ESD data to identify families likely to be eligible for but not on medical (and vice versa). Increased data sharing and communication could increase continuity of coverage.
<b>3) <u>Web Link to Apple Health for Kids website</u> –</b> ESD would provide a link to the DSHS <b>Apple Health for Kids</b> website to inform unemployment claimants about potential coverage for children in uninsured households that meet the income eligibility requirements

**Mandate for this study**

2008 Legislative Session; ESHB 2687, Section 209, Subsection 19:

**FOR THE DEPARTMENT OF SOCIAL AND HEALTH SERVICES--MEDICAL ASSISTANCE PROGRAM**

(19) \$1,529,000 of the general fund--state appropriation for fiscal year 2008 and \$2,871,000 of the general fund--state appropriation for fiscal year 2009 are provided solely for development and implementation of an outreach program as provided in chapter 5, Laws of 2007 (Second Substitute Senate Bill No. 5093, health services for children).

(a) By December 15, 2007, the department shall provide a report to the appropriate committees of the legislature on the progress of implementing the following activities:

(i) Feasibility study and implementation plan to develop online application capability that is integrated with the department's automated client eligibility system;

(ii) Development of data linkages with the office of superintendent of public instruction for free and reduced-price lunch enrollment information and the department of early learning for child care subsidy program enrollment information;

(iii) Informing insurers and providers when their enrollees' eligibility is going to expire so insurers and providers can help families reenroll;

(iv) Outreach contracts with local governmental entities, community based organizations, and tribes;

(v) Results of data sharing with outreach contractors, and other contracted entities such as local governments, community-based organizations, tribes, health care providers, and insurers to engage, enroll, and reenroll identified children;

(vi) Results of efforts to maximize federal matching funds, wherever possible; and

(vii) Plans for sustaining outreach programs proven to be successful.

***(b)(i) Within the amounts provided under this subsection (19), sufficient funding is provided to the department to develop and implement in conjunction with the employment security department a plan that would:***

***(A) Allow applicants and recipients of unemployment insurance to request assistance with obtaining health coverage for household members; and***

***(B) Authorize the exchange of information between the employment security department and the department of social and health services to more efficiently determine eligibility for health coverage under chapter 74.09 RCW.***

***(ii) The plan developed in (b) (i) of this subsection should address permissible uses of federal employment security funding and infrastructure, identification of any necessary statutory changes, and cost information. The department shall submit the plan in a report to the governor and the appropriate committees of the legislature by November 15, 2008.***

**Mandate for 2007 Outreach Study**

Second Substitute Senate Bill (2SSB) 5093, Section 2:

A new section is added to chapter 74.09 RCW – subsection (6) The department shall undertake a proactive, targeted outreach and education effort with the goal of enrolling children in health coverage and improving the health literacy of youth and parents. The department shall collaborate with the department of health, local public health jurisdictions, the office of superintendent of public instruction, the department of early learning, health educators, health care providers, health carriers, and parents in the design and development of this effort. The outreach and education effort shall include the following components:

- (a) Broad dissemination of information about the availability of coverage, including media campaigns;
- (b) Assistance with completing applications, and community-based outreach efforts to help people apply for coverage. Community-based outreach efforts should be targeted to the populations least likely to be covered;
- (c) Use of existing systems, such as enrollment information from the free and reduced price lunch program, the department of early learning child care subsidy program, the department of health's women, infants, and children program, and the early childhood education and assistance program, to identify children who may be eligible but not enrolled in coverage;
- (d) Contracting with community-based organizations and government entities to support community-based outreach efforts to help families apply for coverage. These efforts should be targeted to the populations least likely to be covered. The department shall provide informational materials for use by government entities and community-based organizations in their outreach activities, and should identify any available federal matching funds to support these efforts;
- (e) Development and dissemination of materials to engage and inform parents and families statewide on issues such as: The benefits of health insurance coverage; the appropriate use of health services, including primary care provided by health care practitioners licensed under chapters 18.71, 18.57, 18.36A, and 18.79 RCW, and emergency services; the value of a medical home, well-child services and immunization, and other preventive health services with linkages to department of health child profile efforts; identifying and **managing chronic conditions such as asthma and diabetes; and the value** of good nutrition and physical activity;
- (f) An evaluation of the outreach and education efforts, based upon clear outcome measures that are included in contracts with entities that undertake components of the outreach and education effort;
- (g) A feasibility study and implementation plan to develop online application capability that is integrated with the department's automated client eligibility system, and to develop data linkages with the office of superintendent of public instruction for free and reduced price lunch enrollment information and the department of early learning for child care subsidy program enrollment information. The department shall submit a feasibility study on the implementation of the requirements in this subsection to the governor and legislature by July 2008.

**Excerpt from 2007 Legislative Report on Outreach**

Report to the Legislature “CONCERNING ACCESS TO HEALTH CARE SERVICES FOR CHILDREN”:

**HELPING FAMILIES WHO HAVE LOST EMPLOYMENT**

**Strategy:** Most people who lose their jobs do not enroll in COBRA and therefore become uninsured. Even those who do enroll in COBRA generally cannot afford the health premiums for their families. Connecting with these newly uninsured children through the Unemployment Insurance program could be a very promising strategy.

**Process:** This idea is a new one for the Children’s Health Outreach Workgroup and needs exploration. However, our initial thoughts are that Unemployment Insurance enrollees should be asked during their weekly renewals if they have health insurance, if their children have health insurance, and if they would like assistance getting insurance. We believe a weekly renewal is a better place than initial enrollment into Unemployment Insurance because the client will not be as overwhelmed.

Clients typically do their weekly renewals by the phone or on the internet. Data is downloaded and processed quickly to send checks. We are particularly interested in piloting this idea on the internet renewal system – it is quite good and user-friendly, and would be an easy place for families to indicate they would like help.

**Implementation:** The department will begin exploring this idea with the Employment Security Department. As this idea is further developed, the department will seek assistance and advice from the Urban Institute, national experts in health care outreach.



**Internet resources**

Engrossed Substitute House Bill 2687 (ESHB 2687):

<http://apps.leg.wa.gov/billinfo/summary.aspx?bill=2687&year=2007>

Second Substitute Senate Bill 5093 (2SSB 5093):

<http://apps.leg.wa.gov/billinfo/summary.aspx?bill=5093&year=2007>

DSHS *Apple Health for Kids* Website:

<http://fortress.wa.gov/dshs/maa/applehealth/>

RCW 50.13.060 statute on WorkSource Data sharing

<http://apps.leg.wa.gov/RCW/default.aspx?cite=50.13.060>

Claimant Expenditure Survey, Fiscal Year 2007

<http://www.esd.wa.gov/newsandinformation/media/uidata/uipublishedreports/claimant-expenditure-survey-2007.pdf#zoom=100>

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