

**SECTION 1115 FY 05 GRANTS (AWARDED 8/1/05)  
QUARTERLY PERFORMANCE REPORT  
COVER SHEET**

1. Grant Number: **90FD0106**
2. Grantee Name and Address: **Vermont Agency of Human Services  
Office of Child Support  
103 South Main Street  
Waterbury, VT 05671-1901**
3. Phone Number: **(802) 241-2319**
4. Project Title: **Project UNIMED**
5. Period of Performance: **August 1, 2007 – October 31, 2007**
6. Approved Project Period: **August 1, 2005 – December 31, 2007**
7. Period Covered by this Report (Report due 30 days later):
- |                                      |       |                                      |       |
|--------------------------------------|-------|--------------------------------------|-------|
| 7 <sup>th</sup> Quarterly (4/30/07)  | _____ | 8 <sup>th</sup> Quarterly (7/31/07)  | _____ |
| 9 <sup>th</sup> Quarterly (11/30/07) | __X__ | 10 <sup>th</sup> Quarterly (1/31/08) | _____ |
8. Principal Investigator and Phone Number: **Jeff Cohen, (802) 241-2319**
9. Author's Name and Phone Number: **Robin Arnell, (802) 241-2236**
10. Date of Report: **November 27, 2007**
11. Report Number (sequentially): **9**
12. Name of Federal Project Officer: **John Jolley**
13. Date Reviewed by Federal Project Officer:
14. Comments (if any):

**VERMONT OFFICE OF CHILD SUPPORT**  
**PROJECT UNIMED: A Unified Approach to Medical Support through**  
**Intra-Agency Collaboration and Data Exchange**  
**Grant Number 90FD0106**

**NINTH QUARTERLY PROJECT PERFORMANCE REPORT**  
**Reporting Period August 1, 2007-October 31, 2007**

❖ **Major Activities and Accomplishments this Period**

During the ninth quarter of the grant, Policy Studies Inc. (PSI), our contractor, wrapped up system programming by completing the system enhancement to capture un-reimbursed medical expense obligations on our ORDR screen. This additional modification was designed, programmed, tested, trained, and implemented this period. A clean-up project has begun to populate these fields with information.

Extensive testing occurred on the case status coding and cash medical support processing programming. Members of this testing team worked a significant amount of overtime to ensure that the system processed money properly and that cases were categorized in the appropriate case status code once implemented. Testing also occurred on our court download package and revised arrears affidavit form. In addition to these areas, field additions to the OCS data warehouse (PEAKS) were also reviewed for consistency with the ACCESS mainframe.

The mainframe system enhancements to update status coding and process cash medical support were trained and implemented this quarter. Modifications to the Info on My Case portion of the OCS Website to display customer insurance information were also implemented.

Completed a clean-up project to ensure that spousal support obligations were correctly documented on the ORDR screen. This was necessary since spousal support was previously included with the current support obligation on the ORDR screen.

Our data team met three times with a PSI data warehouse developer to work on moving new mainframe fields into our data warehouse. During this period, our contractor was provided with a document containing screen shots of new ACCESS fields to move into PEAKS.

The collaborative partners (OCS-child support, OVHA-Medicaid, ESD-TANF) met once during the reporting period to review and revise processes, discuss data requirements, and receive contract updates.

❖ **Other Activities**

We continued to have weekly status meetings with PSI to monitor testing and implementation status. In this period, we had eight of these meetings.

The Grant Steering Team met twice in the reporting period to track the progress of the grant. This team has focused much effort on the various reporting requirements for the grant and how best to capture certain data.

PSI presented three knowledge transfer sessions for IT staff that will be responsible for supporting their system alterations and additions. The mainframe, ACCESS, and OCS Website were covered. Technical documentation was turned over at these training sessions.

#### ❖ **Problems**

We experienced some problems with the implementation of the case status code modifications. A portion of our caseload did not convert into the most appropriate code or did not meet any of the conversion criteria and were placed on an exception list. This resulted in just under a thousand cases that needed manual review. PSI also made modifications to the interface module in ACCESS that caused the interface to malfunction and allow cases through to IV-D that were not appropriate referrals. The types of cases that were being inappropriately referred by IV-A included cases without an assignment, cases where the children were not Medicaid active, cases where the children are over the age of majority, and child only Medicaid cases. To resolve this, PSI isolated the 800 cases that were opened or created in error and the testing team reviewed these cases one by one. PSI also refined the programming to stop inappropriate IV-A case referrals from continuing. To date, the interface is working properly and the case clean-up project is complete. Since our contract with PSI terminates at the end of November, they agreed to provide OCS with a two month no cost extension of the warranty period to ensure that the mainframe system functions properly for a period of time.

OVHA (Office of Vermont Health Access- Medicaid) did not do any follow-up work to expand the data set used to calculate cost savings and cost recovery. Also, the caseload match to Vermont's three largest insurance carriers has not been done. OVHA is currently working on a contract amendment which will allow the insurance match to proceed.

#### ❖ **Significant findings and events**

The most significant event that occurred this period was the system testing, training and implementation of mainframe modifications by Policy Studies Inc.

#### ❖ **Dissemination activities**

Staff was given handouts that explain the unreimbursed medical and case status/financial modifications in ACCESS.

#### ❖ **Activities planned for next reporting period**

The following activities are planned for the next reporting period: 1) system testing and training; 2) weekly status meetings with PSI; 3) continue to develop and monitor interagency activities; 4) insurance carrier data match executed; 5) website knowledge transfer session and documentation.

**Attachments** – Unreimbursed Medical Fields Handout, Case Status Code Handout

Respectfully submitted:

---

Jeffrey Cohen  
Principal Investigator/OCS Director