



MWDA NEWSLETTER

April 2007

Maine Welfare Directors

President' Message

Dear Members of Maine Welfare Directors:

I would like to take this occasion to thank you for the opportunity to serve you as President of MWDA for this past year. I have discovered that there is more to do than could ever be accomplished by one person but with many helping hands, it is easier, for this, I am grateful. I wish to thank Cindy Boyd and her staff for their endless enthusiasm in educating GA Administrators to assist the disadvantaged of this state, my appreciation for her patience in dealing with me and informing me of the correct way to handle situations. I am grateful for the exceptional assistance of Joan Kiszely and her staff. I would also like to thank the MWDA Executive Board for their commitment, dedication and support. I would like to acknowledge and recognize Kate Dufour for her countless hours spent dealing with the State House, related groups and endless meetings. special thanks to Judy Hardy-Goddard for the technical skills, she has moved MWDA forward. I am indebted to everyone who has taken the time away from their busy schedules to contribute, promote and support MWDA. In closing, I would like to state that MWDA needs everyone to serve as an officer, committee member or instructor, MWDA can only improve if there is participation.



A

Sincerely,

Darryl I. McKenney, President

Maine Welfare Director's Association

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A campaign to improve, expand SCHIP

The federal State Children's Health Insurance Program (SCHIP) will come before Congress this year for reauthorization. The Children's Defense Fund is seeking to improve, expand and enhance this vital program by proposing several positive changes in the reauthorization bill. These proposed changes *would ensure that **ALL** children have access to necessary health care services.*

WHAT IS IT?

The proposed changes would consolidate children's coverage under the current Medicaid and SCHIP programs into **one simplified and unified program**, expanding eligibility and provide necessary and comprehensive health coverage for roughly 9 million uninsured children across the country.

WHY ARE CHANGES NECESSARY?

The current Medicaid and SCHIP programs have made tremendous progress, covering roughly 30 million children who would otherwise not have access to necessary health care, but there are still many hurdles facing working families, including:

Current eligibility levels vary on a state-by-state basis and the enrollment process is complicated.

There is **little incentive for health care providers** to participate in the current programs because of inadequate reimbursement levels.

Many **necessary services are not covered** under the current program, such as access to mental health and dental services.

State and **regional budgets are strained** by fragmented efforts to fill coverage gaps.

WHAT ARE THE BENEFITS?

By bolstering SCHIP's reauthorization, we can:

Streamline the enrollment process, ensuring that all children are automatically enrolled;

Establish a national eligibility level to cover all children in families up to 300% of the federal poverty level (\$60,000 for a family of 4);

Create a national benefit package that guarantees **children in every state receive all medically necessary services**;

Provide reasonable cost-sharing for families based on their ability to pay for the cost of coverage and services;

Enhance reimbursement rates at or near the levels for private coverage to increase options for children who need services.

Allow higher income families to 'buy-in' to the program to purchase health coverage for their children.

HOW MUCH WILL IT COST?

Children are the most cost-effective group for health insurance, and increased access to health care will save money over the long run.

To make this goal a reality will require an estimated appropriation of \$26.1 billion, including \$14.8 billion for expanding the program to include auto enrollment for uninsured children; and \$11.3 billion to increase service provider reimbursement levels.

WHAT CAN I DO TO HELP?

Senator Olympia Snowe and Senator Susan Collins need to hear your voice!

Please contact them today and tell them you support the goals of the Children's Defense Fund so that **ALL**

Maine CDF

	CDF Proposal	Impact of CDF Proposal on Maine
Eligibility	All children (0-19) living in families with incomes at or below 300% FPL (\$60,000 for a family of 4)	<p>Maine covers children (0-19) with family incomes up to 200% FPL (\$40,000 for a family of 4) through a combination of both Medicaid & SCHIP programs.</p> <p>CDF's proposal would expand eligibility to 300% FPL, and significantly reduce the number of uninsured children.</p>
Benefits	Full coverage of all medically necessary health care , i.e. the early prevention, screening, diagnosis and treatment (EPSDT) services now covered under Medicaid	<p>All enrolled children in Maine are currently eligible for all medically necessary care.</p> <p>Under CDF's proposal, all children under 300% FPL would be eligible for all medically necessary care.</p>
Enrollment	<p>Auto-enrollment with opt-out:</p> <p>For children already receiving services under other means-tested programs (such as National School Lunch Program, food stamps, WIC, EITC, child care subsidies).</p> <p>For all children at critical junctures (birth, school enrollment, etc).</p> <p>Short and simple applications.</p> <p>Presumptive eligibility and self-attestation of eligibility (no asset or resource tests)</p> <p>12 month continuous eligibility</p>	<p>Maine uses same enrollment process for both Medicaid and SCHIP</p> <p>Maine has 12 month continuous eligibility</p> <p>Maine distributes applications for enrollment during the 1st week of school</p> <p>CDF's proposal would build on Maine's progress simplifying enrollment and further expand the state's ability to enroll children quickly.</p>
Costs to Families	<p>No costs for families with incomes at or below 200% FPL (\$40,000 for family of 4)</p> <p>No premiums and nominal co-payments for families at or below 300% FPL</p> <p>Children could not be denied services because of failure to make co-payments.</p>	<p>No cost-sharing for American Indians or Alaskan natives</p> <p>Families with incomes between 150% FPL (\$30,000 for family of 4) and 200% FPL pay premiums for their child's coverage</p> <p>CDF's proposal would greatly reduce costs for all families.</p>
Provider Rates and Access to Care	Provider reimbursement rates increased to 80% of average private insurance payment rates	CDF's proposal would greatly increase provider rates, thereby increasing children's access to providers.
Coverage of Pregnant Women	Pregnant and post-partum women (60 days) with incomes up to 300% FPL are eligible for the full range of services now offered by Medicaid.	<p>Pregnant women with incomes up to 200% FPL (same as children) are eligible for Medicaid coverage.</p> <p>CDF proposal would expand health coverage to more pregnant women.</p>
Federal Funding	<p>No additional costs to states, the federal government assumes full fiscal responsibility for expanded program.</p> <p>States receive additional federal payments for exceeding state-specific targets for covering uninsured children,</p> <p>States receive additional federal funding if they encounter a period of high-employment and/or natural or man-made disaster that increases enrollment.</p>	Under CDF's proposal, Maine could build on past successes, expand eligibility, and reduce costs for families without increasing current state spending levels

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2007 Spring Seminar**DAY ONE**

9:00—9:15	Introductions
9:15—10:45	Mock Interview/New applications Review the new MWDA applications; develop necessary and crucial interview skills
10:45-11:00	Break
11:00-12:15	Information Technology (Computer Tips n Tricks) Learn tips and tools for working in Microsoft Office, Netiquette, CP tips and blogs
12:15-1:30	Lunch Buffet/Business Meeting
1:30-3:30	Aspire to be Great The Honorable John Jenkins, Auburn Mayor Life readiness skills, Stress, Body Language, How to deal with Angry People

Day TwoProfessional Development

Vicky Edgerly, Chair Rene Daniel Cathy McDermott Cheryl Johnson Mary Reindl	9:00-10:30	Regional Resourcing and Communications We will launch into groups by county and confer on a fact pattern/application. Meet your neighboring GA Administrator
Judy Hardy-Goddard Delores Daoust Diane Mende Dot Meagher Lori Nelson	10:30-10:45 10:45-11:45 11:45-12:30	Break Legislative Update Cindy Boyd, DHHS and Kate Dufour, Legislative Advocate, MMA Frequently Asked Questions Finally Answered Cindy Boyd and Hotline Questions
Linda Fossa, Chair Sue Charron Mary Frances Bartlett	12:30-1:30 1:30-3:00	Lunch Assistance or No Assistance that is the Million Dollar Question Learn how each municipality would grant or not grant assistance in a game show format

FinanceMembership

Rene Daniel, Chair
 Nancy Gove
 Cheryl Johnson

Alternative Aid

A Short-Term Alternative to TANF

Families can now apply for the **Alternative Aid** program benefit once every 12 months. Previously a family could get Alternative Aid only once in a lifetime. However, a new law that **took effect on September 12th** changed this rule, to make this benefit more available to families who need it.

Alternative Aid is an important program for low-income working families' but many don't know about it. This program helps families with children who are *not* on TANF resolve problems that prevent them from getting or keeping a job. *For example, the program provides help with car repairs, childcare, uniforms or even help with housing-related emergencies, if those things are needed to help them get or keep a job.* Aid is given in the form of a voucher and can equal up to three month's worth of TANF benefits (\$1,455 for a family of 3). The income eligibility limit for this program has been increased from its formerly very low level to 133% of the poverty level. (See chart below.)

ELIGIBILITY

Families are eligible for Alternative Aid if they meet the income, asset and other eligibility requirements for TANF, (such as deprivation) *and* the parent or caretaker relative in the family has a job or is looking for one. For example, looking at the chart below, a family of 3 with income of less than \$1,841 a month may be eligible for Alternative Aid; a family of 2 with income less than \$1,463 a month may be eligible. **One important difference** between TANF and Alternative Aid is that once a person has been determined eligible, **a parent's wages do not count when figuring the amount** of the Alternative Aid grant.

VOUCHERS NOT CASH

Alternative aid doesn't come as a cash benefit. Instead, it takes the form of vouchers for services or items that the family needs. Because it is a voucher, it will not affect a family's food stamp benefit. For example, a family of 3 who is eligible for Alternative Aid and having no other income could be eligible for up to \$1455 in *vouchers for car repairs, or other items or services that they need to get or keep a job.* Families who receive Alternative Aid are not required to sign their child support over to the state or be involved with the ASPIRE program.

A family that receives Alternative Aid but decides it really needs longer-term help from the TANF Program can still apply for and get TANF. If they apply for TANF during the 3 months they are receiving Alternative Aid, the Alternative Aid must be repaid for any time during which the family received both Alternative Aid and TANF. The repayment method is the same as that used for the repayment of unintentional overpayments in TANF. (For families receiving the full TANF grant, Department of Health and Human Services will keep 10% of the family's benefit until it is repaid. For families receiving less than the full TANF amount - usually because they have some other source of income - DHHS will keep 30% of the family's TANF benefit until it is repaid.) You can apply for Alternative Aid by contacting your local DHHS office.

Alternative Aid Monthly Income Limits

Family Size	133% Federal Poverty Level
2	\$1,463
3	\$1,841
4	\$2,217
5	\$2,594

Confidentiality

Cindy Boyd

When one door
closes another
opens. But often
we look so long so
regretfully upon the
closed door that
we fail to see the
one that has
opened for us

Helen Keller

Maine's Department of Health and Human (DHHS) must by Federal and State statutes provide for the basic rights and dignity of all applicants and recipients of financial services regarding their confidentiality.

The Office of Integrated Access and Support administers the Food Stamps, TANF (Temporary Assistance for Needy Families), MaineCare, ASPIRE (Additional Support for People in Retraining and Employment), Child Support, and the General Assistance Program. The office recently updated its confidentiality guide.

Because Food Stamps, TANF, and MaineCare are Federal programs the State has to follow their confidentiality guidelines. There are many programs that receive funds from DHHS that need releases from the applicant or recipient before the Department can release information.

Because the General Assistance application has to be signed by the applicant and the applicant gives the GA administrator permission to verify the necessary information by signing the application, DHHS eligibility staffs are able to share information with GA administrators.

Please don't call to gather information until you have a signed application. If there is an emergency and you are processing an application and do not have the application signed yet, we will be able to help you because 22MRS§4310 states that a municipality can grant assistance without a signed application in an emergency. The applicant is supposed to come in to complete an application as soon as possible.

Upcoming events

Date	Course	Trainers	Where
May 20-22	Spring Seminar	MWDA instructors, DHHS personnel, and John Jenkins	Spruce Point Inn Boothbay Harbor
June 14	Pandemic Flu	Shawn Yardley	Bangor, Maine
September 7	Winter Issues	TBA	TBA

Changes in DHHS General Assistance Staff

Cindy Boyd

There have been some changes in the Department's GA staff. Hazel Beers retired on February 28th. She is going to travel and enjoy herself. That position is still vacant. I am hoping to get a register soon.

Maurice Doyon is doing an acting cap position for a year. This is a great opportunity for him. While he is going Nichole Ross will be processing your reimbursements. She is at Maurice's old desk so you can still reach her at 287-3736.

Robin Reed is also doing an acting cap position and we are waiting to fill her position. She is still doing all the SSI Interim Assistance work but that will be passed on once the position is filled.

Patty Littlefield and I are the only two available to cover the hotline and do all the other duties. We are aware that this might cause some inconvenience and we hope that you will bear with us while we go through these changes.

Anyone who
has never
made a mistake
has never tried
anything new.

**Albert
Einstein**

2007 Poverty Guidelines

Persons in household	48 Contiguous States	125%
1	10,210	12,763
2	13,690	17,113
3	17,170	21,463
4	20,650	25,813
5	24,130	30,163
6	27,610	34,513
7	31,090	38,863
8	34,570	43,213

For family units with more than 8 members, add \$3,480 for each additional member to meet the poverty guideline;



MWDA NEWSLETTER

June 2, 2007: Hunger Awareness Day - WCSH6/WLBZ2 and Hannaford's FEED ME food and fund drive.

NEWS CENTER personalities and several Hannaford stores throughout Maine are planning their 2nd annual statewide Feed ME food and fund drive to benefit Good Shepherd Food-Bank. GSFb staff and volunteers will be on hand to receive donations of food and monetary donations at Hannaford Supermarkets in Lewiston, Portland, Bangor and York County.

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