# Medicaid Public Health Emergency Unwinding and Redeterminations

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# Overview

- The Families First Coronavirus Response Act (FFCRA) provided an enhanced Federal Medical Assistance Percentage (FMAP) of 6.2 percent to states that met Maintenance of Eligibility Requirements (MoE) during the national public health emergency (PHE). FFCRA MoE provisions required states to extend continuous eligibility (CE) to all participants through the end of the PHE.
- The Consolidated Appropriations Act, 2023 became law on December 29, 2022. The legislation amended certain provisions of FFCRA and decoupled the CE requirement from the PHE.
    - CE requirements that were part of the MoE sunset on April 1, 2023, at which time states could begin unwinding procedures.
- Maryland Medical Assistance enrollment grew substantially during the PHE as Marylanders who were enrolled in Medicaid continued to be covered, even if they were no longer eligible.
    - 1,415,631 participants in February 2020 up to 1,781,191 participants as of April 3, 2023.
- Nearly all enrollees will have their coverage renewed during unwinding, including those who qualify primarily related to income, as well as those who qualify on the basis of being aged, blind, disabled, or enrolled in a home and community-based waiver program, and dual eligible participants..

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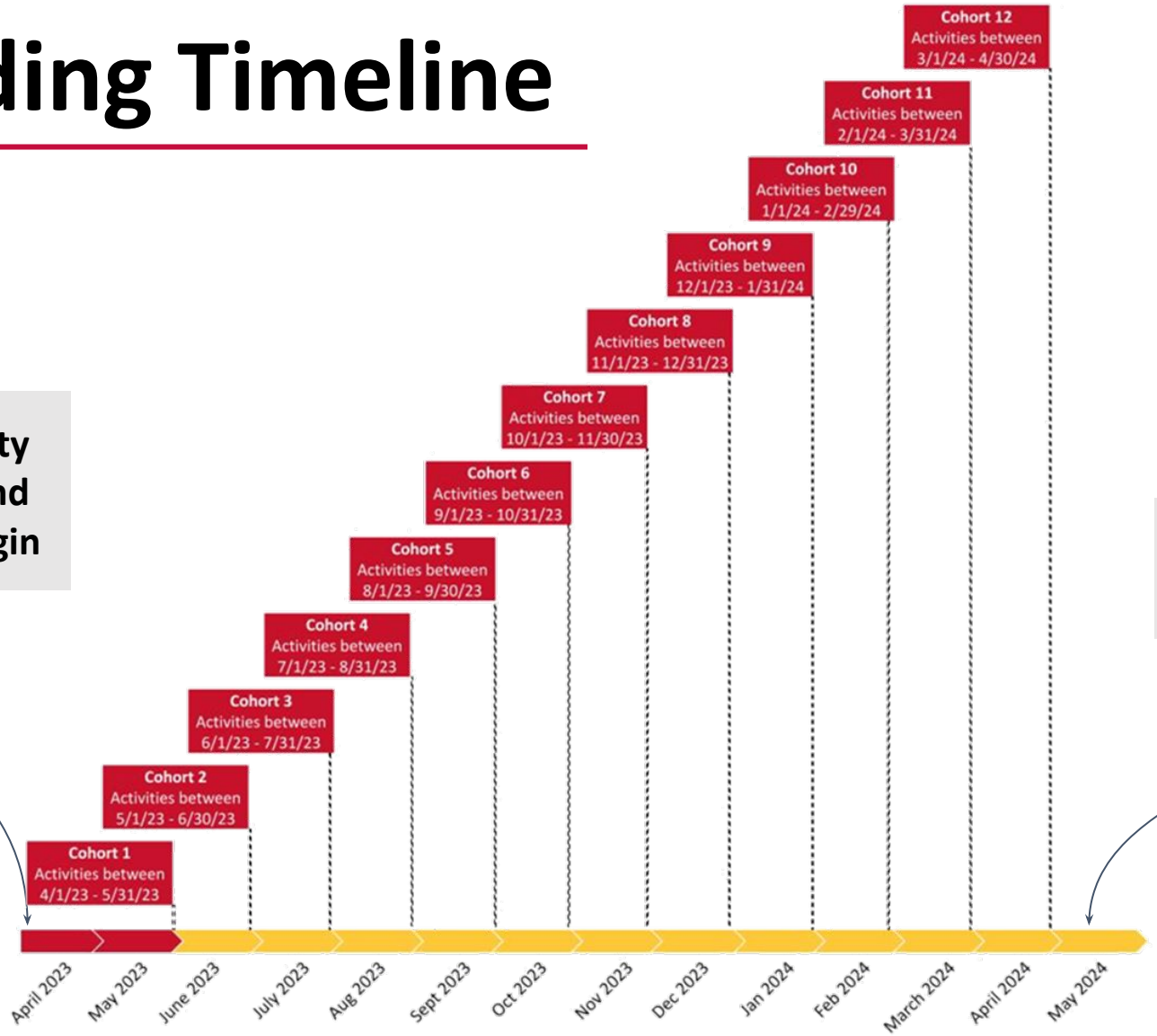
# Unwinding Timeline

**Continuous Eligibility requirements end and redeterminations begin**




**Normal operations resume**

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# Statewide Medicaid Check-In Campaign*

- Key Objectives:
  - Encourage Medicaid participants to update their information
  - Generate awareness of the redetermination process statewide using an integrated mix of vehicles that reflect the audience's media preferences
- The campaign is presented in English and Spanish with statewide distribution plans allocated in accordance with enrollment. Hispanic media is leveraged to reach primarily Spanish-language portions of the audience.
- MDH and MMCOA are continuously assessing the campaign and identifying areas for improvement, targeted outreach, and additional materials.

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# Campaign Strategies

A 12-month integrated media plan aimed at encouraging enrollees to keep their contact information current and educating them on the process for renewing. Campaign strategies include:

- Paid Search;
- Paid Social Media (Facebook and Instagram);
- Digital Media (display banners, streaming TV/radio, apps);
- TV;
- Radio;
- Outdoor of Home (OOH) – Outdoor boards and transit advertising;
- Location-based media;
- Prominent display of campaign information on MDH, MBHE, and DHS websites and dissemination of information through social media, public meetings and webinars, and other venues;
- Providers serving the Medicaid population engaged through deployment of a dedicated MDH web page, provider toolkit, webinars, and other resources;
- Other direct outreach strategies alongside the Medicaid Check-In Campaign to reach Medicaid participants.

The campaign is presented in both English and Spanish. Various materials have also been translated into Haitian Creole, Mandarin Chinese, Vietnamese, Amharic, Portuguese, Dari, Arabic, Burmese, French, Pashto, and Ukrainian.



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# Waivers and Flexibilities

- Maryland Medicaid has elected to continue certain waiver authorities active during the Public Health Emergency (PHE) and use new waiver authorities during the unwinding period to ensure eligible individuals stay covered by Medicaid or transition to other appropriate coverage.
- Maryland currently has 11 total (e)(14)(A) waivers, two disaster State Plan Amendments (SPAs), and five state-specific strategies. Maryland is among the top five states for use of (e)(14) waivers.
- Flexibilities include:*
  - Using SNAP income data to automatically renew participants;
  - Automatically renewing participants at 100 percent of FPL or below; and
  - Allowing MCOs to provide renewal assistance.
- More information can be found on MDH's webpage: Medicaid Check-In - CMS Waivers and Flexibilities

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# Stakeholder Engagement*

**MDH, Office of Minority Health**

- Faith-Based Organizations
- Historically-Black Colleges and Universities
- Community-Based Organizations (e.g., NAACP chapters, Crossroads Community Food Network, Montgomery County Coalition for the Homeless)

**Department of Disabilities**

- Housing Policy and Programs
  - Distributed Medicaid Check-In flyers to DoD affordable housing developments
- Community-Based Organizations (e.g., The ARC of Maryland, Self Directed Advocacy Network)

**Department of Labor**

- American Job Centers
  - Used Medicaid Check-In slides in presentations and trainings, and posting flyers in their in-person locations
- Workforce Innovation and Opportunity Act (WIOA) monthly newsletter

**MDH, Office of Long Term Services and Supports**

- Presentations and trainings for case workers
- Newsletter, memorandums, and other communications to Medicaid participants and providers

**Other organizations and offices MDH has partnered with or reached out to:**

- Office of the Public Defender
- Pharmacy Associations (e.g., Association of Chain Drug Stores)
- Maryland Hospital Association
- Mid-Atlantic Association of Community Health Centers

**Media**

- 5/11 Press Conference
- News reporting (e.g., Associated Press, CBS Baltimore, The Washington Post, U.S. News & World Report, Maryland Reporter)

*Note: this list is non-exhaustive and only includes highlights.



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# Grassroots Efforts

Partnership with Cool & Associates

- Aligned with partner agency Cool & Associates and currently have a presence and/or sponsorship at local and regional Hispanic/Latino events.
- Created materials specifically for use at these events.

Partnership with Live Chair Health

- Partnered with Live Chair Health in an effort to reach people in the community.

Partnership with Fabric Health (beginning January 2024)

- Partnered with Fabric Health, an organization that brings important health care information to the community directly in laundromats.

# Engaging Providers: Redetermination Dates

- Eligibility Verification System (EVS)
  - Redetermination dates are now included in the EVS system. Providers can access this Information either online or by phone and know when their patient is up for renewal.
- MDH/CRISP partnership enables targeted provider outreach to participants.
  - CRISP provides a file based on a provider's patient panel of individuals who are due for redetermination in the next three months to any provider participant who would like to receive this file.
  - The file enables providers to know exactly which patients are up for redeterminations and they may then reach out to these individuals specifically or ask them about redeterminations if they have a visit.
  - This partnership includes 48 provider organizations, 108 outbound provider panel files, and represents over 200,000 participants up for redetermination in a given 3-month span.
- Optum, Medicaid's Behavioral Health Administrative Services Organization (ASO), began including redetermination information in a new, weekly Patient Eligibility Report.

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# Engaging Providers & Stakeholders

MDH, in partnership with the MCOs, has prepared materials to facilitate outreach by providers and stakeholders.

The Medicaid Check-In Provider Toolkit and Partner Outreach and Communications Toolkit has information and materials stakeholders may use including:

- The Medicaid Check-In logo to add to existing materials.
- FAQs to help stakeholders understand the impact on participants.
- Newsletter blurbs that can be used in newsletters for participants or other stakeholders.
- Flyers in a variety of languages for various audiences.
- Social media posts that can be co-branded by other organizations.
- Email templates that can be used to outreach to participants or other stakeholders.



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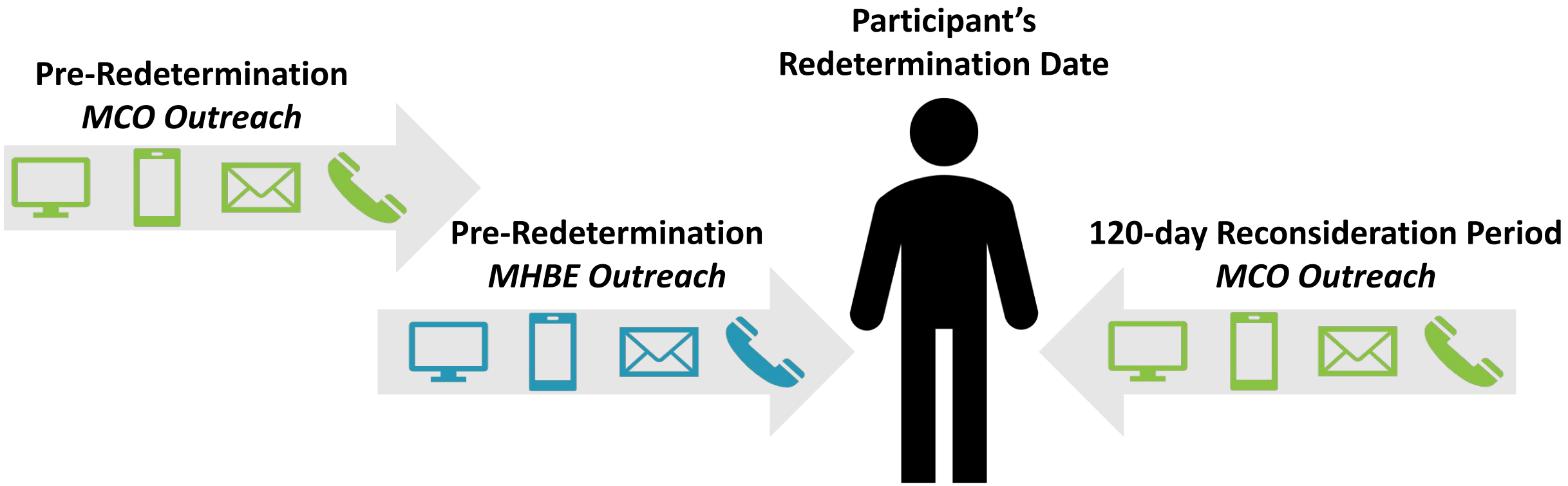
# Post-Redetermination: *MCO Outreach and the Reconsideration Period*

- An individual may be disenrolled from Medicaid coverage for failure to complete their redetermination.
  - MCOs will conduct targeted outreach to such individuals for 120 days following disenrollment.
  - If, during this time, an individual comes back into the system, and is found eligible for coverage, they will be re-enrolled automatically in the MCO plan they were last enrolled in. This coverage will begin 10 days from the date of the eligibility decision.
  - Any services rendered during the period after disenrollment and prior to re-enrollment in an MCO plan are eligible for fee-for-service reimbursement.
  - 30.2 percent and 24.6 percent of Individuals disenrolled in May and June, respectively, re-enrolled within 120 days
- Note: Maryland Health Connection (MHC) also implemented “easy enrollment” into qualified health plans (QHPs) for individuals who lose Medicaid coverage. Individuals will receive information on how to opt-in to QHP coverage.
- The 120-day reconsideration period is also available for non-MAGI participants.

# Directed Outreach Strategy

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# Maryland Health Connection Call Center

- The MHC call center is available to assist participants with the renewal process and answer any questions that arise.
  - The call center employs Spanish-speaking representatives.
  - In addition, the call center uses “Language Line” interpreter services for instances where a call center representative and participant do not speak the same language.
- Call center monitoring has not indicated any differences in the abandonment rate or average speed of answer between languages at this time.

# Ex Parte Mitigation

- In August 2023, CMS released clarification on ex parte renewal requirements defined in 42 CFR §435.916.
  - Ex parte is a process that enables the state to renew participants based on available data, rather than requiring a participant to submit additional data to the state.
  - This guidance asserts that states must conduct ex parte renewals on an individual basis, rather than at the household level.
  - In Maryland and many other states, ex parte renewals were conducted on a household basis.
- Medicaid immediately
  1. Convened a variety of stakeholders across state agencies:
     - Maryland Department of Health; Department of Human Services (Non-MAGI); Maryland Health Benefit Exchange (MAGI)
     - Included systems staff, policy staff, data analytic staff at all levels
  2. Pulled data on procedural disenrollments of children with redetermination dates between May and July
  3. Began to brainstorm other populations that could be impacted



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# Ex Parte Mitigation - Actions

- Paused all procedural terminations for the month of August and extended redetermination date to 11/30.
- Reviewed data pulls on potentially impacted populations.
  - Reinstated coverage for children <19 who were not renewed via the ex parte process and who were procedurally terminated from May through July.
  - Reinstated coverage for a small population of  former foster care youth.
  - Instituted FFCRA Continuous Eligibility for children in September, four months ahead of the federal requirement.
- Decided to push people who would be procedurally disenrolled in September to a 11/30 redetermination date and people who would be procedurally disenrolled in October to a 12/31 redetermination date (MAGI) or 11/30 redetermination date (Non-MAGI)
- Expedited system changes to come into full compliance (first correct ex parte for cohorts with an 11/30 redetermination date). Auto-enrollment in MHC increased by 9.1 percentage points between May and November (from 49.8 percent to 58.9 percent).



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# Redetermination Data through November 2023

**Coverage Extension Rate**

- 654,364/923,099 = 71%*

**Procedural Termination (e.g., not returning paperwork) Rate**

- 100,386/923,099 = 11%*

**Ineligible Rate (referred to Qualified Health Plan (QHP) through Maryland Health Connection)**

- 86,872/923,099 = 9%*



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# Effectuated QHP Enrollment through October 2023

- MAGI Medicaid Enrollees Determined Eligible for QHP: 44,444
- Eligible Enrollees who Effectuated Coverage: 16,805/44,444 = 38%

Medicaid to Private Plan Enrollment Program*
Certain eligible individuals no longer eligible for Medicaid are automatically enrolled by MHC into a QHP. Consumers must take action to effectuate coverage.

- Nearly 21,000 individuals were auto-enrolled in a QHP
- Nearly 6,300 auto-enrollees effectuated enrollment (30%)
- An additional 2,000 individuals updated their information and reenrolled in Medicaid (10%)
- Altogether, 40% of autoenrollees took action to retain coverage.

*Data through Oct. 11, 2023



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# November Summary Data

| | **MAGI** (Qualify for services on the basis of modified adjusted gross income through Maryland Health Connection) | **Non-MAGI** (Aged, blind, or disabled, or enrolled in a Home and Community-Based Services program) | **Total** (MAGI + non-MAGI) |
|---|---|---|---|
| Participants with coverage extended manually (not auto-renewed) | 11,884 | 6,231 | 18,115 |
| Participants auto-renewed with coverage extended | 78,411 | 267 | 78,678 |
| ***TOTAL COVERAGE EXTENSIONS*** | **90,295** | **6,498** | **96,793** |
| Participants disenrolled because they are no longer eligible for coverage | 5,241 | 7,013 | 12,254 |
| Participants disenrolled due to failure to submit application timely or renewal was incomplete | 34,342 | - | 34,342 |
| ***TOTAL DISENROLLMENTS*** | 39,583 | 7,013 | **46,596** |
| ***PENDING REVIEW*** | 3,321 | 19,172 | 22,493 |
| ***GRAND TOTAL (COVERAGE EXTENSIONS +* PENDING APPLICATIONS + *DISENROLLMENTS)*** | **133,199** | **32,416** | **165,615** |

**Total participants up for renewal with an November 30 coverage end date**:
165,615

**Total participants auto-renewed in Maryland Health Connection:**
78,411 (58.9%)

*Note: Maryland paused procedural terminations of Medicaid participants for the months of August, September, and October in accordance with recently released CMS guidance.

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# Demographic Data Summary*

- When compared with the April 2023 enrollment baseline, some groups are retaining coverage better than baseline. These groups are:
  - Children (ages 18 and under)
  - Black and African American population
  - Baltimore City
- Other groups, however, are experiencing more terminations. These groups include:
  - Adults under age 65
  - Washington Suburban area (Prince George's and Montgomery Counties)
  - Western Maryland

*Based on data as of the end of September 2023.



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# Updated Campaign Strategies

MDH is targeting additional outreach to certain populations and zip codes with high procedural disenrollment rates, including the Hagerstown area, and various locations in Prince George's and Montgomery counties. This includes, but is not limited to, the following:

- Increased radio frequency in Washington DC, Hagerstown and Frederick markets; including on WLZL-FM (El Zol 107.9), DC's premier Spanish language radio station.
- Expanded presence at independent C-stores, mini-marts and bodegas with digital point-of-sale ads;
- Increased presence of Light Rail advertising;
- Expanded bus shelter advertising in key markets in Baltimore City, Montgomery County and Prince George's County;
- Added traditional billboard advertising in key Western Maryland markets;
- Enhanced the current paid search campaign with a new campaign targeting individuals searching for terms related to being disenrolled;
- New campaign materials and messaging targeting different populations such as schools and parents.
- New Partner Toolkit webpage.
- Partnering with the Maryland Vehicle Administration to increase advertising.

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# Maryland Compared to Other States

Based on summary data prepared by the Kaiser Family Foundation, as of December 1, 2023*:

- Maryland is within the top five states for percentage of people renewed and retained in Medicaid coverage;
- Maryland is within the top 10 states based on procedural disenrollment rates when looking at total renewals due. Note that a *lower* procedural disenrollment rate is considered better.

*Note: it is difficult to compare data between states as states may have initiated unwinding in different months and are following different processes. In addition, states have prioritized the renewals of various populations differently. Maryland, for example, prioritized populations who would most likely be eligible for other coverage.*

**https://www.kff.org/report-section/medicaid-enrollment-and-unwinding-tracker-overview/*



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# Additional Resources

- Campaign Landing Page: https://www.marylandhealthconnection.gov/checkin/
- Participant Webpage: https://health.maryland.gov/mmcp/Pages/MedicaidCheckIn-Participants.aspx
- Partner Toolkit Information and Materials: https://health.maryland.gov/mmcp/Pages/medicaidcheckin-partners.aspx
- Provider Toolkit Information and Materials: https://health.maryland.gov/mmcp/Pages/MedicaidCheckIn-Providers.aspx
- Provider Outreach Video: https://www.youtube.com/watch?v=CBHxYbxwlAE&list=PL8iXJWFynuRjUzqVrU19Va72QXP9MF9HP&index=4
- PSA from Governor Wes Moore: https://www.youtube.com/watch?v=M9ReXXWuWDE&embeds_referring_euri=https%3A%2F%2Fhealth.maryland.gov%2F&source_ve_path=OTY3MTQ&feature=emb_imp_woyt
- Medicaid Check-In - CMS Waivers and Flexibilities: https://health.maryland.gov/mmcp/Pages/MedicaidCheckIn-CMS_Waivers_Flexibilites.aspx
- Medicaid Check-In - Data: https://health.maryland.gov/mmcp/Pages/MedicaidCheckIn-Data.aspx
- Medicaid Check-In email: mdh.medicaidcheckin@maryland.gov



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