

Medicaid Redeterminations Update

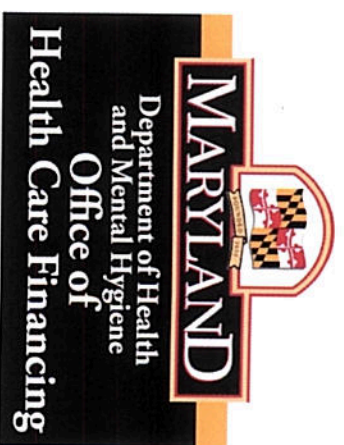
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Scope of Presentation

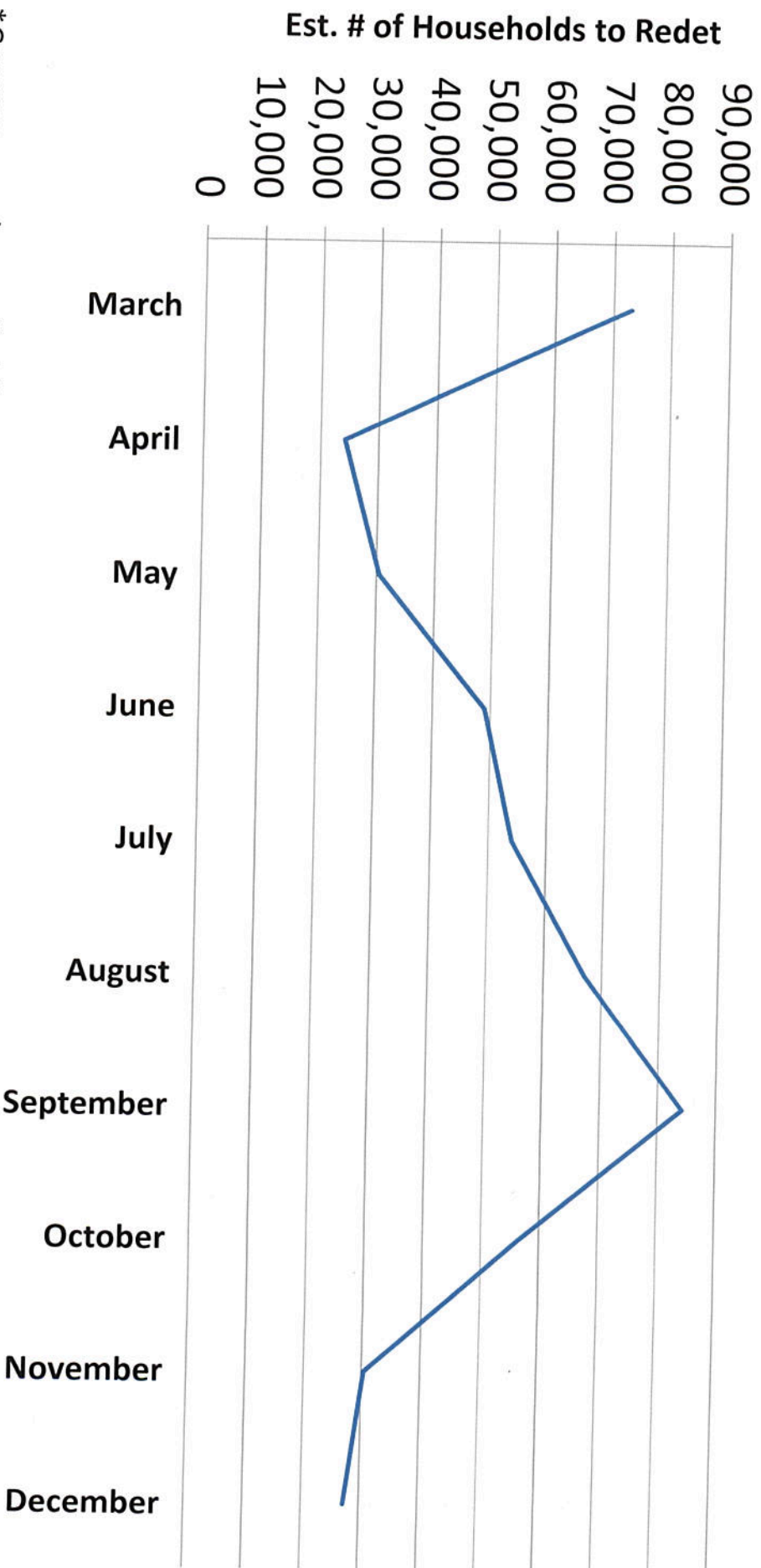
- Redeterminations Overview
- Application Assistance
- Outreach & Additional Support



REDETERMINATIONS OVERVIEW

Maryland requested a waiver from CMS to extend renewals in 2014 which gave enrollees extra months of eligibility.

2015 MEDICAID REDETERMINATION SCHEDULE*



*Consumers who applied for Medicaid using Maryland Health Connection during the 2014 open enrollment season must reapply for benefits beginning in November 2015. These households are not included in the estimates above.

Redetermination Notices

- Notifications:
 - Initial notification: 60-75 days before benefits close
 - Reminder notices are sent to recipients in CARES
 - Reminder text messages will be sent to recipients whose phone numbers we have starting in July
 - Recipients enrolled in the HealthChoice Program may also be contacted separately by their managed care organization (MCO).

How to Reapply

- **Those eligible for MAGI Medicaid** must reapply using Maryland Health Connection--
 - Create an account and apply online using www.marylandhealthconnection.gov,
 - Visit a local Connector Entity, Health Department or Department of Social Services, or
 - Call Maryland Health Connection Call Center 1-855-642-8572 (TTY: 1-855-642-8573).
- **Aged, blind, or disabled recipients** can
 - Apply for benefits online using <https://www.marylandsail.org/> or
 - Visit a local Department of Social Services.

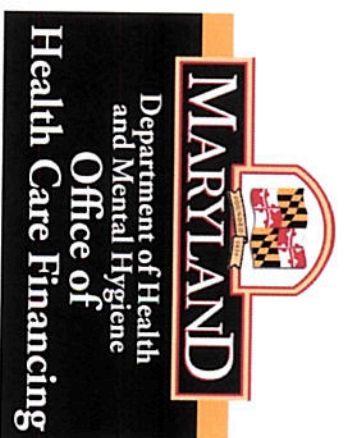
Encourage Recipients to Reapply

If a recipient's coverage has ended because they failed to reapply for benefits in a timely fashion, what should the person do?

- Reapply! If eligible for Medicaid, coverage will be effective on the first day of the month in which the individual reapplied. Recipients can apply for retroactive coverage for up to 3 months prior to their application date.

What happens when a HealthChoice recipient loses coverage? If they re-apply will they be enrolled in a different MCO?

- If a former HealthChoice recipient is found eligible for Medicaid again and was enrolled in an MCO within the last 120 days, they will be automatically re-enrolled in the MCO that they received coverage through previously within 10 days.
- Services are covered on a fee-for-service basis until the automatic re-enrollment process is complete.



APPLICATION ASSISTANCE

Application Assistance Resources

- Walk in or call Local Department of Social Services/Local Health Department (LDSS/LHDs)
- Connector Entities (Navigators and Assistors)
- Certified Application Counselors
- On-line through Maryland Health Connection
- Telephonic/Call Center
- Request paper applications
- Recipients will now have on-line access for information in Maryland Health Connection

Resources for Workers

- Job aids created to assist workers with processing
- Call with MCHP supervisors monthly to address concerns
- Weekly connector entity calls
- DHMH/DHR/MHBE emails on timely issues and weekly training reminders (Medicaid Marge)

Educational Materials

- Step by step renewal educational instructions in renewal letters and online at

<https://www.marylandhealthconnection.gov/medicaid-basics-benefits/>

maryland health connection

Medicaid Renewals

In order to have your Medicaid eligibility reassessed through the Maryland Health Connection, create an account and submit a new application. **NOTE: YOU MUST COMPLETE THE SPECIAL ENROLLMENT SECTION AS DESCRIBED IN STEP 8.**

Process flow: Visit Maryland Health Connection → Create Account → Start New Application → Answer Special Enrollment Questions → Complete & Sign Application

Create Account
From homepage: <https://www.marylandhealthconnection.gov>

1. Click **Enroll Now**
2. Click **Create Account**
3. **Complete** all information with a red asterisk (*) and click **Create Account**
4. **Log In** with your new User ID and Password you created

Login to Your Account
Please provide your login information to sign in to your account.
User ID: [Cumberbund1]
Password: [*****]
[Forgot Your User ID or Password?](#) [Login](#)

Create User Account
Account Information
First Name * [C] Last Name * [B] Best Practice: Type First and Last Name in Title Case
Gender [M] Cumberbund
Email Address [Cumberbund@awe.som.a.com] Cumberbund
User ID * [C] Last Name * [B] Email is optional and allows user to retrieve a forgotten User ID
Cumberbund1
5 to 15 letters and/or numbers
Password * [*****] Re-Enter Password * [*****]

Materials for Providers

- Informational flyer about the renewal processes – both MAGI and non-MAGI

Reapplying for Medicaid coverage

Follow these instructions if you:

- Are under 65
- Are a parent or caretaker relative of a minor child
- Are a pregnant woman
- Have a child enrolled in Medicaid
- Are a former foster care child

DRAFT

Reapplying for coverage is easy

You will reapply for Medicaid coverage once a year. When you get a letter saying you need to reapply (or if you think it's time for you to do so), you can reapply any of these ways:

- ✕ Online at MarylandHealthConnection.gov
 - △ Use this step-by-step guide (PDF) to create an account and complete your application. At the end, be sure to click "Proceed to Enrollment"
 - △ After you enroll, check your account's "My Inbox" to see if any additional documents are needed to verify your information.
 - ✕ Call Maryland Health Connection at 1-855-642-8572 (TTY: 1-855-642-8573)
 - ✕ Visit your local Department of Social Services office or Local Health Department
 - ✕ Connect with a Certified Application Counselor
 - ✕ Request a paper application by calling Maryland Health Connection and apply by mail
- Translation services are available.

Save time by having this information ready

Have the following information ready when you reapply through MarylandHealthConnection.gov or in person. You can also download this checklist (PDF):

- ✕ Household monthly income (including pay stubs, W-2 forms, or tax returns if you have them)
- ✕ Social Security numbers or document numbers for each household member reapplying for coverage
- ✕ Date of birth for each household member reapplying for coverage
- ✕ Immigration information, if applicable

After you reapply

If you are eligible for Medicaid and re-enroll, your Medicaid coverage will continue.

Learn more in our Frequently Asked Questions at dmh.maryland.gov under "Hot Topics."

FAQs

- **FAQs on how to reapply at**

<https://www.marylandhealthconnection.gov/medicaid-basics-benefits/>

<https://mmcp.dhmh.maryland.gov/SitePages/Medicaid%20Renewals.aspx>

Medicaid Renewals

Medicaid recipients must renew their eligibility once every 12 months. This process is also known as getting a "redetermination". Renewals for most Medicaid recipients will now be processed in Maryland Health Connection.

Recipients who must renew their eligibility using Maryland Health Connection will receive a letter in the mail with instructions on how to renew their benefits. These frequently asked questions (FAQs) address some common questions regarding the renewal process.

Medicaid Renewal FAQs

How do I know whether I need to renew my benefits in Maryland Health Connection?

Recipients who must renew their benefits will receive a letter in the mail indicating that they are up for renewal. The letter will indicate that the recipient must renew their benefits using Maryland Health Connection.

Which Medicaid recipients must renew their benefits using Maryland Health Connection? Can I use SAIL instead?

Individuals who must renew their benefits through Maryland Health Connection are:

- Children;
- Adults under age 65;
- Parents and caretaker relatives; and
- Pregnant women.



OUTREACH & ADDITIONAL SUPPORT

Outreach

- Managed Care Organizations (MCOs)
 - MCOs receive a monthly redetermination file and conduct outreach
 - Follow up with members who have not yet renewed or who still have outstanding verifications
- ValueOptions (VO)
 - ValueOptions will provide eligibility redetermination data to assist providers in tracking when their participants are due to renew their eligibility for Medicaid.

Maryland Automated Benefits System

- In Maryland Health Connection, Medicaid applicants provide monthly income which is validated against the federal hub.
- Many of our Medicaid enrollees may not file taxes.
- In July, Maryland Automated Benefits System (MABS) will be added.
- Because MABS data is more recent, we anticipate this change will decrease the amount of manual income verifications for consumers.

Additional Support

- DHMH Monitoring
 - Notify MCOs of renewal status
 - Hilltop data analysis monthly to review who has not renewed for outreach
 - Develop/monitor reports and send reminder emails and text messages
 - Presentations to providers and community partners
 - 90 day reasonable opportunity period provided until August 2015 to allow for additional processing time
 - Provided Enrollment Broker with reference materials and instructed them to answer questions received

Helpful Resources

General Information: <http://mmcp.dhmh.maryland.gov>

- Medical Assistance Hotline: 1.800.456.8900
- SAIL online application: <https://www.marylandsail.org>
- Local Health Departments:

<https://www.marylandsail.org/SailPDFLinks/SailPDFLinks.aspx?PDF=LocalHealthDepartment>

- Departments of Social Services: <https://www.marylandsail.org/Maps/DSSMap.aspx>
- Provider Directory Search: <https://encrypt.emdhealthchoice.org/searchable/main.action>
- Medicaid Marge Sign-Up: Send an e-mail to dhmh.medicaidmarge@maryland.gov

Additional Resources:

- Maryland Health Connection: <http://www.marylandhealthconnection.gov/>
 - Consumer Support Center 1-855-642-8572 (TTY 1-855-642-8573)
- Maryland Health Benefit Exchange: <http://marylandhbe.com/>



QUESTIONS?