Public Health Emergency Planning Activities

Maryland Department of Health, Office of Health Care Financing
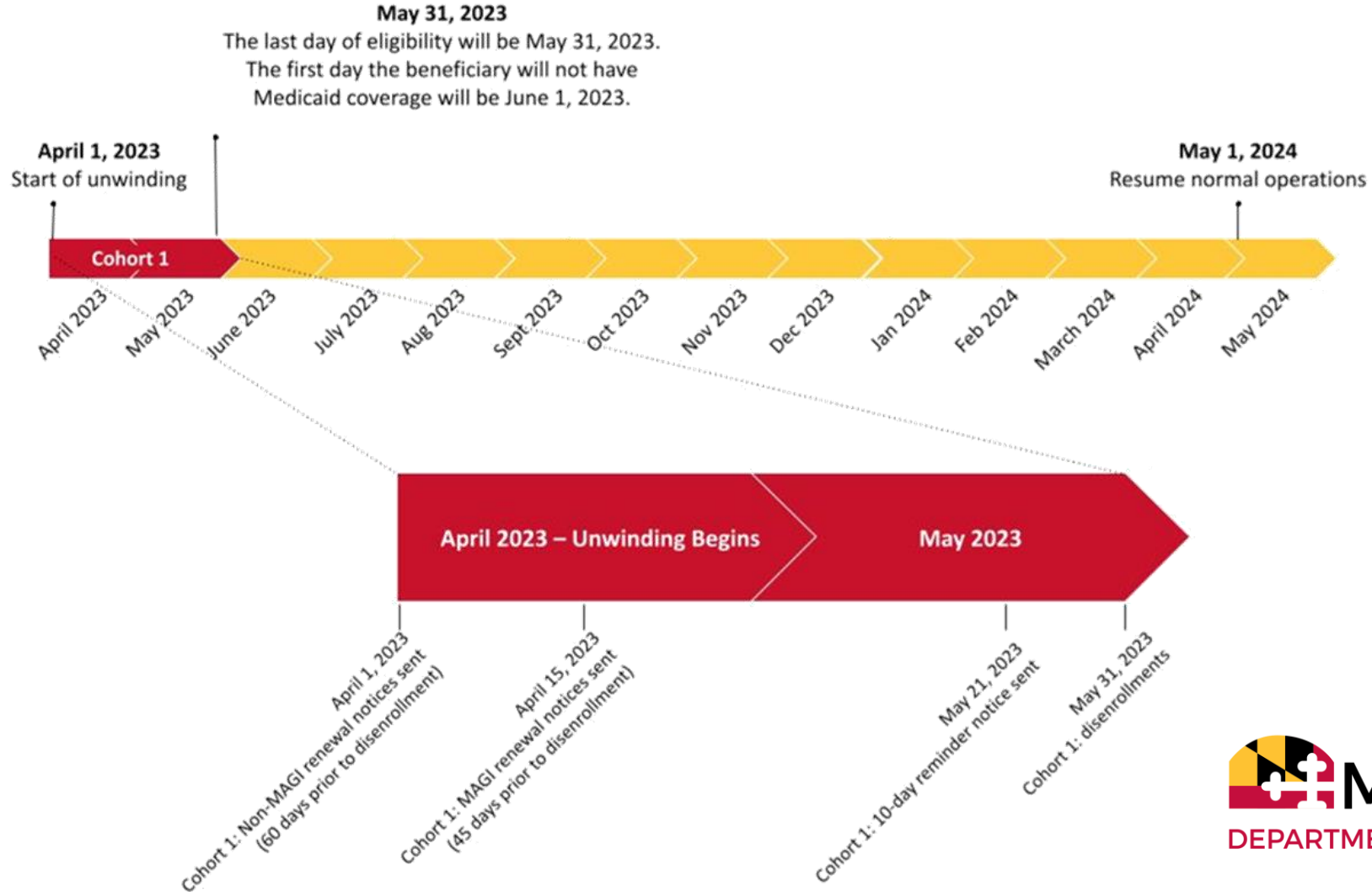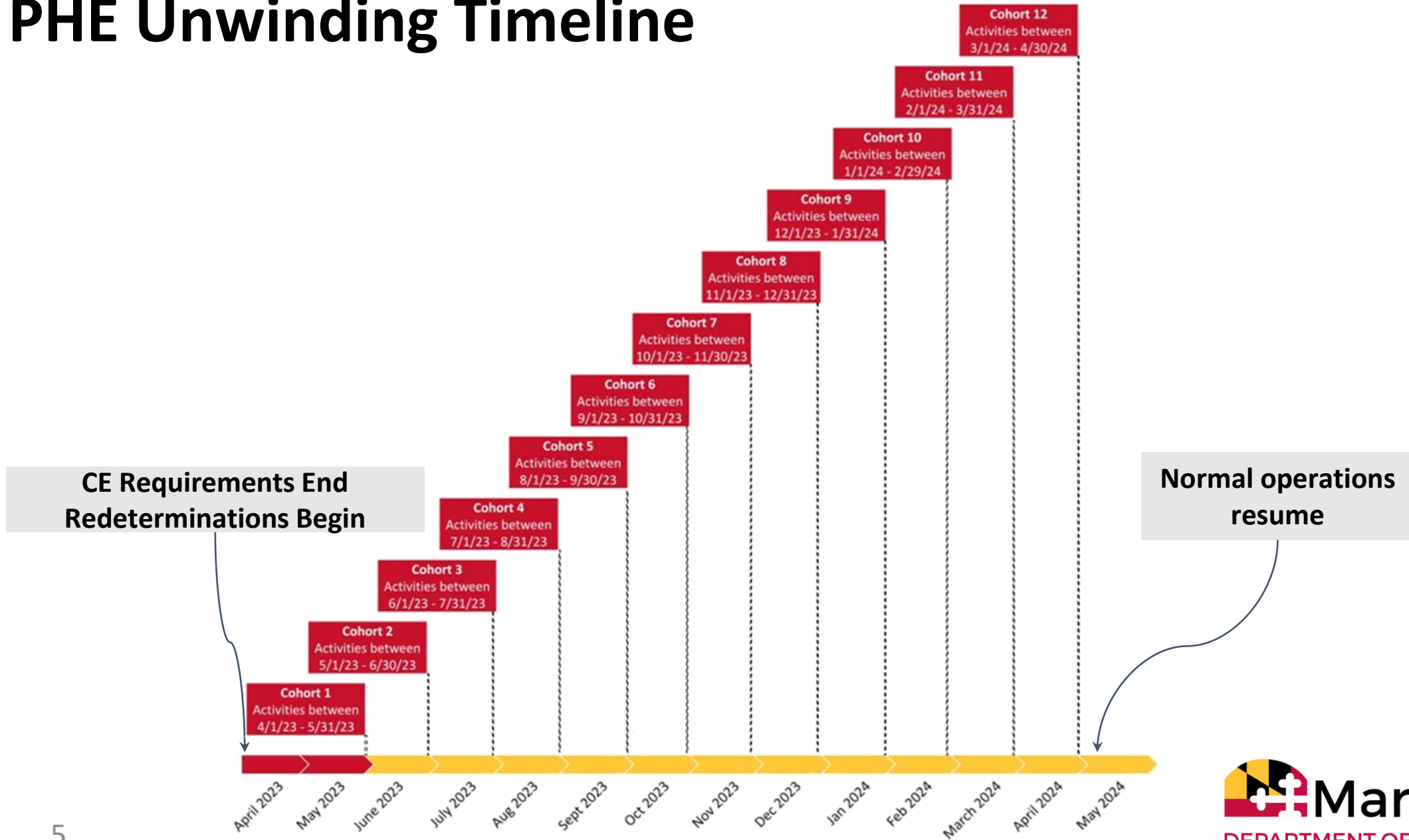
Public Health Emergency (PHE) Unwinding Overview

- The Families First Coronavirus Response Act (FFCRA) provided an enhanced Federal Medical Assistance Percentage (FMAP) of 6.2% to states that met Maintenance of Eligibility Requirements (MoE) during the PHE. FFCRA MoE provisions required states to extend continuous eligibility (CE) to all participants through the end of the PHE.

- **These requirements have now changed. The PHE and the CE requirement that was part of the MoE are no longer linked.**

- The *Consolidated Appropriations Act, 2023* became law on December 29, 2022. The legislation amended certain provisions of FFCRA and **decouples** the CE requirement from the PHE.

- CE requirements that were part of the MoE will now sunset on **April 1, 2023**, at which time states may begin unwinding procedures.

  - Maryland will continue standard redetermination mailings in April 2023, with the first disenrollments for participants who no longer qualify for coverage occurring at the end of May 2023.
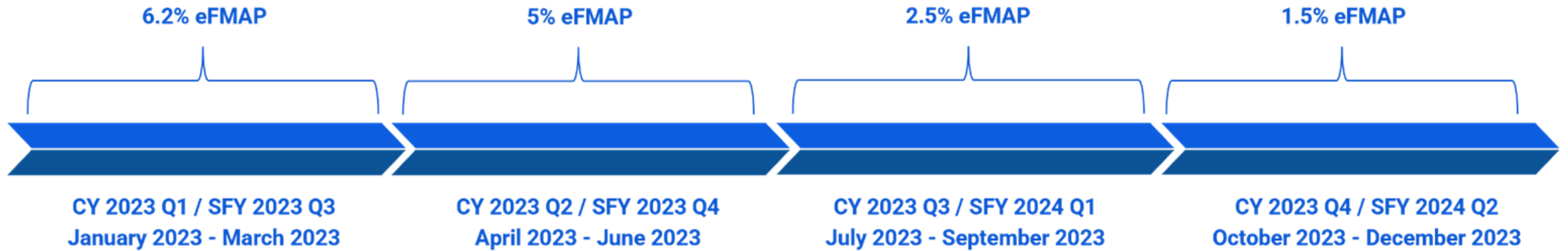
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Zoomed In - PHE Unwinding Timeline

May 31, 2023
The last day of eligibility will be May 31, 2023.
The first day the beneficiary will not have
Medicaid coverage will be June 1, 2023.

April 1, 2023
Start of unwinding

May 1, 2024
Resume normal operations

Cohort 1

April 2023 | May 2023 | June 2023 | July 2023 | Aug 2023 | Sept 2023 | Oct 2023 | Nov 2023 | Dec 2023 | Jan 2024 | Feb 2024 | March 2024 | April 2024 | May 2024

April 2023 – Unwinding Begins | **May 2023**

April 1, 2023
Cohort 1: Non-MAGI renewal notices sent
(60 days prior to disenrollment)

April 15, 2023
Cohort 1: MAGI renewal notices sent
(45 days prior to disenrollment)

May 21, 2023
Cohort 1: 10-day reminder notice sent

May 31, 2023
Cohort 1: disenrollments

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PHE Unwinding Timeline

Cohort 12
Activities between
3/1/24 - 4/30/24

Cohort 11
Activities between
2/1/24 - 3/31/24

Cohort 10
Activities between
1/1/24 - 2/29/24

Cohort 9
Activities between
12/1/23 - 1/31/24

Cohort 8
Activities between
11/1/23 - 12/31/23

Cohort 7
Activities between
10/1/23 - 11/30/23

Cohort 6
Activities between
9/1/23 - 10/31/23

Cohort 5
Activities between
8/1/23 - 9/30/23

Cohort 4
Activities between
7/1/23 - 8/31/23

Cohort 3
Activities between
6/1/23 - 7/31/23

Cohort 2
Activities between
5/1/23 - 6/30/23

Cohort 1
Activities between
4/1/23 - 5/31/23

CE Requirements End
Redeterminations Begin

Normal operations
resume

April 2023 | May 2023 | June 2023 | July 2023 | Aug 2023 | Sept 2023 | Oct 2023 | Nov 2023 | Dec 2023 | Jan 2024 | Feb 2024 | March 2024 | April 2024 | May 2024

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Congressional Omnibus Spending Bill

- In addition to ending the CE requirement of the MoE for states on **April 1, 2023**, the *Consolidated Appropriations Act, 2023* also makes other changes to FFCRA.

  - The enhanced FMAP will be phased out over calendar year (CY) 2023.

    - 6.2% – March 18, 2020 - March 31, 2023

    - 5% – April 1, 2023 - June 30, 2023

    - 2.5% – July 1, 2023 - September 30, 2023

    - 1.5% – October 1, 2023 - December 31, 2023

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eFMAP Phase Out Timeline

6.2% eFMAP | 5% eFMAP | 2.5% eFMAP | 1.5% eFMAP

CY 2023 Q1 / SFY 2023 Q3
January 2023 - March 2023

CY 2023 Q2 / SFY 2023 Q4
April 2023 - June 2023

CY 2023 Q3 / SFY 2024 Q1
July 2023 - September 2023

CY 2023 Q4 / SFY 2024 Q2
October 2023 - December 2023

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Communications

- **MDH is partnering with essential stakeholders to prepare for outreach efforts as the PHE Unwinding approaches**, including:

  - Maryland Medicaid Managed Care Organizations (MCOs)

  - Maryland Health Benefit Exchange (MHBE)

  - Maryland Department of Human Services (DHS)

  - Chesapeake Regional Information System for our Patients (CRISP)

- The communications campaign will include paid media, social media messaging, and other advertising and digital campaigns, in addition to targeted outreach by the MCOs.

Coordination with DHS for Fee-for-Service Participants

- DHS Local Departments of Social Services resumed in-office presence in August 2021.
  - Assistance to walk-in customers is available.
  - Age, Blind and Disabled Redeterminations may also be submitted via the myMDTHINK Consumer Portal at https://mymdthink.maryland.gov/home/#/.
- DHS has already resumed redeterminations, similar to the process implemented in MHBE.
- The agency is also hiring additional staff to support eligibility determination activities and outreach on Medicaid and associated programs.
- DHS is partnering with MDH to co-brand on marketing materials under development with the communications firm, GKV.
- Protocols in place to insure warm handoffs between systems.
  - Call centers (DHS, MDH, MHBE) will be prepared to redirect individuals as appropriate to ensure they can reapply for coverage through the appropriate application platform.
  - Information will also be available to consumers on all three websites.

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MMCOA
MARYLAND MCO ASSOCIATION

Maryland's MANAGED CARE ORGANIZATIONS

Supporting our Members through the Medicaid Redetermination Process

Presented by Kathlyn Wee
President, MMCOA Board of Directors
CEO, UnitedHealthcare of the Mid-Atlantic, Inc.

What is an MCO?

Managed Care Organizations (MCOs) are health care organizations that provide services to Medicaid recipients in Maryland.
MCOs partner with the HealthChoice Program to provide quality health care from a broad network of providers.

How does HealthChoice work?

About 86% of Medicaid beneficiaries are in the HealthChoice program. There are nine MCOs authorized to provide services in Maryland. After individuals are found eligible at Maryland Health Connection, they enroll in coverage with the MCO of their choice.

Over 1.5 million Marylanders are currently enrolled in a HealthChoice Managed Care Organization (MCO)

1 out of 4 Marylanders have health care coverage through an MCO

47% are children age 0-18, 31% are children age 0-11

46% are female

All nine MCOs are NCQA (National Committee for Quality Assurance) accredited and scored at or above the national average for quality based on quality (HEDIS®) and member experience (CAHPS®) scores in 2022.

MMCOA

MARYLAND MCO ASSOCIATION

The Maryland Managed Care Organization Association (MMCOA) represents the nine MCOs serving Maryland's HealthChoice program.

MMCOA MISSION STATEMENT

MMCOA advocates for a more effective, integrated, and comprehensive Medicaid program and works to ensure access to affordable high-quality health care for all Medicaid enrollees.

MMCOA educates stakeholders and policy makers about the unique role that MCOs play in providing excellent health care thru cost-effective coverage.

Managed Care Organizations:
Partnering with the State to Ensure Continuous Coverage for HealthChoice Members

Managed Care Organizations:
Partnering with the State to Ensure Continuous Coverage for HealthChoice Members

- In 2022, all nine of Maryland's Managed Care Organizations (MCOs), came together to invest considerable resources to develop a statewide outreach campaign to our members in advance of- and throughout- the redetermination process.
- We have partnered with the Maryland Department of Health, the Maryland Health Benefit Exchange, health care providers, community organizations, and other public health stakeholders to ensure that members maintain their health insurance coverage.
- In addition to our collective investment and efforts, the MCOs individually outreach to enrolled members through various methods and modalities to ensure that they continue to receive access to high quality care when eligibility reviews resume.

MCO Member Outreach:
Supporting and Complimenting the Statewide Redetermination Campaign

Utilizing MDH and Hilltop Data
- Analyzing of monthly data reports to identify members at highest risk for losing coverage
- Implementation of intensive outreach plans to those members

Direct to Member Outreach
- Text Messaging
- Emails
- Member Portal
- Member Welcome Kits
- Consumer Advisory Board Meetings
- Member Newsletters
- Community/Member Events

Provider Outreach and Engagement
- Sharing campaign messaging with providers
- In closed network MCOs, waiting rooms TV screens with messaging, flyers, etc
- Outreach to provider specialty groups, i.e. MHA, MDAAP
- Utilizing CMOs and other providers within internal MCO teams to speak within the medical community about importance and impact of redetermination
- Provider Portal Updates

MCO Member Outreach:
Supporting and Complimenting the Statewide Redetermination Campaign

Broader Public Awareness/Outreach
- Website
- Social Media
- Community Advisory Committee Meetings (external stakeholders including providers, community-based organizations and local departments of health)
- Community Engagement Centers/brick-and-mortar offices, and medical center locations

- Outreach/Existing Programmatic Events
- Operational IVR enhancements/Call-Center Updates and Improvements

Internal MCO Education
- Training and FAQs documents for internal staff that conduct outreach and/or interface with members. This includes member services teams, population health teams, care management providers, and outreach coordinators.

MCO Member Outreach:
Supporting and Complimenting the Statewide Redetermination Campaign

Through partnering with the Maryland Department of Health in retaining GKV to execute an effective, broad-based Statewide outreach campaign, as well as conducting comprehensive outreach to our respective members, the MCOs are thoroughly committed to ensuring that as many HealthChoice members as possible remain enrolled in the program.

Consumer Research

Research Approach

- Strongly believe in a research-based approach
- Partnered with a local research firm to conduct unbranded, 30-minute one-on-one discussions with current Medicaid recipients to explore:
  - Awareness surrounding the renewal process
  - Potential barriers for renewal
  - Prioritizations of message points and media vehicles
- Participant ages ranged from 18-64 with a mix of genders, county residence and current MCO membership. The group included a mix of individuals who had gone through a renewal in the past and those who have not.

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Key Findings

- None of the participants were aware of how important the next renewal period is and that it may put them at risk of losing their health insurance
  - This finding is consistent with recent CMS research
- For those who have not renewed before, the idea of having to renew is not on their radar
  - The participants had no knowledge about how the process will work and were confused about when their benefits will expire
- Participants noted that there was great concern about the possibility of losing their insurance so renewing would be a priority once they were notified
- Nearly 50% of the participants indicated a change in address over the past three years
- Of the 33% that indicated that they had an online account with the Maryland Health Connection, they indicated that they "rarely" visit their account
- Potential barriers to renewal include not being aware of their expiration timing, a major catastrophe, regular life distractions and internet issues

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Key Findings

- Most associated the Maryland Health Connection name with the renewal/enrollment process while the Maryland Department of Health name added credibility
- Many participants indicated receiving communications from their MCOs and acknowledged how appreciative they were for the communications
- Participants want to receive important information about Medicaid renewal through multiple communication channels, including mail, text, email and phone
  - *"Use multiple ways of communication (emails, text and VM), one of them is guaranteed to touch base with me."*
- Messaging that is direct and concise is preferred and should be consistent from all parties

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Advertising

Campaign Objectives

- Develop a campaign theme to brand and advertise outreach efforts
- Disrupt autopilot behavior to let Medicaid recipients know that changes are occurring
- Generate awareness of the need for individuals to ensure their contact information is up to date
- Encourage Medicaid enrollees to renew their insurance when it's their turn
- Ensure assets can be easily adaptable by MCOs and partners for their needs in tandem with the campaign

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Media Approach

- Use an integrated mix of vehicles that reflect the audience's media preferences
  - The campaign will include traditional paid media; digital media to include social media advertising in addition to the targeted MCO outreach
  - Incorporate Hispanic media to reach primarily Spanish-language portions of the audience
- Conduct the advertising campaign over two phases:
  - Prelaunch – generate awareness among Medicaid recipients to update their contact information.
  - Launch – encourage enrollees to keep their information current and educate them on the renewal process.
- Include multiple ways for Medicaid enrollees to interact (web address, QR code and phone number)
- Direct individuals to a dedicated page on the Maryland Health Connection website

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Media Flowchart
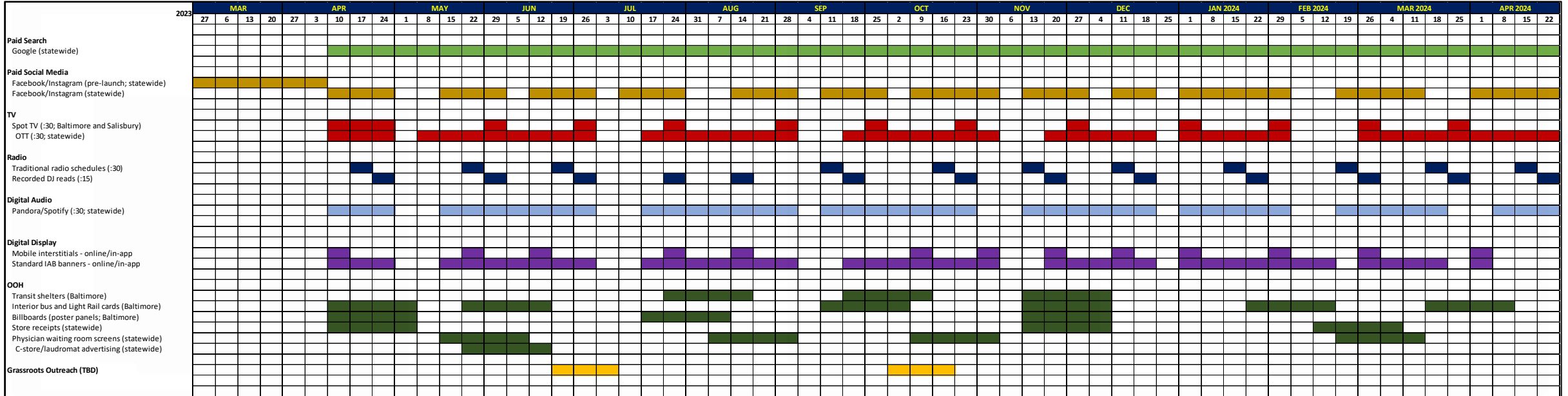
Provider Communications

- Reach medical providers who treat Medicaid patients
- Along with the PCP/Pediatrician waiting room screen advertising, provider toolkits will be distributed to help educate the audience and generate awareness for renewals
- Toolkits will include multilanguage fliers and FAQs

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