

Unwinding the Continuous Coverage Requirement

National Association of Medicaid Directors

May 23, 2022

National Association of Medicaid Directors

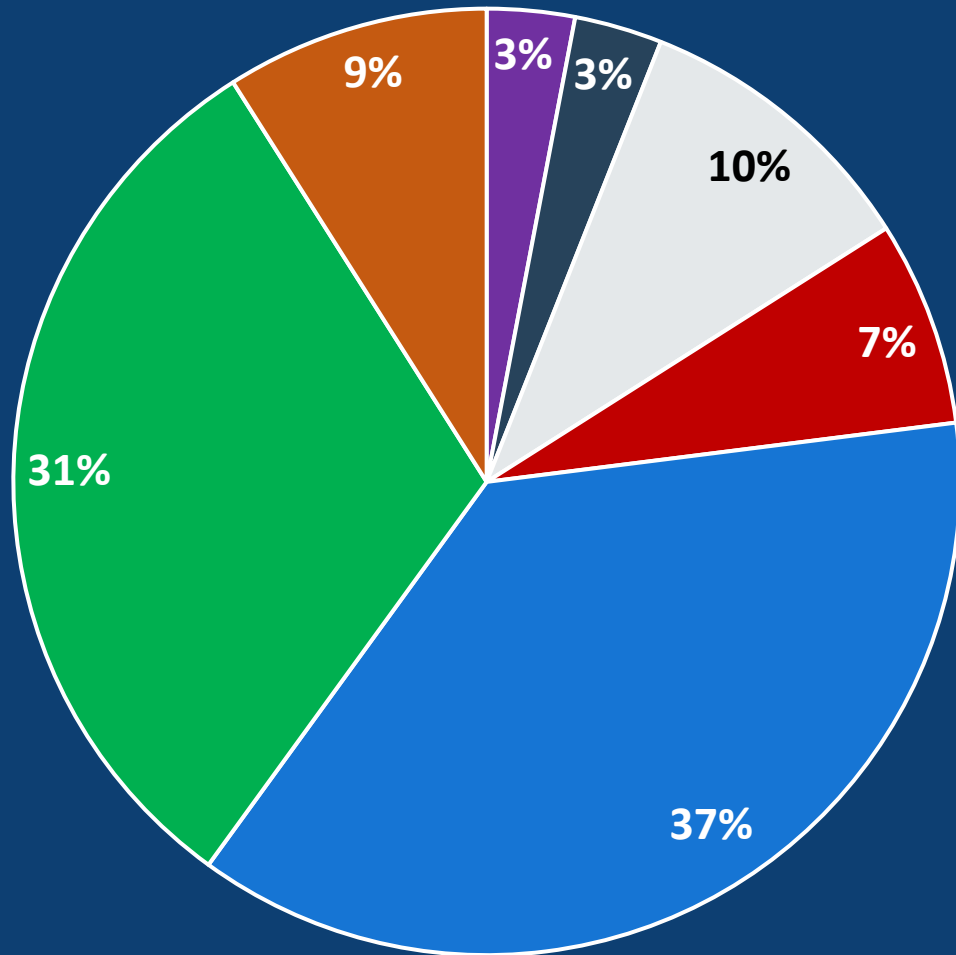
About: Non-profit association for the 56 state and territorial Medicaid leaders

Our mission: help Medicaid leaders deliver high value services to millions served by the program

Three core functions

- Serving as a thought leader
- Strengthening the federal/state partnership
- Providing program assistance and leadership development

Who is in the Room



Advocacy Organizations

Federal Partners

Health Plans

Providers

Industry Partners

State Leaders

Other

Today's Speakers



Lindsey Browning
Director of Medicaid
Programming
NAMD



Jacey Cooper
Deputy Director for
Health Care Programs
&
Medicaid Director
California Department
of Health Care
Services



Elizabeth Matney
Director
Iowa Medicaid



Dave Richard
Deputy Secretary for
NC Medicaid
North Carolina
Department of Health
and Human Services

AGENDA



Level Setting

Coverage Impacts & Assumptions

State Work to Prepare

How Partners Can Help

Q & A



Level Setting



Medicaid's Role in the Pandemic



Medicaid is designed to be the nation's first responder.

Since March 2020, Medicaid employed "continuous coverage" at federal direction.

Medicaid enrollment grew by about 20%.

The program will be right sized at the end of the national public health emergency (PHE).

The reduction in eligibility will likely be the most significant in program's history.

Federal Realities

60

HHS committed to providing a 60-day notice before the PHE ends. HHS did not provide this notice last week, so we expect another extension.

90

Each PHE renewal lasts 90 days. One more extension would mean the PHE would end in mid-October.

14

Medicaid agencies have up to 14 months to redetermine eligibility for their full membership.

6.2%

Enhanced FMAP expires at end of the quarter in which PHE ends. Caseload will remain high after the 6.2% enhanced FMAP ends, which will likely have an impact on state budgets.

Impacts and Assumptions



State Realities

70%

Workforce Shortages

Over 70% of Medicaid agencies feel least confident about building the workforce capacity necessary to execute unwinding.

3

Navigating Unique State Operational Structures

1. Medicaid Agency has *sole* responsibility over redeterminations
2. Medicaid shares responsibility over redeterminations with *sister agencies*
3. Medicaid shares responsibility over redeterminations the *counties*

16

Estimating Declines in Medicaid Coverage

National estimates of Medicaid coverage loss range from 5.3 to 16 million.

Uncertainty about the PHE end date impacts all aspects of state planning

Discussion



End of the Public Health Emergency



Redetermination Timeframe



Medicaid Coverage Loss

Key Work Date



Reaching Members



- Working with CBOs and navigators
- Working with MCOs
- Text message campaigns
- Language access considerations
- Updating consumer notices
- Robocalls
- Social media
- Partnering with providers



Building Workforce Capacity



- Leveraging other agency staff
- Adding new positions
- Hiring temporary workers
- Tapping retired workers
- Expanding use of contractors
- Targeted training/skills development
- Redistributing work
- Filling vacant positions



Updating Policies & Systems



- Renewal dates and prioritization
- Dashboards to communicate progress
- Boosting reasonable compatibility
- Strengthening ex parte processes

Discussion



Creative strategies



Major challenges

How Partners Can Help



Retention & Continuity



Retaining coverage for Medicaid eligible enrollees



Transitioning ineligible enrollees into other coverage

Questions?