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Federally Facilitated Marketplace Eligibility & Enrollment and Coverage Expansion Learning Collaboratives

Strategies for Managing High Volume of Applications and Account Transfers

December 18, 2013

1:00-2:30pm ET

URL: https://manatt.webex.com/manatt/onstage/g.php?t=a&d=570938767
Event Password: Account1
Dial: 1.866.922.3257
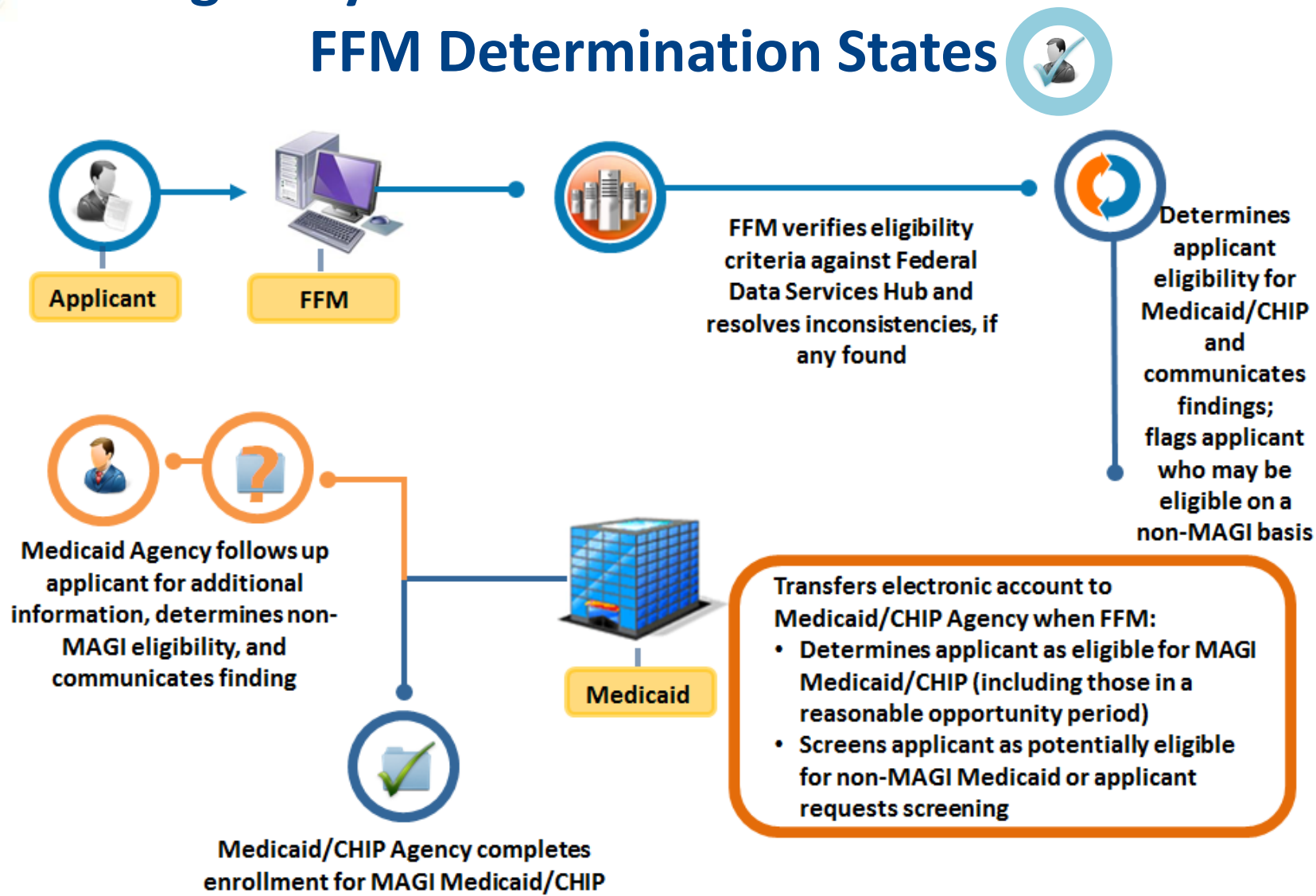**Passcode**: 793656#

Agenda

- Meeting Objectives & Variables in Account Transfer Volume Management

- Account Transfer Volume Management Strategies

- Data Issues

- Other Federal Strategies

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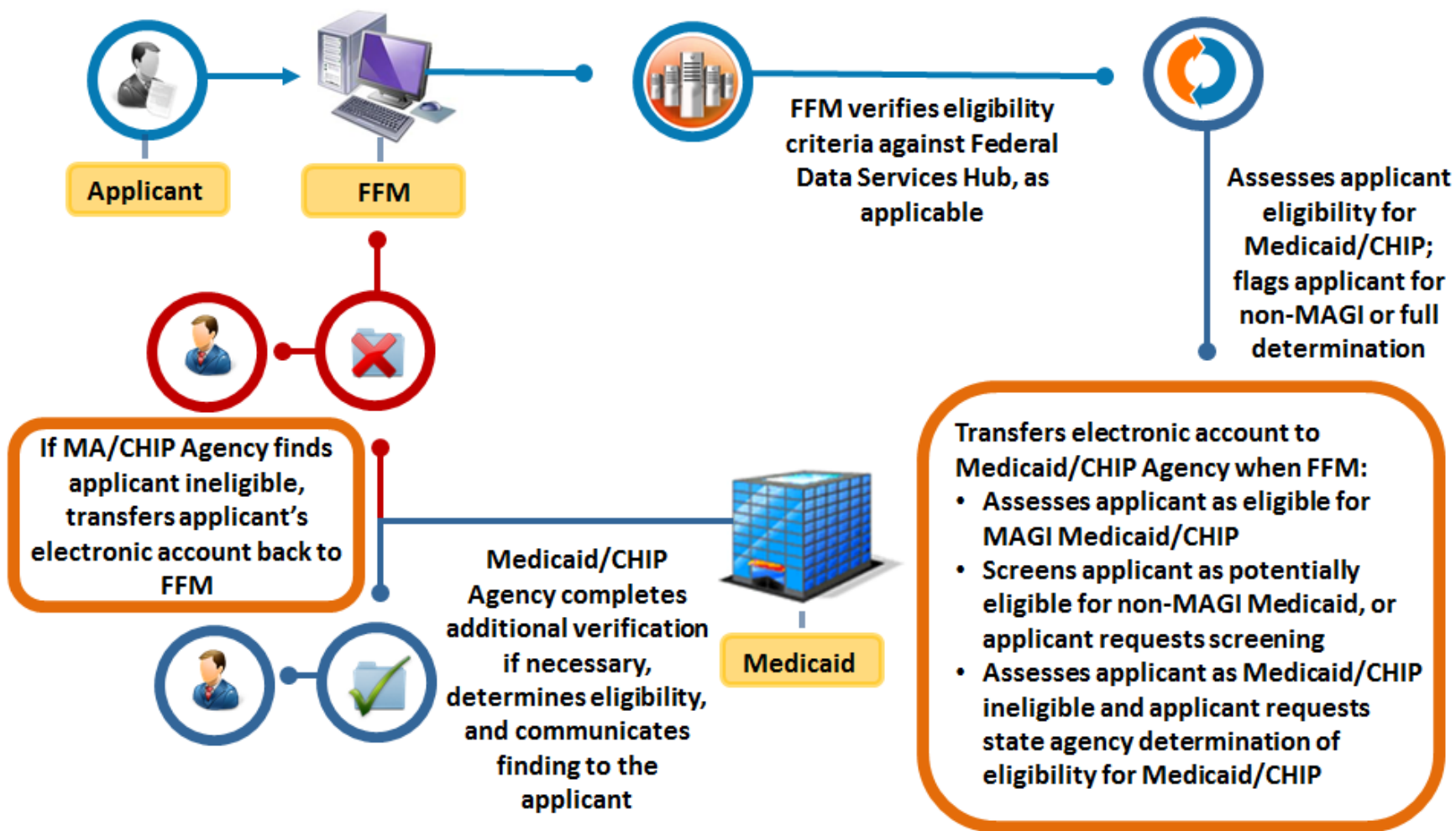# Meeting Objectives & Variables in Account Transfer Management

Meeting Objectives

- Discuss policy and operational challenges resulting from the high volume of Open Enrollment Period (OEP) applications to States, and Medicaid/CHIP Account Transfers (AT) from the FFM.

- To identify practical strategies to manage application volume and facilitate timely enrollment of Medicaid/CHIP eligible individuals:
  o Enhanced flat file strategies
  o AT strategies
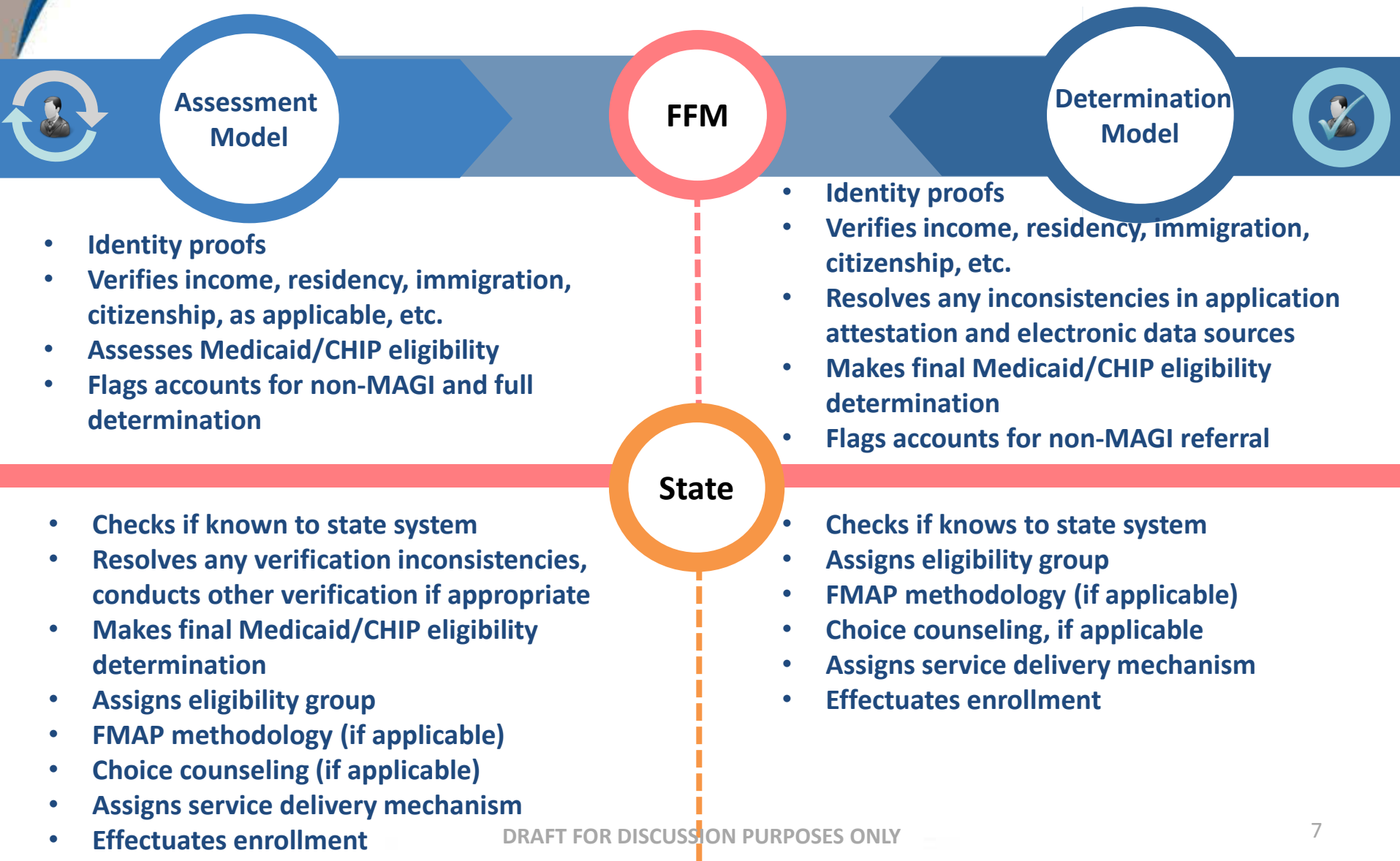 o Other application strategies

Eligibility & Enrollment Process Flow for FFM Determination States

Applicant → **FFM**

FFM verifies eligibility criteria against Federal Data Services Hub and resolves inconsistencies, if any found

Determines applicant eligibility for Medicaid/CHIP and communicates findings; flags applicant who may be eligible on a non-MAGI basis

Medicaid Agency follows up applicant for additional information, determines non-MAGI eligibility, and communicates finding

Medicaid

Transfers electronic account to Medicaid/CHIP Agency when FFM:
- **Determines applicant as eligible for MAGI Medicaid/CHIP (including those in a reasonable opportunity period)**
- **Screens applicant as potentially eligible for non-MAGI Medicaid or applicant requests screening**

Medicaid/CHIP Agency completes enrollment for MAGI Medicaid/CHIP

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Eligibility & Enrollment Process Flow for FFM Assessment States

Applicant

FFM

FFM verifies eligibility criteria against Federal Data Services Hub, as applicable

Assesses applicant eligibility for Medicaid/CHIP; flags applicant for non-MAGI or full determination

If MA/CHIP Agency finds applicant ineligible, transfers applicant's electronic account back to FFM

Medicaid/CHIP Agency completes additional verification if necessary, determines eligibility, and communicates finding to the applicant

Medicaid

Transfers electronic account to Medicaid/CHIP Agency when FFM:
- Assesses applicant as eligible for MAGI Medicaid/CHIP
- Screens applicant as potentially eligible for non-MAGI Medicaid, or applicant requests screening
- Assesses applicant as Medicaid/CHIP ineligible and applicant requests state agency determination of eligibility for Medicaid/CHIP

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FFM vs. State Medicaid/CHIP Roles
in Assessment and Determination States

Assessment Model → **FFM** → **Determination Model**

FFM (Assessment Model)
- Identity proofs
- Verifies income, residency, immigration, citizenship, as applicable, etc.
- Assesses Medicaid/CHIP eligibility
- Flags accounts for non-MAGI and full determination

FFM (Determination Model)
- Identity proofs
- Verifies income, residency, immigration, citizenship, etc.
- Resolves any inconsistencies in application attestation and electronic data sources
- Makes final Medicaid/CHIP eligibility determination
- Flags accounts for non-MAGI referral

State

State (Assessment Model)
- Checks if known to state system
- Resolves any verification inconsistencies, conducts other verification if appropriate
- Makes final Medicaid/CHIP eligibility determination
- Assigns eligibility group
- FMAP methodology (if applicable)
- Choice counseling (if applicable)
- Assigns service delivery mechanism
- Effectuates enrollment

State (Determination Model)
- Checks if knows to state system
- Assigns eligibility group
- FMAP methodology (if applicable)
- Choice counseling, if applicable
- Assigns service delivery mechanism
- Effectuates enrollment

Types of Accounts

MAGI Medicaid/CHIP Eligible

Individual has been determined or assessed eligible for MAGI Medicaid/CHIP

- *Determination and Assessment States*

Non-MAGI Medicaid Referral

Individual flagged for non-MAGI screening through application questions or requests non-MAGI referral. May also have been determined MAGI eligible.

- *Determination and Assessment States*
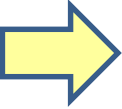
MAGI Medicaid/CHIP Ineligible but Requested State Agency Determination Individual was assessed ineligible for Medicaid/CHIP but requested a Medicaid/CHIP determination from the State Agency (Applicant can enroll in APTC/CSR in the meantime)

- *Assessment States only*

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State Systems Readiness

Manual versus Automated Capability?

- **Account Transfer receipt (FFM → State)**

- **Account Processing capacity**
  - **Match against existing eligibility records**
  - **Upload or update account information in state eligibility system**
  - **Apply additional eligibility rules**
  - **Verification**
  - **Determination**
  - **Notice**

    States will need to acknowledge receipt and communicate outcome (accepted, provisionally accepted, rejected)

- **Account Transfer transmission (State → FFM)**

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Discussion:
Overall Account Transfer Strategies
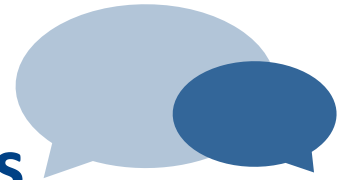
- What are you thinking about for managing your state's anticipated volume of account transfers? Are you planning on making any changes from your standard application processing? For example, with:
  - Prioritizing certain applications?
  - Automation of system processes?
  - Staffing?

- Are you considering any application/account transfer prioritization strategies other than "first in first out"?

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Volume Management Strategies

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Volume Management Strategies

Use Expanded Flat File

Applicants Already Enrolled in Medicaid/CHIP

Approach to Non-MAGI

Fast Track Determination for Applications without Inconsistencies (aligned with verification plan)

Enroll or Verify Using Existing State Data

Use Expanded Flat File

Strategy

- **Enroll applicants determined or assessed eligible for Medicaid/CHIP without inconsistencies based on the expanded flat file to:**
  - **Expedite enrollment and access to coverage**
  - **Focus resources on non-MAGI and other applications coming into agency [Determination States]**
  - **Distribute AT workload [Assessment States]**

Conditions Supporting Adoption

- **State unable to receive AT (and extended timeline to achieve capability)**
- **State unable to automatically process AT (and extended timeline to achieve capability)**
- **Systems capability for processing expanded flat file**

Considerations

- **State will need to obtain 1902(e)(14) waiver authority**
- **State still needs to process AT**
- **Applicant becomes "known to State system" and requires reconciliation upon AT processing**

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Discussion:
Use Expanded Flat File
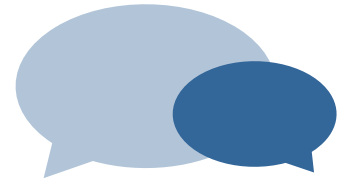
- After reviewing the flat file parameters and enhanced data fields, will your state be able to use the Expanded Flat File? How?
    - Not at all
    - For workload planning
    - To sort/clean/prioritize accounts
    - To enroll individuals determined/assessed eligible for Medicaid/CHIP without inconsistencies
    - Other?

- Will using the Expanded Flat File help to make managing the full account transfer more efficient?
    - Are there ways that CMS can state facilitate adoption of this strategy?

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Applicants Already Enrolled in Medicaid/CHIP

Strategy

- Send notice to individual that they are currently enrolled and remind them of renewal date
- Utilize FFM-verified data to provide renewal for 12 months

Conditions Supporting Adoption

- Automated identification of "duplicates" or applicants who are already enrolled in Medicaid/CHIP
- For 12-month extension of renewal period, state accepts FFM data without further verification

Considerations

- State may need to modify verification plan
- Enables state to prioritize processing for those without coverage

Discussion: Applicants Already Enrolled in Medicaid/CHIP
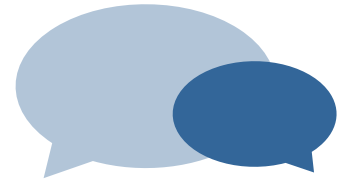
- How does your state handle duplicate/known applicants now?

  o Does your current process inform how AT duplicates will be handled?

- How will your state identify duplicates or applicants in AT who are already known to Medicaid? Will this check be automated or manual?

- If your state is able to identify these accounts, how will you handle duplicate applications from the FFM?

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Approach to Non-MAGI

Strategy

- At a minimum, notice consumer explaining non-MAGI application process
- Issue supplemental information request
- Request completion of ABD application

Considerations

- State may prioritize pool of non-MAGI applicants
- State may have non-integrated MAGI and non-MAGI eligibility systems
- Consumers may not understand implications of non-MAGI determination request

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Discussion:
Non-MAGI Approach
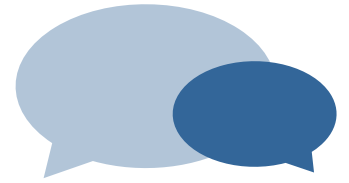
- What does your state do today for applicants that attest to being disabled?

- How is your state considering handling non-MAGI accounts when transferred from the FFM?

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Fast Track Determination of AT Applications without Inconsistencies

Strategy

- Enroll MAGI eligible applicants without inconsistencies; can conduct additional state verifications post-eligibility
- Deny MAGI ineligible applicants without inconsistencies

Conditions Supporting Adoption

- Assessment state
- State verification plan accepts FFM data without additional verification (i.e. income)
- State decides to accept FFM data without additional verification for an interim period
- Additional state verifications are manual

Considerations

- State may need to establish process for conducting post-eligibility verification
- State may need to modify verification plan

Discussion:
Fast Track Determination
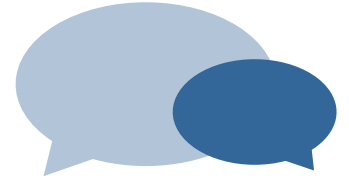
- Is your state considering "fast tracking" the determination of account transfer applications without inconsistencies? Why or why not?

  o What are the considerations in making this decision?

- Is your state considering conducting post-eligibility verifications? Why or why not?

  o What are the considerations in making this decision?

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Enroll or Verify Using Existing State Data (through AT or Expanded Flat File)

Strategy

- *Currently receiving SNAP/other state program:*
  - "Fast-track" enroll individual based on SNAP/other state program data

- *Currently or previously received SNAP/other state program*:
  - Verify applicant eligibility by relying on current or previously provided information (within a certain timeframe defined by state)

Conditions Supporting Adoption

- State Medicaid/CHIP system able to automatically access data for applicants known to other human services programs (e.g., states with horizontally integrated eligibility systems)
- Assessment state

Considerations

- State will need to pursue 1902(e)(4) waiver to adopt "fast track" enrollment procedures
- State may need to modify verification plan

Discussion:
Enroll or Verify Using Existing State Data (through AT or Expanded Flat File)

- Is your state able to access data from other human services programs?

- Has your state considered (or does it plan to) fast-track enroll individuals known to the other programs? Why or why not?

Volume Management Strategies

Strategy	State Type	Account Type
Use Expanded Flat File	Determination State / Assessment State	MAGI Medicaid/CHIP Eligible
Applicants Already Enrolled in Medicaid/CHIP	Determination State / Assessment State	MAGI Medicaid/CHIP Eligible
Approach to Non-MAGI	Determination State / Assessment State	Non-MAGI Medicaid
Fast Track Determination for Applications without Inconsistencies (aligned with verification plan)	Assessment State	MAGI Medicaid/CHIP Eligible / MAGI Medicaid/CHIP Ineligible but Requested State Agency Determination
Enroll or Verify Using Existing State Data	Assessment State	MAGI Medicaid/CHIP Eligible

KEY

Determination State

Assessment State

✓ MAGI Medicaid/CHIP Eligible

? Non-MAGI Medicaid

✗ MAGI Medicaid/CHIP Ineligible but Requested State Agency Determination

Data Issues

Discussion:
Data Issues
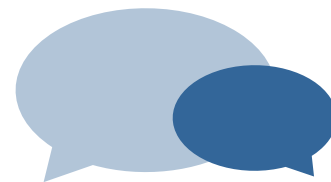
Are there any data issues with the enhanced flat file that have not been identified and discussed?

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Other Federal Strategies

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Discussion:
Federal Resources and Other Federal Strategies

What other flexibilities could CMS provide to support this transitional period of high application volume and account transfers?

Resources
Enrollment Strategies SHO: http://www.medicaid.gov/Federal-Policy-Guidance/downloads/SHO-13-003.pdf
Account Transfer SHO: http://www.medicaid.gov/Federal-Policy-Guidance/downloads/SHO-13-008.pdf
Flat File Format and User's Guide: https://calt.cms.gov/sf/docman/do/listDocuments/projects.medicaid_state_collab orative_com/docman.root.expanded_flat_file_for_enrollmen
Account Transfer FAQs: http://www.medicaid.gov/State-Resource-Center/FAQ-Medicaid-and-CHIP- Affordable-Care-Act-Implementation/FAQ-Medicaid-and-CHIP-ACA- Implementation.html

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Questions & Answers

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