

All-State Medicaid and CHIP Call June 14, 2022



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Agenda

- Top 10 Fundamental Actions to Prepare States for Unwinding of the PHE
- Open Mic Q and A

Top 10 Fundamental Actions to Prepare States for Unwinding of the PHE

- New CMS tool issued on June 2, 2022 that identifies critical actions states should take to prepare for the unwinding of the COVID-19 public health emergency
- Provides a guide for states by compiling and providing links to already issued CMS guidance and tools
- Helpful resource for both experienced and new state leaders and stakeholders to identify critical requirements and action needed
- Ensures states are ready to maximize retention of eligible individuals and to support seamless transitions to other insurance affordability programs



1. Create your state's unwinding operational plan

- Develop comprehensive unwinding operational plan to restore routine operations that describes how state will complete outstanding work, ensure continuity of coverage for eligible individuals and facilitate seamless coverage transitions as it returns to normal operations after the PHE.
- Key resources include:
 - Medicaid and CHIP COVID-19 Health Emergency Eligibility and Enrollment Pending
 Actions Resolution Planning Tool (issued March 2022): Guides states through eligibility
 and enrollment issues to address in their planning efforts and key state planning
 domains and strategies.
 - General Transition Planning Tool for Restoring Regular Medicaid and Children's Health Insurance Program Operations After Conclusion of the Coronavirus Disease 2019 Public Health Emergency (issued January 2021): Guides states through an assessment of actions needed to ensure a smooth transition as federal approval for each PHE-related authority/flexibility/waiver that expires when the PHE ends or another date.
 - Strategies States and the U.S. Territories can Adopt to Maintain Coverage of Eligible Individuals as They Return to Normal Operations (issued November 2021): Policy and operational strategy "punchlist" states can use during unwinding on eligibility, coverage and operations..



2. Coordinate with government partners, including the marketplace

- Coordinate with state, Tribal and federal government partners in a "whole of government approach" as states develop plans, create and communicate consumer messaging, and establish continuity processes.
- Key resources include:
 - Medicaid and CHIP Continuous Enrollment Unwinding: A Communications Toolkit (issued March 2022): Describes various touchpoints states can leverage when trying to reach people with Medicaid and CHIP.
 - Promoting Continuity of Coverage and Distributing Eligibility and Enrollment Workload in Medicaid, the Children's
 Health Insurance Program (CHIP), and Basic Health Program (BHP) Upon Conclusion of the COVID-19 Public Health
 Emergency (State Health Official Letter #22-001, issued March 2022): Provides guidance to states on facilitating
 coverage transitions for individuals who become eligible for Marketplace coverage and strategies to leverage SNAP data
 and processes to support streamlined eligibility and enrollment.
 - Strategic Approaches to Support State Fair Hearings as States Resume Normal Eligibility and Enrollment Operations After the COVID-19 PHE (issued April 2022): Describes how regular engagement with internal stakeholders such as including sister state agencies and ombudsman offices, can support the state's fair hearing process.
 - Coordination of Eligibility and Enrollment between Medicaid, CHIP and the Federally Facilitated Marketplace (issued July 2016): Outlines federal coordination of eligibility and enrollment rules among insurance affordability programs.
 - Understanding the Consumer Experience in Transfers from the State Medicaid/CHIP Agency to the Federally-Facilitated Marketplace (issued October 2016): Provides state tools for effective consumer communication.
 - **Sample Account Transfer Notice (issued February 2022)**: Updated sample account transfer notice language to account for February 2022 FFM update directing all consumers to start a new application.
 - Strategies for SBMs to Improve Medicaid to Marketplace Coordination and Maximize Enrollee Transitions at the End of the Continuous Enrollment Requirement (issued March 2022): Outlines how SBM's can engage with Medicaid and CHIP agencies to facilitate seamless coverage transitions.



3. Implement and strengthen automated processes

- Assess current operations to identify opportunities to increase automation and reduce manual processes, including through strategies like ex parte renewals, increasing methods for no touch case processing like telephonic and online applications and renewals, and automated beneficiary communications like IVR messaging.
- Key resources include:
 - Strategies States and the U.S. Territories can Adopt to Maintain Coverage of Eligible Individuals as They Return to Normal Operations (issued November 2021): Provides policy and operational strategies states can implement to strengthen renewal processes and support unwinding activities.
 - State Health Official Letter #22-001 (issued March 2022): Provides new flexibilities for states under section 1902(e)(14)(A) waivers to facilitate ex parte renewals and highlights strategies to mitigate churn through greater automation.
 - Connecting Kids to Coverage: State Outreach, Enrollment and Retention Strategies (issued November 2021): Shares information, including state spotlights, on how to use technology to make enrollment and renewal easier for families and states.
 - Achieving Real Time Eligibility Determinations (issued June 2015): Provides guidance and information to states on the regulatory framework and system/technology investments that allow for real time eligibility determinations.



4. Engage system vendors to identify changes, start planning, and perform robust testing

- Work closely with eligibility system vendors to plan for unwinding, meeting as early as
 possible to identify, document and prioritize system changes needed and plan for end-to-end
 testing of any new functionalities needed.
- Key resource includes:
 - Updated Medicaid Information Technology Systems Guidance (issued April 2022):

 Describes new Streamlined Modular Certification (SMC) process for Medicaid IT systems projects, including conditions for enhanced federal match for eligibility system design, build and operation, targeted outcomes, metrics, and acceptable documentation needed to confirm production-ready status. States and vendors should refer to and incorporate the SMC elements as they plan, test, and implement unwinding-related system changes.



5. Establish a renewal redistribution plan

- Determine how renewals and other eligibility actions will be distributed across the 12-month unwinding period in a manner that mitigates churn, accounts for workforce and systems capacity limitations, and establishes a sustainable renewal schedule for future years, with no more than the recommended 1/9 of total caseload of Medicaid and CHIP renewals in a given month.
- Key resources include:
 - State Renewal Distribution Reporting Form (issued March 2022): Reporting form for states to submit renewal distribution plans to CMS in advance of unwinding, including the proposed plan for prioritizing renewals over the unwinding period, strategies the state is considering or has adopted to mitigate against inappropriate coverage loss, and plans to mitigate the volume of fair hearings during the unwinding period.
 - State Health Official Letter #22-001 (issued March 2022): Provides guidelines for states' prioritization of renewals during the 12-month unwinding period and expands on prior guidance to offer strategies states should take to restore routine operations when PHE ends.
 - Medicaid and CHIP Unwinding Planning Efforts Summary of Best & Promising State Practices from CMS/State Discussions (issued April 2022): Summarizes state best practices to prioritize and distribute renewals from a series of CMS calls with state Medicaid agency leadership from each state, DC, and four U.S. territories to discuss state plans for unwinding.



6. Engage community partners, health plans, and the provider community

- Engage and coordinate with community partners, health plans/managed care organizations (MCOs), and providers including Indian health care providers to develop and implement beneficiary outreach and communication strategies for unwinding.
- Key resources include:
 - Medicaid and CHIP Continuous Enrollment Unwinding: A Communications Toolkit (issued March 2022): Provides social media and key messages states may use to help inform people with Medicaid and CHIP about steps they need to take to renew coverage.
 - State Health Official Letter #22-001 (issued March 2022): Provides a new strategy states can use under temporary 1902(e)(14)(A) waiver to partner with MCOs to update beneficiary contact information during unwinding and outlines strategies to partner with MCOs and other stakeholders on outreach.
 - Medicaid and CHIP Unwinding Planning Efforts: Summary of Best & Promising State Practices from CMS/State Discussions (issued April 2022): Provides examples of outreach and beneficiary communication strategies for unwinding.
 - Overview of Strategic Approach to Engaging Managed Care Plans to Maximize Continuity of Coverage as States Resume Normal Eligibility and Enrollment Operations (updated March 2022): Offers guidance on four strategies to work with MCOs to obtain updated contact information and support renewals and transitions to Marketplace coverage.
 - Medicaid and CHIP Coverage Learning Collaborative: Ensuring Continuity of Coverage and Preventing Inappropriate Terminations for Eligible Medicaid and CHIP Beneficiaries: Part 2 (issued August 2021): Includes examples of how states have partnered with MCOs and enrollment assisters to prevent inappropriate terminations.



6. Engage community partners, health plans, and the provider community

Key Resources (Cont'd):

- Strategies States and the U.S. Territories can Adopt to Maintain Coverage of Eligible Individuals as They Return to Normal Operations (issued November 2021): Provides policy and operational strategies states can use to minimize returned mail and maintain continuous coverage, including working with MCOs (see pp. 5–6).
- Connecting Kids to Coverage: State Outreach, Enrollment and Retention Strategies (issued November 2021): Shares information on how states can form strategic partnerships to support outreach, enrollment, and retention efforts (see pp. 2–4).
- Strategic Approaches to Support State Fair Hearings as States Resume Normal Eligibility and Enrollment Operations After the COVID-19 PHE (issued April 2022): Describes how regular engagement with external stakeholders such as legal services providers, health care providers, and social and community service organizations, can support the state's fair hearing process (see slide 12).
- Partner with Connecting Kids to Coverage (CKC) Grantees, including AI/AN Grantees:
 Provides list of all CKC grantees, who are trained and experienced in assisting families with applications and renewals.



7. Obtain updated contact information

- Use multiple strategies to obtain updated beneficiary contact information to mitigate coverage losses at renewals, including: managing returned mail, partnering with health plans, providers (including Indian health care providers), using multiple modalities to reach individuals (e.g., mail, email, text), managing account transfers to FFM/SBMs, and maintaining beneficiary contact, including through trusted stakeholders.
- Key resources include:
 - State Health Official Letter #22-001 (issued March 2022): Provides a new strategy states can use under a temporary 1902(e)(14)(A) waiver to partner with MCOs to update beneficiary contact information during unwinding and outlines high-level guidance for contacting beneficiaries.
 - Medicaid and CHIP Unwinding Planning Efforts: Summary of Best & Promising State Practices from CMS/State
 Discussions (issued April 2022): Provides outreach and beneficiary communication strategies for state unwinding.
 - Overview of Strategic Approach to Engaging Managed Care Plans to Maximize Continuity of Coverage as States
 Resume Normal Eligibility and Enrollment Operations (updated March 2022): Offers guidance on partnering with
 plans to obtain and update beneficiary contact information.
 - Medicaid and CHIP Coverage Learning Collaborative: Ensuring Continuity of Coverage and Preventing Inappropriate Terminations for Eligible Medicaid and CHIP Beneficiaries: Part 2 (issued August 2021): Provides examples for states to maintain regular contact with beneficiaries and update mailing addresses, including through partners. Also provides information on state requirements and examples for responding to returned mail and leveraging available data for mailing address updates.
 - Strategies States and the U.S. Territories can Adopt to Maintain Coverage of Eligible Individuals as They Return to Normal Operations (issued November 2021): Provides policy and operational strategies states can use to minimize returned mail and maintain continuous coverage, including working with MCOs.



8. Launch effective communication strategies, including consumer outreach and revised notices

- Invest in communication strategies to launch outreach campaigns and revise beneficiary communication materials and messaging, including notices, so beneficiaries know what to expect and what is needed to maintain coverage during unwinding.
- Key resources include:
 - Medicaid and CHIP Continuous Enrollment Unwinding: A Communications Toolkit (issued March 2022): Provides social media, key messages, and strategies states can use to help inform people with Medicaid and CHIP about steps they need to take to renew coverage.
 - All State Medicaid and CHIP Call Slide Deck (issued March 15, 2022): Provides communication strategies to reach enrollees.
 - Connecting Kids to Coverage: State Outreach, Enrollment and Retention Strategies (issued November 2021): Shares information, including state spotlights, on how states can invest in communications to include messaging to encourage coverage and modalities for outreach.
 - Strategies States and the U.S. Territories can Adopt to Maintain Coverage of Eligible Individuals as They Return to Normal Operations (issued November 2021): Provides a checklist states can use to improve eligibility notices, conduct intensive outreach, provide robust consumer assistance, and communicate effectively with individuals who have limited English proficiency or who are living with a disability.



9. Assess workforce capacity and conduct training

- Assess eligibility, enrollment, and fair hearings workforce capacity and implement strategies
 to ensure adequate staffing and sufficient training targeting hiring, redistributing staff,
 training staff on changing policies, and automating processes to alleviate workforce burden
 are strategies highlighted for state consideration.
- Key resources include:
 - Strategies States and the U.S. Territories can Adopt to Maintain Coverage of Eligible Individuals as They Return to Normal Operations (issued November 2021): Provides states with a checklist of policy and operational strategies to address potential strains on the state's eligibility and enrollment workforce.
 - Medicaid and CHIP Unwinding Planning Efforts: Summary of Best & Promising State Practices from CMS/State Discussions (issued April 2022): Provides examples of promising practices states are taking to address workforce challenges during unwinding from a series of CMS calls with state Medicaid agency leadership.
 - State Medicaid and CHIP Telework Playbook (issued June 2020): Provides information for states regarding accelerating the adoption and improvement of telework practices.
 - Strategic Approaches to Support State Fair Hearings as States Resume Normal Eligibility and Enrollment Operations After the COVID-19 PHE (issued April 2022): Provides states with a process to assess fair hearing process and capacity and strategies for strategic redeployment of state resources to address capacity issues.



10. Implement a robust monitoring strategy, including timely reporting to CMS

- Develop a comprehensive monitoring strategy and put in place state level monitoring infrastructure, and procedures to extract and submit timely data to CMS on the progress of eligibility and enrollment actions and the disposition of renewals.
- Key resources include:
 - Unwinding Data Report (issued March 2022): Excel workbook to be used as a planning tool for states' reporting.
 - Unwinding Data Specifications (Issued March 2022): Provides an explanation of reporting requirements, including detailed definitions of each metric.
 - Medicaid and CHIP Learning Collaborative Webinar: Medicaid and Children's Health Insurance Program (CHIP) Eligibility and Enrollment Data Reporting & Submission (webinar) and (presentation) (April 2022): Outlines the eligibility and enrollment unwinding data submission requirements, process and high-level summary of report requirements.
 - Strategies States and the U.S. Territories can Adopt to Maintain Coverage of Eligible Individuals as They Return to Normal Operations (issued November 2021): Provides a checklist of operational strategies states can implement to identify processing backlogs, diagnose workforce issues, and gather critical data to inform corrective actions



Questions