

Centers for Medicare & Medicaid Services
Medicaid and CHIP Renewals Webinar Focused on Reaching Special Populations:
Reaching Aging & Disability Populations
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Webinar recording:

https://cms.zoomgov.com/rec/share/TemiRyNC7qrKLury98Ucve_0GVdf7kcRT_IH94L5SvLDvWzRZhbUtKqMFb13Buvz.DFivyd0hSOE9Essy?startTime=1692298943000

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Tasha Bradley: *[not recorded]* Hello, everyone. Thank you for joining us today. We will give everyone a minute to join the webinar before we get started. I think it's starting to slow down so we will get started and start the recording.

Hello and welcome! My name is Tasha Bradley, and I am the Senior Technical Advisor in the Partner Relations Group in the Office of Communications at CMS. Today, we will have ASL interpreters to assist you during today's webinar. Please click the interpretation button down at the bottom of your screen, and then click on ASL interpretation to access that service.

Thank you so much for joining us today for our stakeholder webinar on Medicaid Children's Health Insurance Program, also known as CHIP, renewals focused on partners and stakeholders who work with older adults and people with disabilities. As you may know, states have recently restarted their regular Medicaid renewals now that pandemic-era protections for Medicaid coverage have ended. Between now and mid-2024, everyone with health care coverage through Medicaid or CHIP will renew their coverage. If an individual is no longer eligible for Medicaid or CHIP, they can transition to another form of health coverage such as the Health Insurance Marketplace or employer-sponsored coverage.

This summer, HHS and CMS are hosting webinars focused on providing partners with strategies to share information with diverse communities and audiences about Medicaid and CHIP renewals and how to help people retain health insurance coverage.

Everyone should be able to see today's agenda on our screen. First, we will hear from CMS and the Administration for Community Living to provide some opening remarks on why it is important to make sure the aging and disability communities are aware of Medicaid and CHIP renewals. We will hear from Daniel Tsai, Deputy Administrator and Director of the Center for Medicaid and CHIP Services at CMS. We'll also hear from Alison Barkoff, Senior Official performing the duties of the Administrator and the Assistant Secretary for Aging. Second, we will have the training portion of the webinar, where we will walk through a set of slides that you all can use in your outreach and education work in your communities. That presentation will be given by Stefanie Costello, the Director of the Partner Relations Group in CMS. Third, we will walk through the new disability fact sheet that has important information Medicaid and CHIP enrollees need to know and strategies for reaching out to people with disabilities. Fourth, we will hear from Elizabeth Edwards, who is a Senior Attorney at the National Health Law Program,

who will share some best practices for reaching out to older adults and people with disabilities. Lastly, we will have time to answer some questions before we close out today's call.

Before we begin today's training, I wanted to share a few housekeeping items. The webinar today is being recorded. The recording, transcript, and slides will be available on our Medicaid and CHIP Renewals Outreach and Educational Resources webpage at [Medicaid.gov/unwinding](https://www.cms.gov/unwinding). The link for that web page will also be posted in the chat. Also, while members of the press are welcome to attend the call, please note that all press or media questions should be submitted using our Media Inquiries Form, which may be found at www.cms.gov/newsroom/media-inquiries, and that will also be posted in the chat. All participants are muted. Closed captioning is available via the link shared in the chat by our Zoom moderator, and again, ASL interpretation is available using the world link at the bottom of the screen. As I mentioned, we will have time to answer a few questions today. You can submit your questions using the Q&A function from the menu below. Questions that we do not have time to answer today will be used to help inform topics covered on future calls. With that, I'd now like to turn it over to Daniel Tsai, Deputy Administrator and Director of the Center for Medicaid and CHIP Services at CMS. Dan?

Daniel Tsai: Thanks Tasha, and thanks everybody for joining this call with us. I'm really pleased to be here along with my colleague, Alison, who leads ACL we are closely partnered with, as well as some of our external partners as well. I just wanted to say a few things at the outset about how important this topic is overall and in particular [Inaudible].

Clearly, Medicaid Unwinding, and I think if you're on this you're probably deeply familiar with it but for folks, in case—during the pandemic—during the PHE, federal law required that states maintained everybody enrolled in the Medicaid program without disenrolling anybody. So, we saw the very important strong impact of continuous coverage in enrollment for our Medicaid and our safety net programs over the past three years, and we're at about 94 million people enrolled in the program.

With the end of the PHE, states have 12 to 14 months to restart and conduct eligibility renewals for the entire population. We've been preparing substantially, and we're now a few months in with states having started at various points. As an administration, our absolute focus and commitment across the board, and I'll speak to aging and disability also, is to make sure that people maintain health care coverage. For many people, that will be folks still eligible for Medicaid, retaining Medicaid and making it successfully through the renewal process and not losing coverage. For broader populations, we also know that there are going to be many people for whom Medicaid was an incredible lifeline during the pandemic but they're no longer eligible. We want to make sure they're getting over to other forms of coverage—Marketplace, employer-sponsored coverage. Some folks will be aging into Medicare and the like, and we are both aggressively monitoring the data, working in partnership in states, and also conducting our oversight responsibilities very seriously. We're not only under the hood with each state, making sure that each state's Medicaid agency is following all applicable federal rules so that everyone enrolled in the program regardless of where people live in the country have the due process they're entitled to, and really every shot at maintaining eligibility.

We have both partnered with states and taken clear action in states where we've identified, for a range of reasons, if a particular set of rules around how states have to conduct Medicaid renewals have not been followed. Those states have been required to pause procedural terminations to hold enrollees harmless by reinstating people until they're able to fix whatever issue and restart the process. That is really important across the board. I would say in particular to our aging and disability communities, whereas some of our populations, we historically have seen and know there will be a lot of legitimate kind of movement and transitions for coverage. People are sometimes eligible for Medicaid, their income changes, situation changes, they're eligible for something else. For many people in our aging and disability communities, it's not like year-to-year, situations are changing. If you have someone in one of our Medicaid home and community-based service waivers, those are not populations for whom we expect a huge amount of changes in situations, and Medicaid is the only payor in many instances that is covering the full ranges of home and community-based services, long-term care, etc. So, the importance of eligible people maintaining Medicaid coverage is incredibly important for this population, for our community here.

We're grateful to be partnering very closely with Alison and our ACL team and the states, really to help make sure that we keep eligible people enrolled. And some of the many flexibilities and policy options we have put on the table for states. And strongly urge the states to take up all help to make and simplify the eligibility process, including a range of really unique policy options and strategies we strongly urge that allow states to take. For example, self-attestation in assets and other things. Things that are incredibly important but often cumbersome to get through for our community here, all of which will help really keep eligible people enrolled as we go through this.

I could say a lot more. I hope the bottom-line message is this is a huge priority. It is the biggest policy operational thing of anything we've got going on in the Medicaid space and from a health coverage standpoint. It's an all-hands-on-deck effort. We need your help also, in making sure that our individuals, enrollees, families, consumers, providers, others, are fully aware of what's happening, get the assistance that they need, update contact information, respond to renewals. Creative ways of engaging both providers, health plans, advocates, the community to help keep people covered, all of that stuff. You should know, I reaffirm again, we're both partnering with states and taking very concrete, rapid action when we find individual programs are not following the federal rules as required to make sure everyone has every shot of maintaining coverage. So, I'm actually going to turn it to Alison now, who leads ACL. Our teams together have been working really really closely on this, and I hope it's apparent how much we care about this topic and how important it is. With that, Alison?

Alison Barkoff: Thanks so much, Dan. As Dan mentioned, I'm Alison Barkoff from the Administration for Community Living. I just want to take a few minutes to talk briefly about how ACL and our aging and disability networks can be a partner with all of you. For those of you who aren't familiar with ACL, our mission is to ensure that all people have the opportunity to live and fully participate in their communities, regardless of age, regardless of disability, and regardless of level of support need. We do that by funding a network of community-based organizations in literally every single state and virtually every community. Those organizations provide a range of services—information and referral, legal assistance, in-home supports, nutrition, and that includes connecting people to Medicaid.

The aging and disability networks are truly trusted messengers to the disability and aging communities. As Dan mentioned, Medicaid is critical to community living. Not only does Medicaid provide important health care services, but for many people with disabilities and older adults, Medicaid provides the critical home and community-based services that make community living possible. So, it certainly is a front burner issue for our community, and older adults and people with disabilities are at a particularly high rate of losing Medicaid in the redetermination process if we do not, with intentionality, provide support and information. So that's why, as Dan mentioned, ACL has made it really a top priority to work with CMS, to work with stakeholders and to call our aging and disability networks to action on really preventing anyone from losing Medicaid. I do want to thank Dan and his team for their partnership and commitment and intentional outreach to communities, including the aging and disability communities. I really want to thank everyone who is on this call for everything you are doing.

Let me just say, I hope each of you think of ACL's aging and disability networks as critical partners in everything that you're doing. Our networks can really help make sure that people don't lose coverage by educating people and helping them complete paperwork. Helping them understand their rights and helping them navigate health insurance options if they are no longer eligible. We have seen that education and outreach is critical because most people do not know that if you lose Medicaid coverage, you have a right to appeal the denial of coverage. That's just one example.

I want to just provide a couple ways that ACL's networks can partner with each of you to reach and work with older adults and people with disabilities. I want to mention that we have a web page on [ACL.gov](https://acl.gov) on our website. At the top of our page, we have a banner about Medicaid redeterminations, and all of the materials that I'm mentioning are available on our website. And we'll also work with CMS to share it with this group after the call.

For those of you who are working with older adults, we have our state units on aging, our area agencies on aging, our aging and disability resource centers, our legal services, and our long-term care ombudsman—all of which are funded under the Older Americans Act and can help people with both updating information for Medicaid eligibility, as well as appeals. They can also help people connect to other resources when they really need technical knowledge and expertise. Things like signing up for Medicare if they reached age 65 and didn't sign up when they first became eligible because they had Medicaid. Things like dealing with Medicare Advantage Plans if they are no longer dually eligible or helping connect people to the State Health Insurance Assistance Programs and the Marketplace.

I'll just mention that the SHIP program is a national program that can help people with one-on-one assistance—really intense counseling and education to anyone who is a Medicare beneficiary of any age. So, that includes Medicare-eligible people with disabilities and help them make informed decisions about health care and other benefits. Our benefit enrollment centers can also connect people who are eligible for Medicare or near eligible for Medicare with insurance and other benefits. We have an easy place to connect with our networks. We have a national information and referral line called the elder care locator, eldercarelocator.acl.gov. We'll put that

in the chat. You can easily contact them, and they can connect you with any of our aging networks in your own community.

For people with disabilities, we have a similar national information and referral hotline called the Disability Information and Access Line, or DIAL. It's at acl.gov/dial. Similarly, they can connect you with your disability networks in your own communities. Just to give an example or two, our Centers for Independent Living, which are in every community, can assist people with applications, with exploring health care options, with appeals. Our legal network, the Protection and Advocacy Agencies, can provide legal assistance, including assistance with appeals. We also have outreach and education that's happening from our networks to particular populations like the State Developmental Disabilities Councils to people with intellectual and developmental disabilities. Again, I want to emphasize all of our resources, including our SHIP programs, support people of any age who are dually eligible or eligible for Medicare. We've also put together several plain language blogs explaining how our aging and disability networks can help and partner, and we have put out a call to action to literally every one of our aging and disability networks, really emphasizing the need for them to front burner this issue. All of these materials, again, are on ACL's website at [ACL.gov](https://acl.gov). So, I just want to say thank you again for all you are doing in the stakeholder community. Thank you to CMS for your partnership, and ACL and our networks are here to partner and help. I'll now turn it over to Stefanie Costello, who is the Director of the Partner Relations Group in CMS. Stefanie?

Stefanie Costello: Thank you so much, Alison, and thank you Dan for your remarks and setting how important this is for this community. Some of the things you both touched on, I'll be going over in just a few minutes with our train the trainer slides, but we're excited to get right into it. We're going to share the slides now. For these slides, before we get into the content, I'm going to provide some framing for the training today, and why this information is important to get to your communities and how you can use it—the materials—as we walk through them today in order for you to train other organizations and people enrolled in Medicaid and CHIP. Next slide.

The slides I'm going to talk through in just a moment—sorry, go back one. Perfect. We know that you are a trusted voice in the community, in your communities, and that Medicaid and CHIP have been a lifeline for many families during the pandemic, and states are now checking to see if a person is enrolled in their Medicaid and CHIP programs. They're checking to see if they still qualify. We know that you're working with or serving people covered by Medicaid and CHIP, and we want to make sure that you all have the information you need to share with your partners and colleagues, and other people in your community. So, as I said, I'm going to go through a few background slides, and these slides, once I get into them, you'll see that we'll give the background first and get into the train the trainer deck, which are the ones that will be posted for you to be able to share with your organization. Next slide.

As a background, during COVID, people could keep their Medicaid coverage so they wouldn't be at risk for losing care in the middle of the pandemic. Prior to COVID, states engaged in a regular renewal process, with people coming on and off Medicaid regularly. Whether people were coming off because of administrative challenges or changes in life circumstances that made them eligible for other types of coverage. Now, this process is resuming for the first time in three years. Next slide.

Our goal for today when you leave this training is to become somewhat of a local expert in your community so that you can educate your neighbors, friends, family members, co-workers, and other community organizations, and people with Medicaid and CHIP, about the actions that people enrolled in these programs need to take. So, the four key takeaways today is, first to understand why this information is important, and the impact that Medicaid and CHIP renewals will have on people in your community. Two, learn about the steps that someone needs to take to renew Medicaid and CHIP coverage. Three, review other health insurance options for people who are no longer eligible for Medicaid or CHIP. And four, understand your call to action, and how you can help people with Medicaid or CHIP keep their health insurance coverage. Next slide.

So why is this important today? People enrolled in Medicaid and CHIP need to take action now or they could lose their health insurance coverage. And many people enrolled in Medicaid and CHIP do not know they need to take action, and they don't know what steps they need to take to keep their coverage. Now, as I've said, y'all are a trusted voice in your community, and you have the ability to make sure that people receive the information they need to keep their Medicaid and CHIP coverage or find another health coverage option. Next slide.

This set of slides that I'm going to walk through has more information about what's happening right now with Medicaid and CHIP, and what people enrolled in these programs need to do to renew their coverage with the state Medicaid office. These states are posted as part of the train the trainer deck, and you can download these exact slides I'm going to go through, and the exact talking points I'm using and use those for your community. As you'll see, some of these slides are customizable to meet your state. Next slide.

To start off, we would like to talk about what Medicaid is. Medicaid provides health coverage to over 86 million Americans, which include low-income adults, children, pregnant women, elderly adults, and people with disabilities. Medicaid is also the single largest source of health coverage in the United States. Each state runs their own Medicaid program, and they all have different names. So, it might be called something else in your state. For example, the Medicaid program in Tennessee is called TennCare. Feel free to fill in the blanks of these slides with your own state and Medicaid program name so that it will resonate with your community. You can visit [Medicaid.gov/renewals](https://www.Medicaid.gov/renewals) to find more information about your state's Medicaid program. Next slide.

So, what is the Children's Health Insurance Program? Also known as CHIP. CHIP provides health coverage to over 7 million uninsured kids, uninsured and low-income families. Just like Medicaid, each state runs their own CHIP program, and they may have a different name. For example, the CHIP program in Georgia is called PeachCare. Again, you're free to fill in the blanks of this slide with your own state program so it resonates with your community. I'll say both for Medicaid and CHIP, there could be members in your community who don't know they're on Medicaid. They might say, "I'm on PeachCare, I'm on TennCare," so using your state's name in these slides when you're educating folks in your community is really important, so they know that this program, that we're talking to them, because they're enrolled in this program. Next slide.

We want folks in your community to know why this is happening. I know I went over it at the top for context for you, but we want you to be able to talk about it with your community. For that, we know that for the past three years, people on Medicaid and CHIP were not required to renew their coverage because of the COVID-19 pandemic. During this time, we paused renewals to ensure as many people as possible stayed covered during the pandemic. This was referred to as the continuous enrollment condition. The continuous enrollment condition ended on March 31, 2023, and states have now resumed the yearly process for Medicaid and CHIP eligibility renewals and are contacting people to determine if they're still eligible. Over the next 12 months, everyone with Medicaid and CHIP coverage will need to renew their coverage. This expiration of the continuous enrollment condition is the single largest health coverage transition event since the first open enrollment period of the Health Insurance Marketplace. Next slide.

As I mentioned, states are now contacting individuals to see if they're eligible for Medicaid or CHIP. If an individual is no longer eligible for Medicaid or CHIP, they can transition to another form of health insurance coverage, such as finding coverage at [HealthCare.gov](https://www.healthcare.gov), through Medicare, or employer-sponsored insurance coverage. Over the next 12 months, states will spread out renewals, which means not everyone will have their Medicaid and CHIP coverage renewed at the same time. This is very important. As y'all are individuals on the ground interacting with these people, you might have individuals in multiple different points in this renewal process because, again, states are taking 12 months and spreading their renewals out. Each state has a different renewal timeline, and that timeline can be found at [Medicaid.gov/unwinding](https://www.Medicaid.gov/unwinding) under the Planning Tools and Template section. We'll put that in the chat so it's easy for you to find. This slide can be customized, so you can put your state timeline right here. Next slide.

So, how is this going to impact my community? Over 15 million people are expected to lose Medicaid or CHIP coverage. That includes nearly 5.3 million children, and nearly 4.6 million people predicted to lose coverage identify as Latino, and 2.2 million identify as Black. People enrolled in Medicaid and CHIP need to take action now to renew their coverage if eligible. If found not eligible, people will be able to transition to the Health Insurance Marketplace or another form of coverage. We need partners like you to help make sure that people enrolled in Medicaid and CHIP complete the steps to renew coverage or know what options they need to take to find other health coverage options. Next slide.

So, what do people enrolled in Medicaid and CHIP have to do to renew their coverage? States will use information they already have to decide if people are still eligible for Medicaid or CHIP. If the state needs more information, they will send a renewal letter in the mail. We're asking people to check their mail to see if Medicaid or CHIP office has sent a renewal form. This may be the first time someone is renewing coverage, so we want to make sure people know what steps they need to take to renew their coverage. Especially if this is someone who is a first time on Medicaid in the past three years or they've just had a baby in the past two years and this is the only thing that they know is that they don't have to renew coverage, it's going to seem odd. They're not going to be looking out for anything in the mail to renew coverage, so we want to make sure that they are prepared, that they know this is coming. The Biden-Harris administration is committed to maximizing the number of people with affordable, high-quality coverage, and

we want to make sure that people stay covered, whether that's through Medicaid, Medicare, or the Marketplace or employer-sponsored coverage. Next slide.

The next couple slides I'm going to talk through, and this really gets to the point of an individual who might be at different points in the renewal process. As they come to you, they're going to have different instructions of what they need to do and what steps they need to take in order to retain some sort of coverage. The first set of folks that might come in are individuals who have not gotten anything from your state Medicaid or CHIP program. If you're speaking with and interacting with them, the two messages for those people, again, who have not received anything from their Medicaid or CHIP program, is first to update their contact information. Update their contact information with their state Medicaid or CHIP program, and this includes the current mailing address, phone number, and email. You can customize this slide with where they should go in your state to update their contact information. The second we're asking, is to check their mail. To open any mail from their state Medicaid or CHIP program. To be on the lookout. This letter will let them know if they need to complete a renewal form, to see if they're still eligible for Medicaid or CHIP. Next slide.

This is our messaging for those who have received a renewal form. If someone's received a renewal form from the state Medicaid or CHIP program, we need them to read the letter. They might need your help in helping to read the letter as well. Some of these letters can be quite long, and they might need help from you even if it's their first time or not. So, we really want y'all, as a trusted voice in your community, to be there and help folks read the entire letter. After reading the letter, they need to complete the renewal form. They need to fill it out and return it back to their state Medicaid or CHIP program right away to avoid a gap in coverage. They might need your help with that as well, so keep that in mind—reading the letter and helping to fill out the form. Now, we're also asking parents to still complete the renewal form as their kids may be eligible for Medicaid or CHIP even if they're not. So, this is really important. Parents should still complete the form just in case their kids are eligible for Medicaid or CHIP. Now, after completing the form and they've mailed it back, we want them to continue to look out in the mail because there's going to be a follow-up information from the state that they need to look out for. They will let people know if they're no longer eligible for Medicaid or CHIP and when their coverage will end. Next slide.

All right. So, if someone has lost their Medicaid and CHIP coverage, and Alison touched on this a little bit, we have some messages for them. The first one is look over the notice from the state to see why they lost Medicaid coverage. If your state ended the coverage because they did not have enough information they needed to complete the renewal, you can contact your state and provide the missing information, and you can find the state contact information at [Medicaid.gov/renewals](https://www.Medicaid.gov/renewals), or you can also enter your state's information into the slide as well. Now, if the state ended your coverage because they found that you were no longer eligible for the program, then you will need to find another option for coverage. Step two is appeal the decision or reapply for Medicaid or CHIP. If you think you're still eligible for Medicaid or CHIP and the state wrongfully ended your coverage, you can appeal the decision and you can ask the state to do a second review. If there's a change in your situation, such as an income change, you can reapply for Medicaid and CHIP at any time. Again, Medicaid and CHIP can be applied for at any time. If your coverage was terminated and you no longer are eligible in August—because

suppose you made too much money, your income was too high, and you lost your job and it comes around to November—you can reapply to Medicaid and CHIP because your income has changed. As you're working with folks, make sure they understand that they can reapply if there's a change in their situation such as the income change. Now, for these, they might also need your help in terms of looking at the appeal, making sure if they need to submit more information or reapplying. Next slide.

So, this is the next set of folks, the folks that are going to be removed from Medicaid and they're no longer eligible for it, and so we want to make sure they have some sort of coverage. The three coverage options we'll talk about today is—the first is Health Insurance Marketplace. You can customize this slide as well if you are in a state that runs their own marketplace, like California or New York. You can put your own state marketplace there. If you don't know if your state uses [HealthCare.gov](https://www.healthcare.gov), you can go to [HealthCare.gov](https://www.healthcare.gov) and enter your ZIP code, and if it keeps you on [HealthCare.gov](https://www.healthcare.gov), then you use it. If it routes you to your state's website, then your state runs their own marketplace, and you can put that URL in this slide.

What we want to let people know is that most people can find a plan for \$10 or less a month with financial help. This is really important. The laws changed in the past two years, so if you have an individual who might have gone into the Health Insurance Marketplace, say in 2019, and their plan was very expensive and they're saying, "I'm not gonna go in there. I've been in there and I can't afford it," let them know a new law has passed, and it's enabled most people to find a plan for \$10 or less a month. They might qualify for savings on a health plan that lowers their monthly cost. All these plans have the same benefits. They're going to cover your doctors' visits. They're going to cover your prescription drugs, emergency care, and more. So, take a look at [HealthCare.gov](https://www.healthcare.gov). We want everyone to go in there if they lose coverage and they need an option. Now, if they're over 65, then they can look at [Medicare.gov](https://www.medicare.gov). This is the same for all states. You don't need to customize [Medicare.gov](https://www.medicare.gov). If they've missed enrolling in Medicare, if they're over 65, they can enroll through a Special Enrollment Period that's going on right now, so they won't have a penalty. We want to make sure those over 65 can go to [Medicare.gov](https://www.medicare.gov).

Now finally, employer-sponsored coverage might be an option, so they can check with their employer to see. People can enroll in an employer plan outside of open enrollment if they recently lost Medicaid or CHIP. So, Marketplace, Medicare for those over 65, or check with your employer to see if they can get coverage. Next slide.

So now, what can you do to help people with Medicaid and CHIP in your community? We're calling on all states and members of Congress, health care industry, faith-based and other community organizations, advocacy coalitions, and other public and private partners, to do everything in their power to help people stay covered. This work is all-hands-on-deck and will continue to be. We urge our partners in the public and private sector to directly reach Medicaid enrollees and help them complete their renewals and help connect them to their coverage as appropriate.

On this slide, we've listed four ways that you can help. Number one, raise awareness. Make sure that you are educating the people you work with about Medicaid and CHIP renewals. Number two, share resources. I'm going to go through those in just a moment. We got a lot of them and a

lot of resources for you to share. Number three is let people know where they can go if they have questions or need assistance. This might be your organization. This might be another type of assistance, and we'll go through that on the next slide. Lastly, partner with organizations in your state, region, or community to reach people with Medicaid and CHIP coverage. Think about organizations that might not consider themselves Medicaid experts, maybe a food bank or a library, and work with them because they might be interacting with individuals who have Medicaid and CHIP. So, we appreciate your partnership in helping to make sure people remain connected to health coverage, and we're here to support our partners any way that we can throughout this Medicaid and CHIP renewal process. The next slide has the ability to customize this as well. Next slide.

This talks about where you can direct people who have questions. So, if they have questions about Medicaid and CHIP, they can go to their Medicaid and CHIP office. Please put your direct state Medicaid and CHIP URL and phone number here. For questions on the Health Insurance Marketplace, we have this part filled out with [HealthCare.gov](https://www.healthcare.gov) and how to “Find Local Help.” Local help are assisters and navigators who can help with the Health Insurance Marketplace application. If you have your own state-based marketplace, you can customize this part with your state-based information. Finally, for questions about enrolling in Medicare, you can visit [Medicare.gov](https://www.medicare.gov) or call 1-800-MEDICARE if you need help with enrollment. You can contact your local Social Security Administration field office by visiting www.ssa.gov/locator.

Now, I'm going to take just a few minutes to go through our materials. If you were to look at this slide deck, you're going to see some screen shots of materials, but I like to share my screen and just pull up the important ones. I'm going to switch places with Jill so I can share my screen. This is Medicaid.gov's website Unwinding. The two pieces, two main pages, I'm going to draw your attention to—the first is “Renew your Medicaid or CHIP Coverage.” If you open this up, this takes you to—scroll down just a little bit—a map of the United States. This will give you the information for your state. You can select your state here, click on your state here, or you can find it in the list. But it has the website for your state for Medicaid and it has the phone number for each state. If you're looking for state-specific information, this is where you go. Again, it's the very first link, “Renew your Medicaid or CHIP Coverage.”

Now, we're going to talk about outreach and education resources. So, once you open that, it's going to open this web page with lots of information. So, we have a toolkit available which has drop-in articles, fact sheets, postcards. This is available in English and Spanish, and pieces of it are available in five additional languages, so definitely check that out. We also have a toolkit for school-based and early education care settings, which was newly published on Friday. Y'all can check out that toolkit. And a couple slide decks. The slide deck you saw today—the one you saw me go through today with the talking points, you can download that directly here. These are the ones I used, and you can use this to educate folks in your community. We have an additional slide deck for outreach to families and children with Medicaid renewals. We also have social media. If you were to click on this hyperlink, it will actually download the graphic files for you to use. You can take those graphic files and then we give you the copy text for you to use on your own social media. The first set is about getting people ready, letting them know to update their contact information and check their mail. The second set is for those who already lost their Medicaid and they're looking to get additional health insurance through [HealthCare.gov](https://www.healthcare.gov). Then

unfortunately, we've heard about some frauds going on, so we have some social media messaging to combat that. We encourage you to take these, take the text, use your pictures, our pictures, your text. Just share our social media messages however you want to get the word out. We appreciate it.

Now, down in this section, we have our additional materials and resources. The first section, we broke this up into a couple different groups. This is helping people get ready to renew their Medicaid and CHIP. We have a fillable flier and a postcard. The general messaging here is a general flier. The fillable state-specific ones—I'm going to pop this open—actually allows you to put your state or your state name, TennCare will restart eligibility reviews. Then down here you can put the TennCare website and the TennCare number. You can put these anywhere where there might be a high traffic area for folks to look to see what they need to do to renew coverage. So, anything that's fillable, that's what that means. You can make it customizable for your state. The ones that's general messaging stays general.

The next section is helping people who have lost Medicaid or CHIP. The two I like to highlight is our Partner Tip Sheet. If you open this one up, this is great for someone who might be a front-line worker, who might be interacting with individuals with Medicaid or CHIP, and it gives them, essentially, talkers to work through and say, like, if someone comes to them, “what message do I give them about Medicaid renewals?” It's a lot of information. Well, these are three simple steps they can repeat to an individual. Again, same thing: update contact information, check your mail, fill out your renewal form and send it back. If they lost coverage, they might be able to find it through the Marketplace, and this is where you can provide additional resources for Marketplace coverage. The Health Care Fact Sheet is similar. You have your same three messages. You can print this out for folks who need additional coverage, and they can look for—reapply for Medicaid or CHIP if they still think they're eligible. They can go to the Health Insurance Marketplace or enter the Medicare SEP. This is another great talker or tip sheet to hold. We also have a Medicare SEP Fact Sheet, so for the aging population we have this. It's a great flier. Talks about the Medicare coverage option as a possibility. Simple steps for what they need to do to qualify for the Medicare SEP.

We also have outreach to special populations. So, in here, we have a brand-new material that was just posted this morning. This one is how to reach people with disabilities about Medicaid and CHIP renewals. It talks a little bit about level setting—what's going on, what resources might be specific to them. These are all four main messages that we want everyone to share. Updating their contact information, responding to a letter, the message about parents—making sure that they're applying even if they don't think they're eligible, and then considering other coverage options like at [HealthCare.gov](https://www.healthcare.gov). We also have the main great tip sheets I went through today that are perfect for this population. Then, we have some strategies that you can use to spread the word in your community. You can take some time to go through these strategies as well.

Then, finally, this is also where the recording will be once we have this recording posted and a transcript will be available here. Then, the last thing I want to pop open are these educational videos. You can put these—if you have like a closed-circuit TV in your office, you can put these on social media. We have a 30-second, 15-second and 6-second video in English and Spanish, and you can definitely take a look at those. I know I went through a lot. I went through it pretty

quick, but I know we have one more speaker, and I wanted to make sure that we had time to get through everybody. I believe I'm turning it over to Elizabeth.

Elizabeth Edwards: Thank you, Stefanie. If you can go to the next slide. I'm Elizabeth Edwards, Senior Attorney with the National Health Law Program. I'm a white woman with curly, short length brown hair. A little bit about the National Health Law program, for those of you who don't know, we're a national nonprofit that works with state-based advocates, and we do advocacy through litigation, education, and policy work. This slide is just an image of our three offices in DC, LA, and North Carolina, and contact information. But, if you go to the next slide, I'll get into the actual substance of the presentation.

I wanted to flag really quickly, I know we're talking about outreach and how to get to individuals, but I wanted to flag that we have to think about Unwinding that, like, all of these systems are working but it's just a matter of numbers. What we've seen when working with advocates, and there are a lot of systems that aren't working so well in states, so we've seen failure to provide notice. There's a lot of confusion out there, as Stefanie emphasized. People really need to read letters, but we acknowledge that the letters are quite confusing. I've seen some notices that I don't understand. Also, these renewal forms are very complex. For example, in some states, for categories that are related to disability, to renewal eligibility they have to complete like 40 pages of paperwork. They may often have to get quite a bit of information and documentation to provide the state sufficient information to continue their eligibility. So, it can be a lot of burdensome paperwork and people often don't understand from the letter exactly what they need to do. That can be a problem with the letter itself, but it's just also a very confusing and administratively burdensome process. We've also seen problems with lost paperwork, where people turn things in but still may lose eligibility because something happened. People may come to you or may be asking questions where they're really confused. They thought they followed the process, and it didn't work. Also, I've seen states where people are being terminated automatically after a deadline even though they may have called or otherwise sent in information. So, there's a lot of kind of problems out there and a lot of confusion. As Alison mentioned earlier in the presentation, people can appeal, and they should appeal when they've been terminated if they think they're still eligible. That can be quite burdensome for people as well, but they should be able to do it on their own. As Alison said, there's places that can help. Next slide, please.

Just a few more eligibility issues. I know we're running short on time. I think there was a question earlier in the chat about why not just automatically renew people for Medicaid. There are a lot of automatic renewals happening in Medicaid. It's commonly referred to as ex parte. For many people with disabilities, if their eligibility is based on their disability, they can't always successfully go through that automatic process, and of course that leads to paperwork and people being at risk for termination because they didn't turn in their paperwork. Also, seeing problems with people who may be eligible under an HCBS waiver that has different eligibility rules, and the state may not be applying those appropriately. These are things to look out for. I think Stefanie already went over the Medicare Special Enrollment Period. I think there's a lot of lack of awareness about the six months following Medicaid termination. People can still enroll in Medicare without the late enrollment penalty. Just a list of issues. Next, we're going to talk about some of the outreach issues. Next slide, please.

How can we help with successful renewals? As Stefanie mentioned, there's a real need for simple messaging and outreach. There has to be clarity that that's been a change. A lot of people have been getting letters throughout the Public Health Emergency that something is going on with their Medicaid and they may not have had to do anything to keep their Medicaid. So, really being clear that there has been a change and people need to take action. One of the things that we really push is that there are places of frequent contact where people can be talked to or otherwise have fliers. So, where people with disabilities have activities, going through HCBS providers who need to be aware that people may be losing coverage. Also, pharmacies are a great place to post fliers about how to get help if you've lost your Medicaid coverage, and other similar places where people would commonly try to use their Medicaid coverage and may discover they've lost it. The really key thing that we have found is that people need to know where they can go to get help. Alison went through a bunch of ways in which ACL partners have help available, but it's really key because people don't understand necessarily that they can get help and they often need help to complete this process. Next slide, please.

Some other pieces that are helpful to making renewals successful. As I said, making sure people know where help is available. One thing we've been pressing a lot on is how states are complying with the Americans with Disabilities Act, or the ADA. Call centers are a common point of interaction for enrollees trying to renew coverage. It's helpful to ask states about how are they treating reasonable accommodation? How are workers reading scripts, so they understand how to meet the needs of people with disabilities, what accommodations are provided, and how were workers trained to offer help? I think that's one of the biggest things, is to continue to make sure that people know that help is available rather than having people have to ask for help, which can often be a barrier for people with disabilities. One thing we want to define, too: does their state offer appointments, or do they force a person to wait a long time at a call center? There's ways you can sort of push to try to get assistance for people with disabilities in this sort of process. Next slide, please.

I just wanted to flag some of NHeLP's resources. We have an Unwinding page, which is posted on that slide. We have some disability-specific resources, but we also have a checklist for redeterminations or renewals. It goes through all the obligations that are the law for renewals and what's supposed to happen. We've also done some renewal tips of the day that people may find helpful, where we try to highlight some of the main issues. I also wanted to highlight that Justice in Aging has a Medicare tip sheet for people as well. So, I think that's everything I wanted to cover, and I wanted to make sure there was time for questions.

Hailey Gutzmer: Thank you, Elizabeth. Thank you to all the presenters today for the information that you shared. Now, we have a couple minutes to answer some of the questions that you all have submitted through the Q&A function. So, our first question. I saw a couple questions about if these slides or recording will be posted. Like Stefanie mentioned, the transcript and recording from this call will be posted to that outreach and educational resources page, which can be accessed from [Medicaid.gov/unwinding](https://www.Medicaid.gov/unwinding). We will be sending out an email notification once that transcript and recording are posted.

The next question we have is for Stefanie. Stefanie, I think you touched on this at some point during your presentation, but are there people available to help know what Marketplace plan will be best for a person if they are no longer eligible for Medicaid?

Stefanie Costello: Yes. So, if you go to [HealthCare.gov](https://www.healthcare.gov), scroll down and go to “Find Local Help” there. If you go to that site, it will show you a list of—enter your ZIP code there—and then it will give you a list of all the assisters and navigators. If you're looking for a navigator specifically, you can filter. You'll see it right above where you put the ZIP code. Filter navigators and it will pull up the navigators closest to you. State-based marketplaces have something similar on their website, so you can look up local help for your state-based marketplaces as well.

Hailey Gutzmer: Thank you, Stefanie. I've seen a couple questions about engaging health care providers and whether CMS has any resources that can help providers share this information. Stefanie, could you speak a little bit about what providers can do and some resources that might be helpful in those settings?

Stefanie Costello: Yes. We have one provider tip sheet right now. Full disclosure, we're working on another one that's going to be a little more robust about conversations that providers can have with their patients. That will be out soon, probably sometime in September. We do know providers are trusted voices, and so having these posters in a provider's office, having the tip sheet I talked about and the fact sheet for health care options at the front desk, like the person who is going to be interacting with the individual or for the provider to have as well is really important. We are partnering with lots of different provider organizations. The American Academy of Pediatrics has a toolkit that they released. We're working with lots of pharmacies—from the big chains that you know of all the way to smaller independent pharmacies, because we know pharmacists are trusted voices as well, and we want to make sure they have the information to give. So, it's definitely something we're working on, and we'll continue to do.

Hailey Gutzmer: Great. Thank you, Stefanie. This next question, I think a couple of our panelists may be able to jump in and answer, and I think some of the presentations also covered this. What are some examples of administrative challenges that may cause someone to lose their Medicaid coverage? I see Dan came off, so I'll pass it to him first.

Daniel Tsai: Generally, we call them procedural terminations. We are actually tracking that specific metric for every state, for every month. There are typically a few reasons for a procedural termination. The first is that someone simply didn't respond, and they might not have responded because they never got the mail. Maybe the address was outdated, things of that sort. That's something we've been highly engaged and concerned about, and it's part of why we really encourage in our messaging directly to individuals and families to update their contact information and to open the mail when they get that. The other thing I want to re-emphasize about this too, that we are seeing in many cases, a parent may no longer be eligible—in a household where there's a parent and kids, but in almost every state the eligibility level, income level for kids, is much higher than for parents and adults. So, in a household where the kids might still be eligible, but the parents, say, just went over the income threshold, we are seeing instances of where the parents are just not responding to the renewal form. They know they're no longer eligible. They have a different situation, but they don't realize that actually by not

returning the form, that becomes an administrative reason for why the kids lose coverage. That's a real concern to us. So, those are some of the reasons. There are also other reasons where folks have a change in income and need to provide some documentation or things of that sort and where that hasn't been fully completed. All those things are really important because we don't know at the end of that, how many of those individuals are actually no longer eligible and are transitioning or could transition to other highly affordable coverage versus individuals who are still eligible but aren't getting their coverage renewed. That latter situation is particularly concerning to us.

Hailey Gutzmer: Thank you, Dan. Unfortunately, that is all the time that we have for questions today. Questions that we did not get a chance to answer, we will review, and they will be used to help inform future discussions. With that, I will pass it back to Tasha Bradley to close out the call today.

Tasha Bradley: Thank you, Hailey. We hope that the webinar today was helpful and that you all leave this webinar feeling ready to share this information with your community. We really need your help in getting this information out to your networks and to people in your communities who are enrolled in Medicaid and CHIP. This is an all-hands-on-deck effort to make sure that people keep their health coverage, whether that's through Medicaid and CHIP or through another form of coverage, like the Health Insurance Marketplace. We appreciate your partnership in this effort, and we are here to support you all throughout this process.

As mentioned earlier, we are holding a series of webinars this summer focused on special populations. On this slide, you will see the upcoming webinars available in this series. You can register for these webinars using the same link that you used to register for today's webinar. We will have a webinar on August 24 at 3:00 Eastern Time focused on reaching rural populations, and we'll have another webinar on September 7 at 3:00 p.m. Eastern Time focused on reaching American Indian and Alaska Native populations. We also want to make sure you're aware of our monthly webinar series that provides stakeholders with information to prepare for Medicaid and CHIP renewals. On this slide, you'll see the date for our monthly webinars through the end of 2023. The link to register for these webinars will be posted in the chat. Just a note, the August, September, and October webinars are all on the fourth Wednesday of the month. The December 6 webinar will not be on the fourth Wednesday, but all of the webinars will be at 12:00 p.m. Eastern Time. Again, we appreciate your partnership and commitment to help ensure that people are connected to the best health coverage that they are eligible for. With that, I want to thank you all for attending today's webinar. We look forward to continuing to work alongside all of you and continuing to engage with you all during Medicaid Unwinding. Thank you, and this concludes our webinar for today. Thank you all for joining us. Goodbye.