Minnesota Health Care Programs: Plan to unwind continuous eligibility coverage

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Health Care Administration

January 2023
Maintenance of coverage in public health care programs

- March 2020: DHS stopped most annual eligibility renewals, other eligibility checks and most adverse action on enrollment

- Condition of enhanced federal funding through the Families First Coronavirus Response Act
Consolidated Appropriations Act, 2023

- Continuous coverage provisions untied from public health emergency.
- Continuous coverage ends March 31. Medicaid redeterminations may begin as early as April 1.
- States remain eligible for enhanced federal funding through 2023 if meet certain requirements.
- CMS continues to release guidance.
Renewal challenges: Workload issues

- More enrollees
- More effort to complete each renewal
- Fewer workers
- Inexperienced workers
Renewal challenges: Systems and economic impacts

- Currently no online, text or email abilities to manage eligibility
- Many workarounds in place
- Loss of coverage creates increases in uncompensated care throughout system
Renewal challenges: Health and well-being impacts

- Gaps in coverage create barriers to accessing:
  - COVID-19 vaccinations and treatment
  - Other immunizations
  - Preventive screening
  - Prescription drugs
  - Care to manage chronic conditions
  - Mental health and substance use disorder treatment
Unwind guiding principles

- Maintain coverage for all eligible enrollees without interruptions
- Comply with evolving federal guidance
- Minimize burden on the workforce to aid timely processing of renewals
WHAT’S NEXT FOR MN

Resumption of Medical Assistance and MinnesotaCare Renewals

• Minnesota will resume the renewal process, with some enhancements

Cohort-based model

• Twelve monthly cohorts of Medical Assistance renewals with the renewal month based on enrollees’ initial application date.
• The first monthly cohort will likely be July, which operationally has work beginning in March.
• MinnesotaCare renewals will occur Q4 2023

State support for counties

• We are collaborating with counties to resume processing.
• We are supporting counties via a 10-point plan, including renewal training, system support, and customizable assets and communications toolkits.
Where we’ve been/Where we’re heading

2020

- March: Families First Coronavirus Response Act enacted

2021 – 2022

- December: Initial CMS guidance issued
- 8 public health emergency extensions (11 since 2020)
- MN began preparing in early Jan ’21 with several start/stops based on extensions and CMS guidance

December: Consolidated Appropriations Act, 2023

DRAFT 2023

- April: Begin system processes for Medical Assistance enrollees in Cohort 1 (Notice about restarting renewals sent to enrollees in March

June 30: Deadline for workers to complete processing Medical Assistance Cohort 1

Mid-May: Renewal forms sent for Medical Assistance Cohort 1

DRAFT 2024

- Q4: MinnesotaCare cohort

June 2024: Resume normal operations

Medical Assistance Renewal Cohorts 2-12

Minnesota Department of Human Services | mn.gov/dhs
Our team will continue work across concurrent pillars of activities to successfully unwind continuous coverage:

1. **Program Policy & Training**
   - Update policy analysis & informational bulletins aligned with evolving CMS guidance
   - Conduct renewal training for workers
   - Collaborate with counties and tribes
   - Coordinate with MNsure
   - Provide daily support for counties & tribes
   - Continue renewal training

2. **Measures & Data**
   - Define goals & measures
   - Develop CMS reporting
   - Share files with MCOs
   - Share renewal date reports
   - Develop dashboards
   - Track progress on goals & measures
   - Submit monthly CMS report
   - Distribute monthly MCO reports
   - Maintain dashboards

3. **System Readiness**
   - Review system capacity & capability
   - Update configuration
   - Develop & execute systems testing plan & submit to CMS
   - Explore system support to increase auto-renew rates
   - Support readiness of counties & tribes
   - Coordinate with MNsure
   - Monitor system performance
   - Continue supporting counties & tribes
   - Resolve any system issues

January 2023
Pillars of the unwinding plan

Our team will continue work across concurrent pillars of activities to successfully unwind continuous coverage

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<th>Communications &amp; Outreach</th>
<th>5</th>
<th>Enrollee Support</th>
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<th>County/Tribal Support</th>
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| 4 | - Develop & launch enrollee communications and outreach  
   - Partner with managed care plans, navigators and other key stakeholders to amplify messaging and targeted outreach  
   - Develop toolkit & materials for counties, tribes, health plans, navigators, & community partners  
   - Develop crisis communication plan and targeted community outreach  
   - Maintain address & renewal campaigns  
   - Continue community outreach & interagency collaboration | 5 | - Explore strategies to obtain updated addresses  
   - Implement & launch texting capability  
   - Explore processing improvements  
   - Create renewal self-service option  
   - Support navigators  
   - Continue streamlining renewal processing | 6 | - Survey county/tribe readiness to resume renewals  
   - Develop & execute a support plan  
   - Provide training plan  
   - Provide venues to collaborate, seek feedback, & problem solve  
   - Provide State support to process mixed household renewals  
   - Provide dashboards  
   - Continue collaboration venues |

January 2023

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## County Support Plan

1. **Training opportunities** will be available for eligibility workers. This includes refresher courses on specific topics, renewal training and supported sessions in processing renewals, and live streams.

2. **Venues to collaborate** will continue to be held to discuss issues, seek feedback or communicate “just-in-time” eligibility information.
   - Health Care Eligibility Advisory Committee for MACCSA appointed county directors, manager and supervisors.
   - Health Care Eligibility Leadership meeting for all eligibility supervisors and managers.
   - Health Care Eligibility – Partner Information Exchange (HCE-PIX) for all eligibility workers and supervisors.
   - MA and MinnesotaCare roundtable with county and tribal humans services directors.

3. **ONEsource** (an online tool) will have a PHE unwind landing page so unwinding materials will be available for easy worker reference. It will include materials such as:
   - Procedures and system instructions
   - FAQ for eligibility workers on common unwinding questions that will be updated throughout the PHE unwind
   - Other resources like worker tips, timelines, examples of enrollee notices, etc.

4. **HealthQuest** (an online tool) will be available for lead county agency staff to submit case specific policy questions. Dedicated DHS policy staff will be assigned throughout the unwinding period to provide responses.

5. **Systems Support** will be available to help workers with any system issues. The Health Care Eligibility Systems Support (HCESS) will be available throughout the unwinding period to provide MMIS and METS support to workers.
### County Support Plan

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<td><strong>6.</strong></td>
<td><strong>Long Term Care (LTC) policy support</strong> for on specific policy topics pertaining to LTC eligibility (e.g., annuities, transfers, etc.).</td>
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<td><strong>7.</strong></td>
<td><strong>Unwinding dashboard</strong> will be created for county and tribal agencies to monitor and track progress on renewal processing. The dashboard will allow users to filter on various characteristics (e.g., age, gender, race ethnicity, etc.)</td>
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| **8.** | **Customizable assets and communications toolkits** for address and renewal campaigns.  
  - Customizable assets include social media posts, printed materials, digital ads.  
  - Communications toolkit includes website, email and newsletter text; phone script; and IVR or hold-message script. |
| **9.** | **Help with processing renewals.** DHS will process renewals of mixed household cases (i.e., some family members on MA and some on MinnesotaCare) throughout the unwinding period relieving counties of this work. |
| **10.** | **Staff Wellness & Recognition Program.** DHS will work with the vendor to potentially establish a Staff Wellness/Recognition program to help support workers who will be processing renewals during the PHE unwind. |
Communications

• Communications are critical to our unwind effort. We’ve designed a five-phase comprehensive roadmap:
  • Phase 1 – Address Update Campaign – LIVE
  • Phase 2 – Renewal Information – LIVE
  • Phase 3 – Notice of Resumption of Renewals
  • Phase 4 – Renewals Begin/Daily Operations
  • Phase 5 – Coverage Closures

• Phase 2 introduces a host of print and online materials to share important details with stakeholders
Proposals to ensure eligible Minnesotans keep coverage

- Reinvest a small portion of the billions received for continuous coverage to transition out of continuous coverage.
Ensure eligible Minnesotans keep coverage

- Give Minnesotans who have disabilities, are blind, or are 65 or older extra time to spend down assets to keep their coverage.
Ensure eligible Minnesotans keep coverage

- Provide additional funding to navigator organizations.
Ensure eligible Minnesotans keep coverage

- Add administrative resources to DHS to strengthen renewal support.
- Give the DHS commissioner flexibility to respond effectively.
Looking ahead

- Evolving guidance from CMS
- Assessing readiness within the state and county
- Continuing to launch new tools and resources
- Continuing to coordinate with CMS as they launch national communications campaigns
Questions?

For any questions, please reach out to Ann Bobst, HCA Legislative Director, ann.bobst@state.mn.us.