

PHE Unwinding Readiness for Health Centers: Preparing Medicaid Beneficiaries for Eligibility Determinations



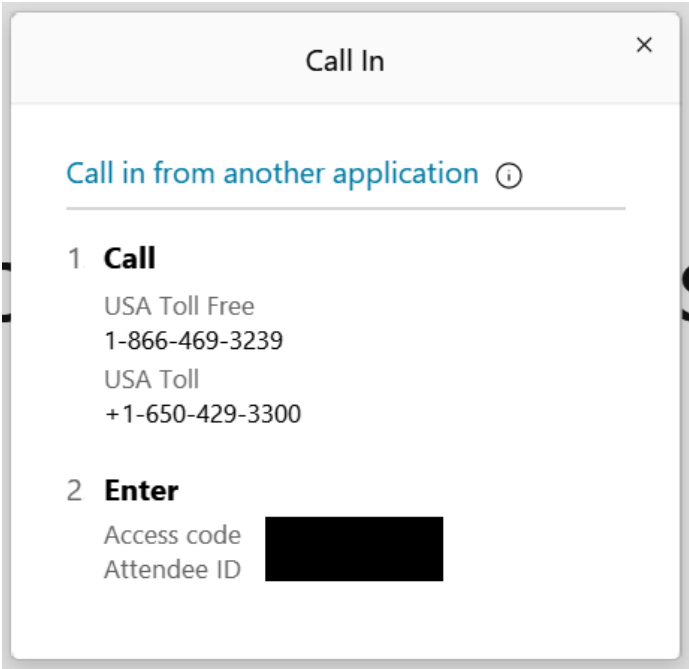
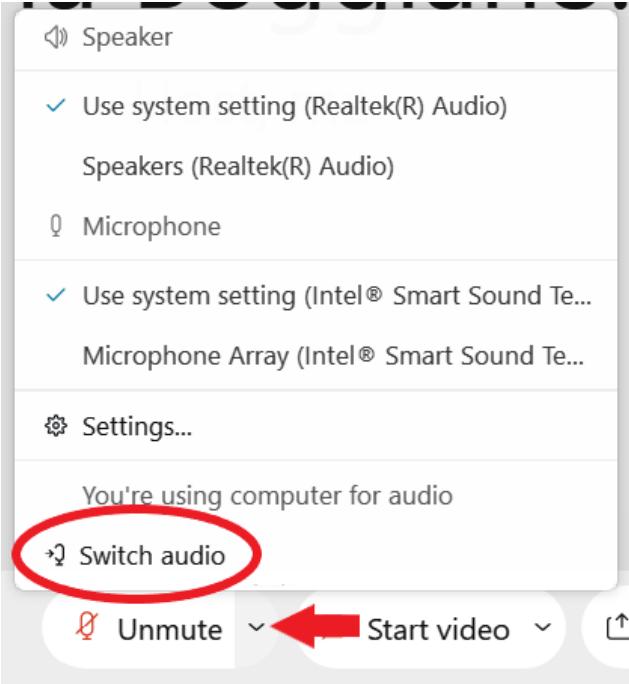
Welcome! Housekeeping

- Today's meeting is being recorded
- The recording and additional resources will be made available to all registrants.
- A copy of the slides will be sent from trainings@nachc.org after the event.
- After the webinar, you will be directed to an evaluation for this event. We value your feedback and encourage you to complete this short survey!

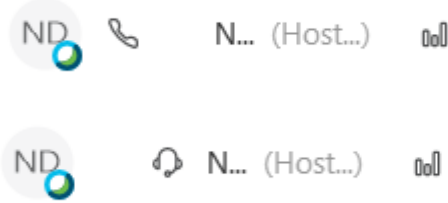
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Go to “Audio and Video” or click the arrow next to your unmute button and select “Switch audio” Follow the unique instructions on your screen.

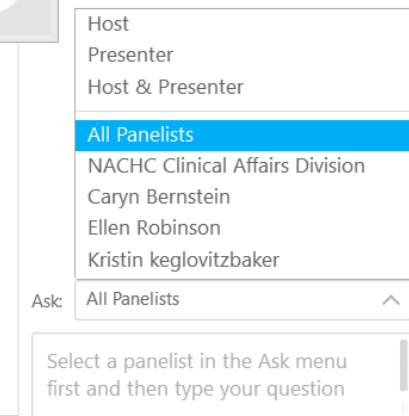
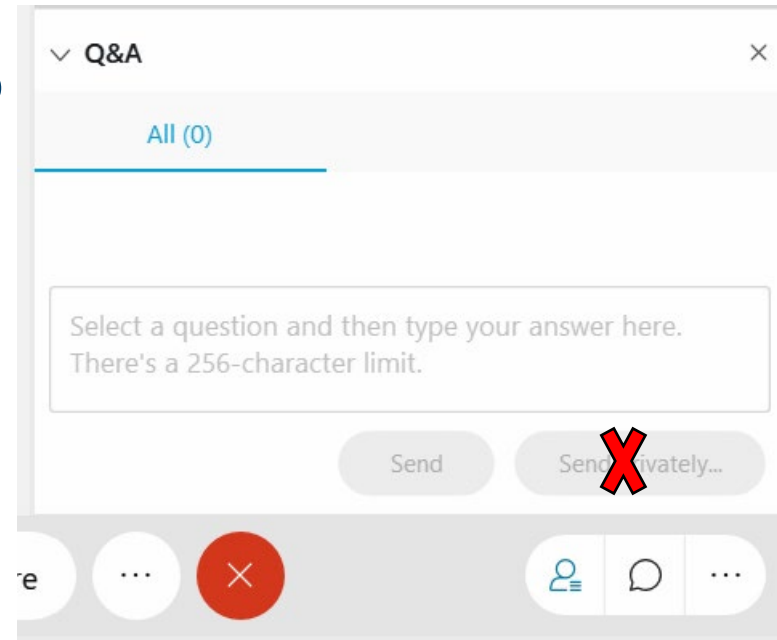


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ASKING QUESTIONS VIA Q&A BOX

1. **The Q&A Box feature** is available to ask questions or make comments anytime.
2. **Click the Q&A Box button** at the bottom of the WebEx window to open the Q&A box on the bottom righthand side of the window.
3. **Select ASK ALL PANELISTS**
4. **Type your question and Click “SEND”**
- Do not click “send privately”





PHE Unwinding Readiness for Health Centers: Preparing Medicaid Beneficiaries for Eligibility Determinations

Wednesday, June 29, 1:00 PM ET



THE NACHC MISSION

America's Voice for Community Health Care

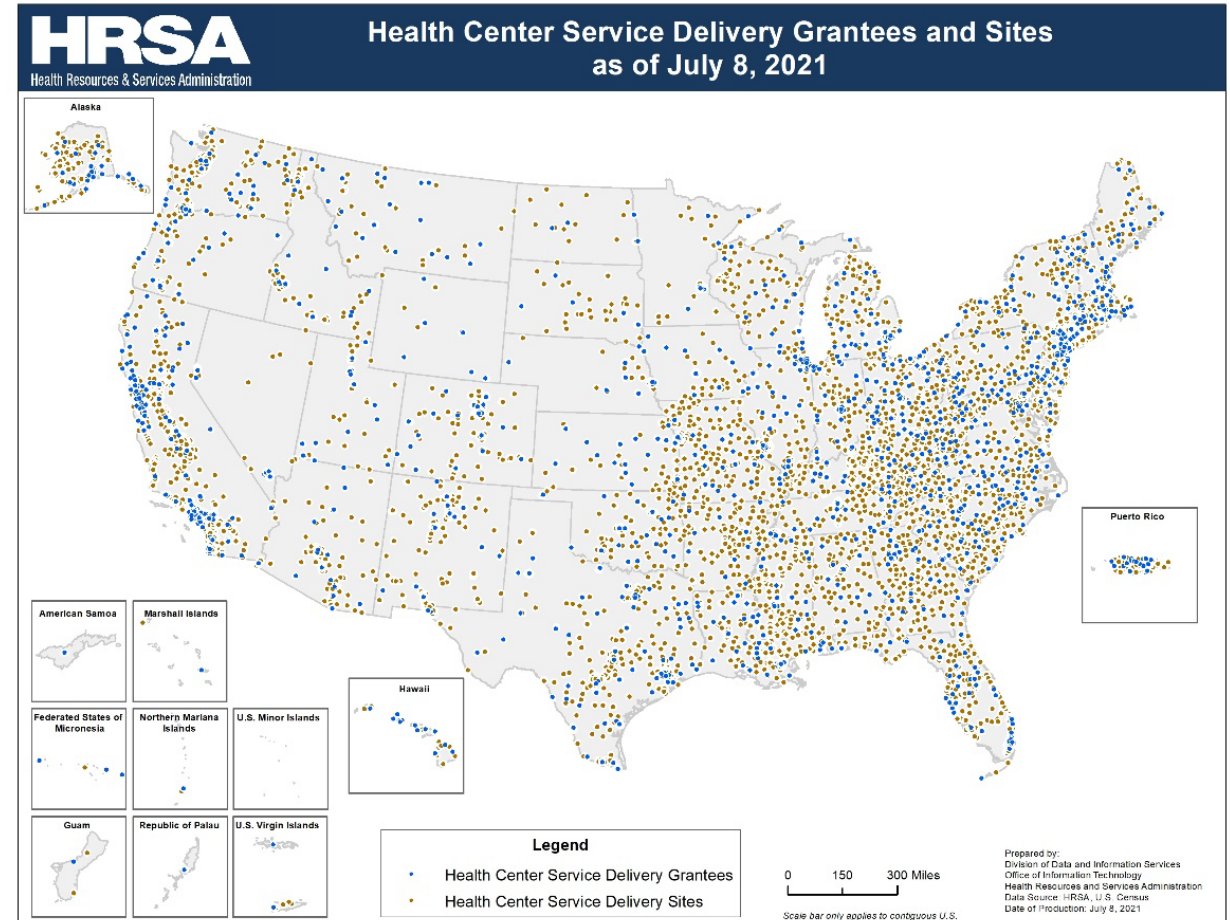
The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all.



Health Center Program Fast Facts

- Nearly **1,400** health centers operate more than **13,500** service delivery sites
- Serve **29 million** patients
- Health centers provide **patient-centered, comprehensive, cultural competent primary care and enabling services**
- Health centers employ more than **4,000** enrollment assisters and provide nearly **4 million** enrollment assists

Source: Uniform Data System, 2020



Learning Objectives

- I. Provide a timeline for the end of the Public Health Emergency and the policy implications for Medicaid and Marketplace coverage

- II. Highlight strategies and tools being deployed by health center outreach and enrollment staff to educate Medicaid beneficiaries and ensure access to care

Agenda

- I. Welcome
- II. Policy Overview of the Public Health Emergency Unwinding:
Timeline & Implications
- III. Strategies from the Field: A Panel Discussion w/Health Center
Outreach & Enrollment Staff
- IV. Questions & Answers

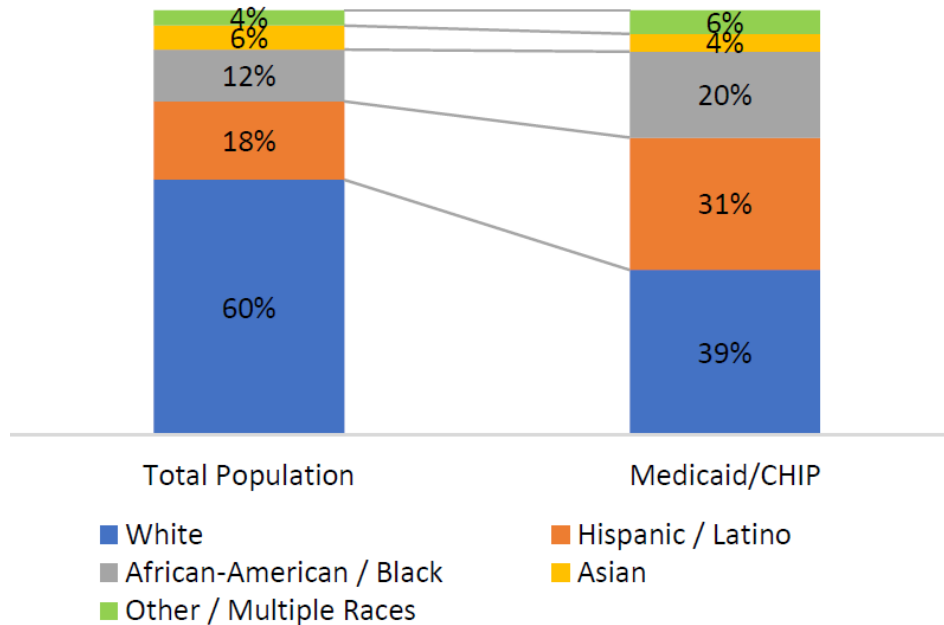


Policy Overview of the Public Health Emergency Unwinding: Timeline & Implications

Jeremy Crandall
Director, Federal and State Policy
NACHC

Setting Context: Medicaid and End of the PHE

Figure 1: U.S. Total Population vs. Medicaid/CHIP Enrollees by Race/Ethnicity, 2019

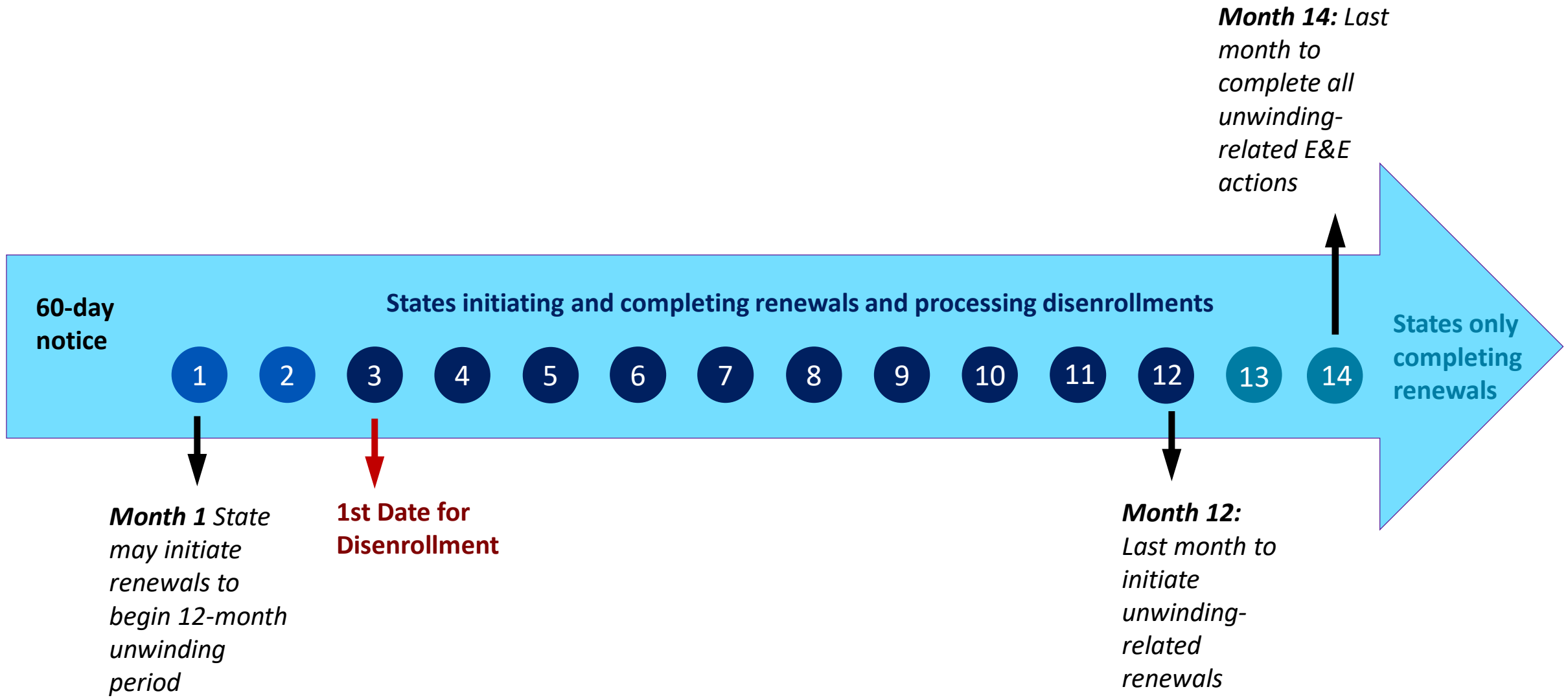


Source: <http://statehealthcompare.shadac.org/>

- Families First Act (FFCRA) in early 2020 **prohibited states from disenrolling Medicaid enrollees** if states chose to receive a 6.2% FMAP bump
- NACHC survey found continuous coverage requirement and other flexibilities enabled **90% of health centers to provide more services**
- **When the PHE expires, states will restart their eligibility redetermination processes**, which is typically when many enrollees lose Medicaid coverage
 - Administrative barriers, complicated paperwork, address changes, etc drive this churn, especially for people of color

Current Public Health Emergency (PHE) Timeline

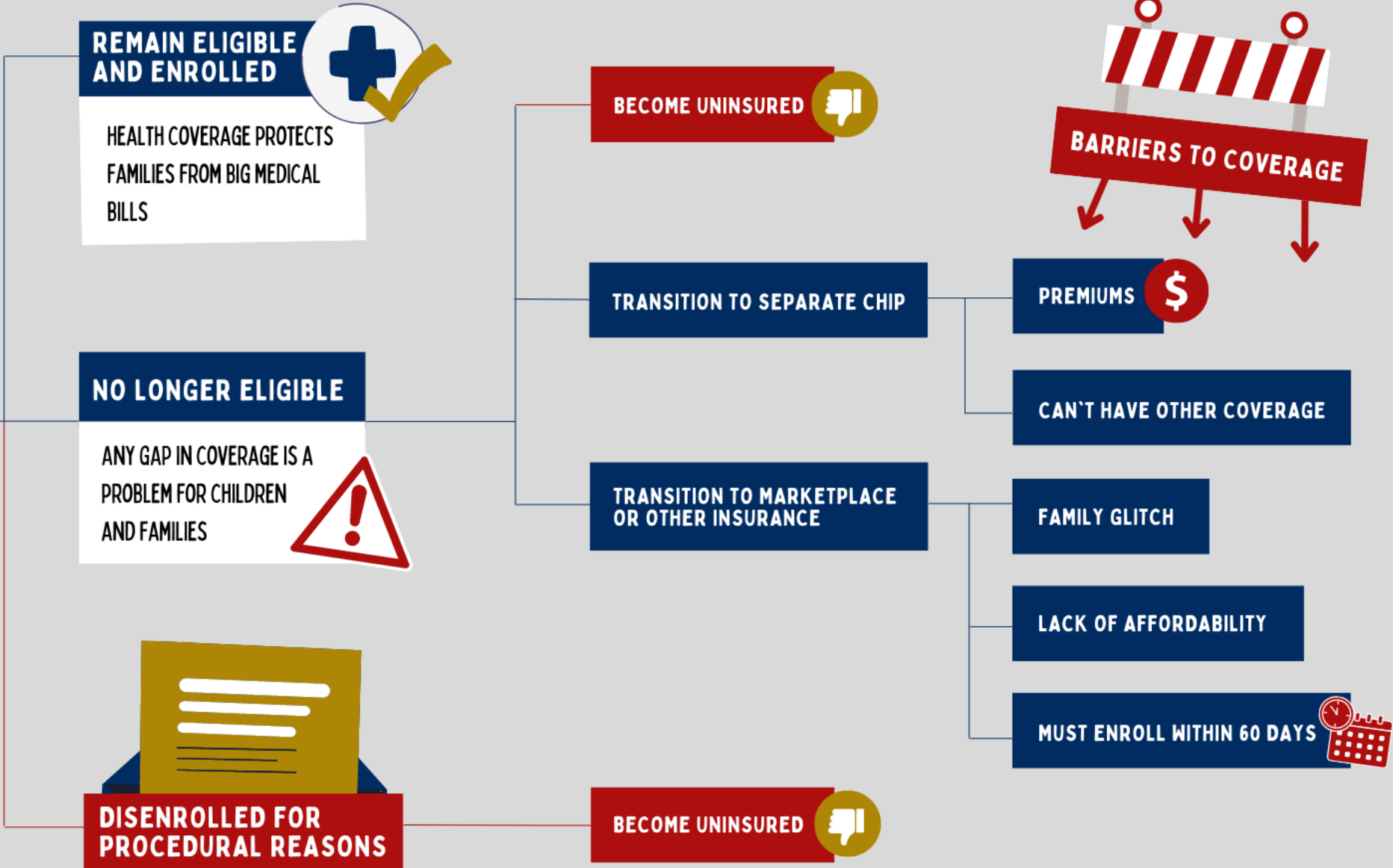
Action	PHE End Date	60-day Advance Notice	Continuous Coverage Protection is Lifted	Increased FMAP
No further action by HHS or Congress	July 15, 2022	May 16, 2022	August 1, 2022	6.2% points through September 2022
Build Back Better?	Would delink MOE from end of PHE	???	???	Could phase down 6.2% points.
PHE extended again July 15, 2022	October 13, 2022	August 14, 2022	October 31, 2022	6.2% points through December 2022
PHE extended again October 13, 2022	January 11, 2023	November 12, 2022	January 31, 2023	6.2% points through March 2023



DID YOU KNOW?

37.3 MILLION CHILDREN

ENROLLED IN MEDICAID OR M-CHIP ARE AT RISK WHEN THE MEDICAID CONTINUOUS COVERAGE REQUIREMENT IS LIFTED.



HERE'S WHAT CAN HAPPEN IF STATES DON'T TAKE THE TIME TO GET IT RIGHT!



CMS Guidance (March 2022)

- States have 12 months to complete Medicaid redeterminations and renewals
- No person can be disenrolled before the state conducts a full renewal based on the most “recently available, reliable information.”
 - Applies even if a state decides to forgo the FMAP bump and start processing disenrollments.
- States may not initiate renewals on anyone enrolled less than 12 months
- States must develop Unwinding Operational Plans, report baseline and monthly data and recommended to consult with external stakeholders

Key Actions to Take Now



01

Importance of updating addresses

02

Engage on Unwinding Operational Plans

03

Support feedback loop on recurring problems

04

Engage with state and national stakeholders



Permanency of ACA Subsidies

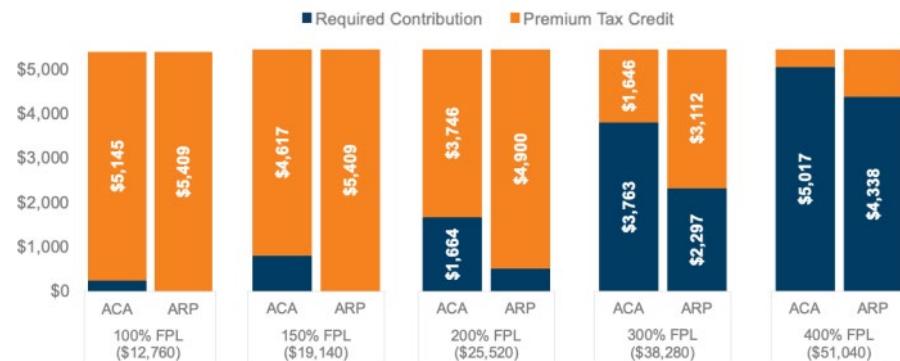
- American Rescue Plan boosted APTCs 2021-2022, reduced cost-sharing, expanded eligibility
- Led to 14.5 million enrolled in 2022, premiums down by 23%
- Expiration of protections would lead to 3.1 million people losing access to coverage

Fixing the ACA Family Glitch

- ACA provides tax credits to people who do not have "minimum essential coverage" that is affordable (9.61% of household income)
- Glitch blocks family members of low-income workers to receive APTCs
- Proposed Rule: Allows family members of employee to receive APTCs above threshold w/ certain conditions

Figure 1

Average Annual Benchmark Premium (\$5,409) Contribution and Tax Credit for a 40-year-old in 2021 Under ACA and ARP



Source: KFF, "Health Insurance Marketplace Calculator." Mar 10, 2021.

KFF



Strategies from the Field:

A Panel Discussion w/Health Center Outreach & Enrollment Staff

June 29, 2022

Panelists



Abby Sanchez
O&E Program Coordinator
North Country HealthCare
Flagstaff, AZ



Becky McMullen
Director, Outreach Success and
Enrollment
HealthSource of Ohio
Loveland, OH



Julia Garvey
Policy Advisor, Navigator
Partnership Community
Health Center
Appleton, WI

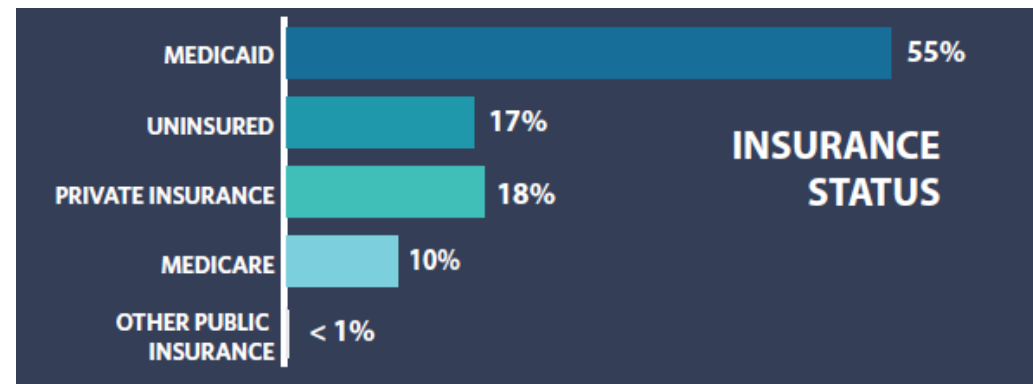
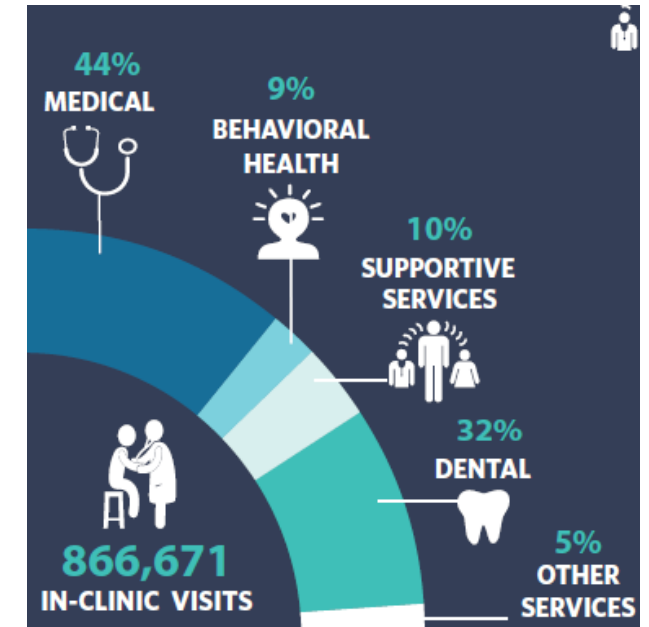
**Q: How is your
health center
preparing for the
unwinding?**

Wisconsin Medicaid Background

- Since the PHE in March 2020, the Medicaid program has grown by 385,000 members
- Current total enrollment is approximately **1.57 million** people
- The total WI population is 5.9 million
- 50,000 – 60,000 re-determinations per month over 12 month period

WI CHCs and Medicaid Covered Patients (2020 UDS data):

17 Community Health Centers in Wisconsin at over 100 sites





WI PHE Unwinding Task Force

- Convened in November 2021
- Over 140 participants
- Representing over 45 different organizations
- “North Star” for state health department to maintain coverage and access for members
- Focus on a collaboration between state health department (DHS) and stakeholders

Stakeholders

Community health centers

Outreach and enrollment assisters

Department of Health Services staff

State Navigator entity - Covering Wisconsin

Health care providers

Medicaid Managed Care Organizations

Qualified Health Plans

Patient advocates



WPHCA

- Participates in state taskforce and advisory role on data subgroup
- Provides monthly updates to CEO's, CFO's, Outreach & Enrollment, and Communications Peer Learning Networks on status, timing and strategy of unwinding

Health Centers

- Explore and build Outreach and Enrollment capacity
- Provide expertise and feedback on state unwinding plans and key messaging
- Collaborate with DHS through IM/Partner workgroup
- Wisconsin Navigator entity Covering WI provides customizable materials to share with patients and community

Collaboration

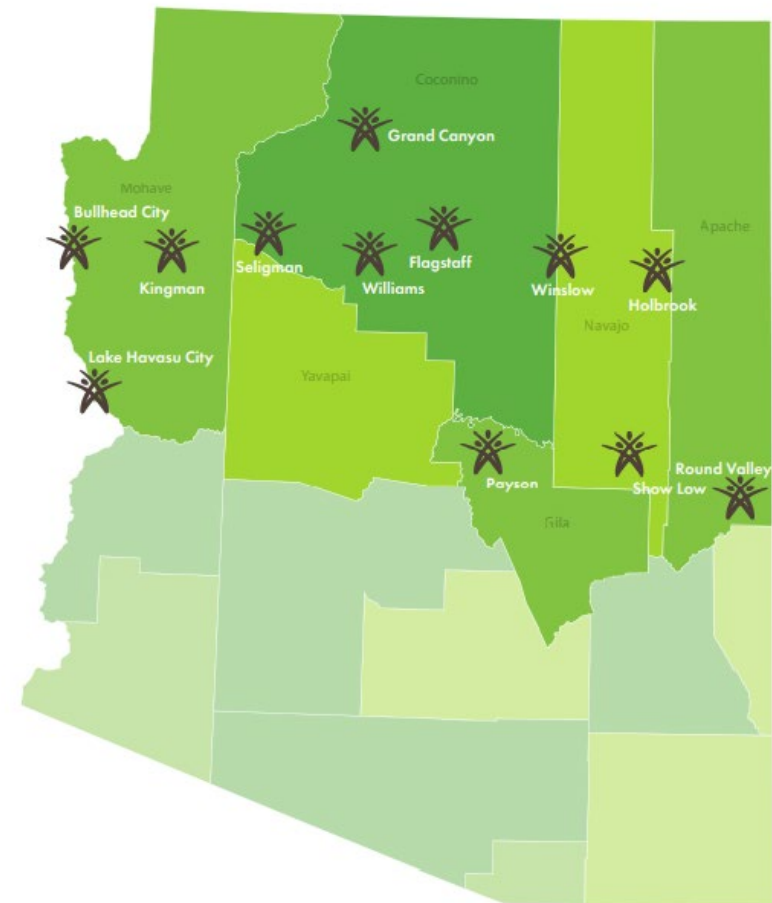
- Local, state, and federal collaborations to ensure correct and consistent messaging
- State Medicaid program has directed us to work with plans directly

In-reach efforts

- Reaching current patients who had or have Medicaid insurance in the last 32 months

Outreach efforts

- Community partners
- Community events
- Education



During the PHE Unwinding process, we have been working closely with the Medicaid health plans in our region

- They have provided us with mutual patient rosters (our patients and patients assigned to us)

Health plans have also partnered with us for assistance with education and the renewal process once the PHE ends

- Sponsorships with funding for events, giveaways, flyers, standing posters, and possibility for stipend interns

Collaboration

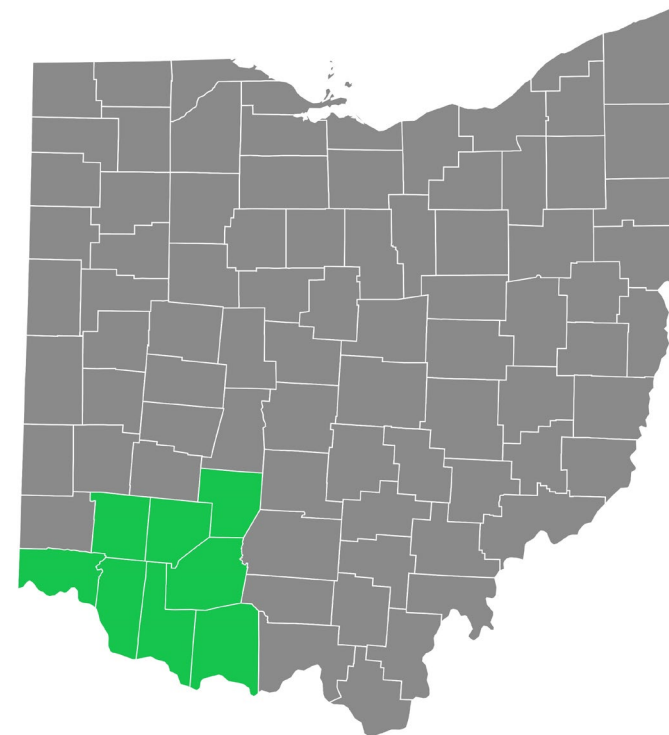
- Local, state, and federal agencies to ensure correct and consistent messaging
- State MMCP

In-reach efforts

- Current patients and Outreach & Enrollment consumers

Outreach efforts

- Referral agencies
- Consumers assisted since the beginning of the PHE
- New community connections
- Community events



**Q: What HC staff
are involved with
doing this outreach
to patients?**

Outreach & Enrollment:

- Community outreach & events
- Medicaid
- Presumptive Eligibility
- SNAP
- Marketplace applications

Front desk:

- Patient in-reach

Care coordinators:

- Patient in-reach

Finance:

- Work with state MMCP
- Sliding fee patients

**Marketing &
Development:**

- Printed materials
- Social media messaging

Clinical Operations:

- Provider referrals

Medicaid Unwinding Committee

Director of Outreach

- Overseeing strategy and efforts

Director of Marketing

- Marketing strategies and long term solutions

Patient Retention Specialist

- Text messaging system/workflow

Data Specialist

- Pulling patient lists with Medicaid for last 3 years & analyze data for text messaging system

Senior Operations Manager

- Providing support and suggestions from operations (working with providers)

Outreach & Enrollment Coordinator

- Implementing strategy

There are several staff involved in our strategy:

1. Preparation – Medicaid Unwinding Committee
2. Execution – Enrollment staff, front desk staff, providers
3. Maintenance – Coordinator and enrollment staff

A training has been held to outline the strategy, explain roles and provide education



In-Reach Enrollment Staff:

Assistance: Sliding fee,
Marketplace, Medicaid,
SNAP

Appointment type:
Scheduled appointment,
walk-in, in-reach



Positive PHE Outcome:
Implementation of
virtual/over the phone
enrollments

Outreach Enrollment Staff:

Grant Funded: Navigator CMS
Grant, Connecting Kids to
Coverage, SNAP-O

Assistance: Medicaid,
Marketplace, SNAP

Appointment type: Referral,
request

Community Outreach/Events

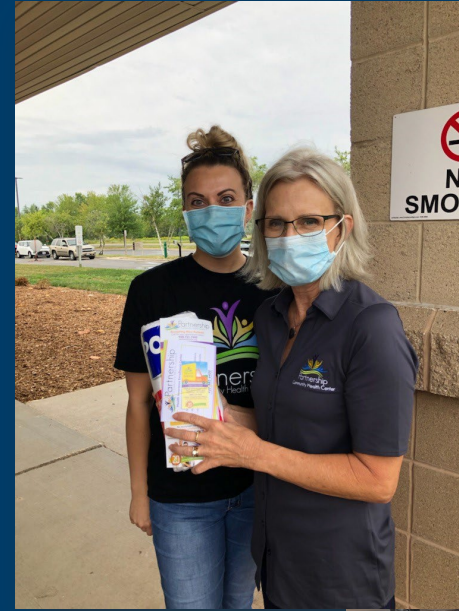


Enrollment is a Part of All Conversations

Leadership directed, board supported enrollment infrastructure

- 7 CAC's/Navigators – bi-lingual
- O&E embedded into primary care and dental
- O&E at community based organizations
 - Pillars – people experiencing homelessness
 - LEAVEN – basic needs
 - Schools
 - Faith based community
- COVID vaccination events

We are the trusted voice in the community for enrollment since 2014.



16,000 unique patients from 4 counties
75% of our total patients have Medicaid
95% of our dental patients have Medicaid



Staff Education	Messaging to Patients	Community Education
<ul style="list-style-type: none"> • Leadership-driven and supported communication plan • Review capacity and workflows for re-determinations • Share PHE Unwinding updates to all health center staff 	<ul style="list-style-type: none"> • Multi-lingual outreach card at check-in • Flyers in patient rooms • Care Messaging – patient text platform • Social media • Web based and agility ads • Visit summaries/ billing statements 	<ul style="list-style-type: none"> • Collaborate with community partners • DHS outreach cards with Partnership contact information • Educational trainings to partners • Radio ads • Earned media

**Q: What
tools/strategies are
you implementing to
educate beneficiaries?**



Police
National
Night Out

Veterans
Resource Fair

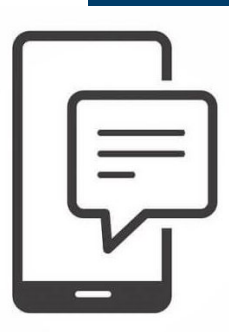


We have various tool/strategies that we believe will impact this transition

- **Text Message** – Care Messaging
- **Education in community** (events and community partners), social media, patient interaction and other agencies in the community
- **Front desk staff** with appointments for Medicaid patients
 - “Have you updated your information with Medicaid?”

Text Messaging Strategy – Care Messaging

- Sending out a text message to Medicaid patients for information update before PHE ends and renewal after PHE ends
 - 33,000 patients to contact via text
 - HIPAA secure form with fields for updated information (updating Medicaid system)
 - Enrollment staff/front desk staff will take forms filled out by patients and update info



Text Message Used:

North Country HealthCare: Our records show that your contact information needs to be updated. If you do not take action now, you may be at risk of losing health insurance coverage. Updating your information is fast, easy and secure. Visit <LINK> to complete the process.

Community Education

**Community
Partnerships**

Events

Social Media

**Other Agencies
Impacted**



PHE Unwinding Taskforce Materials

Ready-to-use: flyers, outreach cards, social media graphics & messages, consumer email templates

Key themes:

- The PHE is not yet over
- BC+ and Medicaid membership continues until further notice from DHS
- Watch for, read, and act on information from DHS
- Update member contact information
- Materials are in Spanish, Hmong and English.

Partner Toolkit at <https://www.dhs.wisconsin.gov/covid-19/unwindingtoolkit.htm>



- Do you have BadgerCare Plus or Medicaid health benefits?
- Did you move in the last two years?



UPDATE YOUR ACCOUNT



Make sure the Department of Health Services has your current address, so you know when to renew your benefits.

Log in at access.wi.gov or contact your local agency. If you have questions, we're here to help.



Contact **Kelly X.**
Benefits Specialist
920-832-7825



We Can Help!

- Need help to renew your BadgerCare?
- Connect to other coverage – employer plan or **Healthcare.gov**
- Health insurance literacy
- Trusted community partner for referrals



Need health insurance?

Get free, local help!

covering Wisconsin
Connect to Care, Engage in Health

Keep Your Coverage!

BadgerCare Plus and Medicaid have special rules during the COVID-19 emergency. Let's work together so you'll still have health insurance benefits when the emergency ends. **Here are the next steps.**



Update your contact info

Make sure your **current address, phone, and email** are on file so you'll get notices about important changes to your coverage. Log in at access.wi.gov or call your local agency.



Open your mail

Read any letters you get from the Wisconsin Department of Health Services to **find out how changes will affect you.**



Take action

Don't miss key deadlines! The letters will tell you **what you need to do to get continued benefits.**

Need some help?

To find free, local health insurance help, call **2-1-1** or go to www.WisCovered.gov

P-03175 (05/2022)

¿Le cuesta demasiado el seguro de salud?



Fecha límite: 15 de enero

Partnership Community Health Center es una organización sin fines de lucro que provee asistencia con la inscripción en seguros médicos y proporciona atención médica para la comunidad.

Nuestros asesores certificados y navegadores brindan ayuda experta de forma gratuita, para:

- Encontrar planes y mejores precios
- Inscribir en CuidadodeSalud.gov, BadgerCare Plus o Medicaid
- Contestar preguntas sobre su seguro de salud
- Resolver problemas con facturas o cobertura

Haga su cita hoy:



Llame a **Partnership** al **920-882-6420**



Esta publicación tiene el respaldo de los Centros de Servicios de Medicare y Medicaid (CMS) del Departamento de Salud y Servicios Humanos (HHS) de los EE. UU. Como parte de una asistencia financiera por un total de \$ 1,701,875, con un 70% financiado por CMS / HHS y 30% (\$ 517,825) financiado por fuentes no gubernamentales. El contenido es del autor (s) y no necesariamente representa las opiniones oficiales ni el respaldo de CMS / HHS o del gobierno de los EE. UU.



Outreach to Increase Health Equity

Role of health centers in accessing coverage and care through grassroots organizing

COVID vaccine events – trusted information for **all people** led by community influencers

- NEW Hmong professionals
- La Casa Hispana
- People of Progression
- World Relief

“People closest to the problem are closest to the solution”



Making a difference in the lives of people; creating a healthy community.

- Direct messaging
 - Past & new consumers
 - Community connections
 - Patients
- HSO staff meetings
 - Weekly all-staff educational article with updates
 - New employee orientations
- Partner messaging
 - Distribute flyers to community connections
 - Share contact information with referrals
- Community events



HSO & Weightless Anchor



HSO & Resurge Recovery

Messaging

- Weekly unwinding updates in HSO's weekly all-staff newsletter
 - Past & new consumers
 - Community connections
 - Patients
- HSO staff meetings
 - Weekly all-staff educational article with updates
 - New employee orientations
- Partner messaging
 - Distribute flyers to community connections
 - Share contact information with referrals
- Community events



HSO Foundation Color Run 5k








Clermont Senior Services
Volunteering



A.T. Stills University Burundian
Community Event

**Q: What messaging
are you using to
educate
consumers?**

Key Messages

-  Keep your address, phone and email updated with the State
-  No one will lose BadgerCare or Medicaid benefits before the public health emergency ends
-  Watch for a letter from DHS to know when & how to take action
-  Partnership provides free, expert help to renew or get enrolled in other coverage
-  Download the MyACCESS app and sign up for push notifications
-  Keep using your healthcare



PHE Unwinding as a Patient Engagement Opportunity

- Opportunity to grow and retain patients
- Maintain continuity of primary medical, dental and BH care
- Increase utilization of telehealth
- Maximize health center visibility in the community
- Position health centers as leaders in coverage to care

Outreach and enrollment work is a strategic return on investment for patients, health centers and communities.



Key Messaging



Update contact information



Check mail for notifications and instructions



Complete and return forms



Medicaid to Marketplace transition assistance



We are a trusted resource for application assistance



Use Healthcare.gov for Marketplace applications

Partner Messaging

- Community education
 - Emphasize the need to update contact information
 - Redetermination with FAQ sheet
 - “Next Steps” sheet
 - Contact information for further assistance
- Community events
 - Local schools
 - Libraries
- Ask partners to share information with applicable parties
 - Referral system



HSO & MEAC Food Pantry



Before PHE ends



Updating Information



HIPAA protected



Qualified enrollment staff

After PHE ends



Renew applications



Schedule medical appointments



Medicaid to Marketplace transition

Note: Using terminology that is known

Additional Resources

- Center on Budget and Policy Priorities <https://www.cbpp.org/research/health/time-to-get-it-right-state-actions-now-can-preserve-medicaid-coverage-when-public>
- Centers for Medicare and Medicaid Services <https://www.cms.gov/outreach-education/partner-resources/cms-national-stakeholder-calls>
- Georgetown University Health Policy Institute Center for Children and Families <https://ccf.georgetown.edu/>
- National Health Law Program <https://healthlaw.org/>
- Young Invincibles <https://younginvincibles.org/>
- Wisconsin Department of Health Services – COVID-19: Emergency “Unwinding” Partner Toolkit <https://www.dhs.wisconsin.gov/covid-19/unwindingtoolkit.htm>
- Covering Wisconsin Promotions Toolkit <https://coveringwi.org/toolkit>

Questions & Answers

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