



June 2024: Final Update on MassHealth Redeterminations

Background on MassHealth redeterminations

In March 2020, the federal government declared a public health emergency (PHE) due to the COVID-19 pandemic. In response to the PHE and consistent with federal requirements, MassHealth put protections in place that prevented members' MassHealth coverage from ending during the COVID-19 emergency. On April 1, 2023, these continuous coverage protections ended and MassHealth began the process to redetermine all members' eligibility, as required by CMS. **The MassHealth redeterminations process began on April 1, 2023 and ended on May 31, 2024.**

About the redeterminations data dashboard

During the redeterminations period, MassHealth published a monthly dashboard to provide data on MassHealth's caseload and details on members joining and departing from MassHealth. This transparency was critical to identifying populations that required additional support during the redetermination period and gave the public greater visibility into this important initiative. The dashboard provided data through the end of the month prior to each release; for example, the June 2024 dashboard update contains enrollment data through the end of May 2024.

As the redeterminations period formally ended on May 31, 2024, this is the final redeterminations dashboard and corresponding monthly narrative on MassHealth redeterminations. Moving forward, MassHealth remains committed to publishing data regarding its caseload, including members joining and departing coverage. Beginning in the summer of 2024, MassHealth will publish a new version of the public-facing dashboard that will provide key caseload information over a rolling 12-month period. Information about the new version of the public dashboard will be posted to <https://www.mass.gov/info-details/masshealth-redetermination-dashboard> this summer.

Final data on the redeterminations period

Please note: *May 2024 data can be found in the appendix.*

Over the course of the redeterminations period, from April 2023 through May 2024, MassHealth saw a net decrease of 16%, or ~363K members, in its caseload. A caseload decrease of this size was expected, given that many of the members whose coverage was "protected" during the COVID-19 public health emergency were no longer eligible for MassHealth due to changes in circumstance, such as an increase in income. Many of these members also gained access to other forms of insurance upon departure from MassHealth.

- MassHealth's caseload at the end of May 2024 was 2.039M, which is 282K (16%) above MassHealth's pre-COVID baseline of 1.757M members. The higher enrollment was consistent across all age categories, with 69K more children (0-20), 165K more adults (21-64), and 48K more seniors (65+) enrolled in May 2024 than in February 2020.
- Approximately 33% of disenrolled members lost coverage because MassHealth confirmed that they are ineligible.
- Approximately 67% of disenrolled members lost coverage due to "insufficient information." Insufficient

information is defined as any scenario where MassHealth was unable to confirm if an individual is eligible for MassHealth, including members who did not respond to MassHealth's outreach. Many of these members' income appeared to be too high for them to remain eligible for MassHealth. If those members never responded to MassHealth's inquiries, then they were included in the "insufficient information" category.

There were three key areas where the Healey-Driscoll Administration focused on protecting coverage:

1) Maintaining coverage for kids

Preserving universal coverage for kids was a key priority throughout this process, and MassHealth took deliberate steps before and during the redeterminations period to ensure that eligible children did not experience gaps in coverage. MassHealth worked with the Massachusetts Department of Elementary and Secondary Education to outreach directly to the 15 school districts with the highest number of Medicaid-enrolled students, while also providing general communication and resources to districts across the Commonwealth. Similarly, MassHealth convened a cross-agency working group with representatives from seven child- and youth-serving state agencies to develop a unified, multi-pronged approach for children and youth during the early months of the redeterminations period.

From a technical standpoint, MassHealth put safeguards into its eligibility system to individually review each child's eligibility for MassHealth coverage, even when other household members were found ineligible. Additionally, MassHealth made it easier to automatically renew coverage for kids and other members under age 65, by obtaining special federal authority during the redeterminations period.

As a result, during redeterminations, children on MassHealth saw the lowest rate of disenrollment of any age group, and a rate of change that was much lower than was seen in other states across the U.S.¹ As of the end of May 2024, MassHealth covers 69K more children than it did in February 2020, prior to the start of COVID protections.

2) Helping ineligible MassHealth members find affordable coverage on the Massachusetts Health Connector

MassHealth and the Massachusetts Health Connector collaborated closely to facilitate the transition of eligible members to the state Marketplace. This effort significantly increased participation in the Health Connector, with approximately 133,000 individuals enrolling after becoming ineligible for MassHealth. Approximately one quarter of individuals deemed ineligible for MassHealth but eligible for a Qualified Health Plan opted to sign up through the Health Connector, surpassing enrollment rates seen in other states.² Notably, 96 percent of individuals transitioning from MassHealth to the Connector successfully enrolled in a subsidized plan, meaning their insurance was affordable and comprehensive.³

To ensure residents losing MassHealth coverage were well-informed about their options, the Health Connector conducted extensive multi-lingual community-based outreach initiatives and paid media campaigns. These efforts helped reach diverse populations across Massachusetts, providing essential information and support to those transitioning to Health Connector plans.

The Health Connector's strategic partnerships with the Massachusetts employer and broker communities played a key role in disseminating vital information and providing support during the redetermination period. Workshops, webinars, and direct communications equipped employers and brokers with the necessary resources and guidance to

¹ <https://www.medicaid.gov/media/167461>

² "State-based Marketplace (SBM) Medicaid Unwinding Report." Medicaid.gov, <https://data.medicaid.gov/datasets?theme%5B0%5D=Unwinding>.

³ Massachusetts Health Connector Enrollment data as of June 9, 2024

assist residents in maintaining uninterrupted health coverage. This collaborative support not only reassured employers and brokers but also highlighted their importance in the transition process.

3) Preserving coverage across the Commonwealth, including key communities and populations

During the redeterminations period, MassHealth engaged in extensive outreach efforts that were unprecedented in nature and critical to ensuring members were aware of the redeterminations process and supported throughout. Such efforts included, but were not limited to:

- Through EOHHS's partnership with Health Care For All, canvassers knocked on over 428K doors and community-based organizations held more than 4,520 events and activities in the 15 communities with the most members at risk of coverage loss.
- MassHealth Accountable Care Organizations and other health plans made more than 1.8M outreach attempts via phone call, text message, and letter to members selected for renewal. Additionally, MassHealth partnered with health plans to directly assist members with completing renewal forms and applications.
- MassHealth conducted a media campaign, which includes digital, traditional, and out of home ad placements, in over 30 communities with high MassHealth enrollment in the top four languages spoken by MassHealth members.
- MassHealth engaged in new member awareness efforts at 70+ grocery stores, ~600 libraries, ~1,800 schools, and additional statewide organizations such as the YMCA, Boys & Girls Club, etc.
- MassHealth hosted several in-person renewal events in partnership with community organizations to support specific member populations through renewals, such as members experiencing homelessness.
- EOHHS executed more than \$1.5M of grants to expand community assister capacity at 23 Community Based Organizations serving immigrants, refugees, older adults, and other vulnerable populations, as well as expanding assister capacity at Aging Services Access Points (ASAPs).
 - Through these grants, Assisters served more than 6,283 households via more than 5,400 hours of member support, over 290 population-specific events, and various other engagements.

Importantly, **MassHealth saw a smaller caseload decrease in the communities where the HCFA campaign ran. In HCFA-served communities, MassHealth saw an approximately 14% drop in enrollment during redeterminations, as compared to an approximately 18% drop in communities outside of the HCFA campaign**⁴.

- MassHealth provided targeted support to seniors, including launching a simplified renewal form for most members, offering renewals online or over the phone, and hosting events focused on seniors in coordination with trusted organizations in the community. EOHHS also held trainings specifically for eligibility specialists supporting members over the age of 65.
- MassHealth focused on effective outreach to immigrant populations, launching member materials in the top 9 languages of MassHealth members and making sure its media campaign included local language television and radio stations. Additionally, MassHealth held events with on-site translators and published a list of assister organizations who speak languages other than English.
- MassHealth made sure to support members with disabilities through the renewal process, publishing vlogs incorporating ASL, offering live ASL translation during redeterminations-related webinars, and offering renewal forms in large print or Braille, as needed. Additionally, MassHealth coordinated with other agencies, such as the Massachusetts Commission for the Blind, Massachusetts Rehabilitation Commission, and the Department of Developmental Services, to provide targeted outreach and resources to shared members.

⁴ MassHealth Caseload by Municipality – Redeterminations (February 2020, April 2023, March 2024), <https://www.mass.gov/doc/masshealth-caseload-by-municipality/download>

Key takeaways from the redeterminations process

Despite the unprecedented challenges of the COVID-19 pandemic and the resulting redeterminations period, MassHealth saw various successes and learned critical lessons that will inform future renewal processes.

Using federal flexibilities and new, creative approaches to help members through the renewal process: In order to best support members, MassHealth took advantage of various federal flexibilities and waiver authorities to help members through the renewal process. This included:

- Expanding the number of members whose health coverage was automatically renewed based on existing data, without requiring them to take action
- Utilizing new, trusted data sources to update member contact information
- Extending response timelines for older adults and members with disabilities from 30 days to 45 days

Improving member outreach: MassHealth worked to expand its direct member outreach around renewals, helping to ensure members knew what actions they needed to take when they were selected for their annual renewal. These efforts included:

- Expanding the availability of electronic and translated notices through MassHealth's online MyServices portal
- Simplifying renewal paperwork and allowing new submission methods (such as via telephone, e-submission, etc.)
- Launching email and text outreach for the first time, at key points in the renewal process, in the top 6 languages
- Expanding language access by offering all notices for members under age 65 in the top 6 languages (notices for members 65+ are in progress)

Partnering with the community: Through its expansive network of community partners, MassHealth helped facilitate the provision of community-based education and support to members in a manner reflective of members' locations, languages, cultures, and abilities. MassHealth partnered with community organizations, health plans, advocates, contractors/vendors, sister agencies, employers, and other groups to:

- Knock on over 420K doors in the top 15 communities with the most members at risk of losing coverage
- Provide targeted support to the populations most likely to face barriers when attempting to access or maintain MassHealth coverage, such as older members, members experiencing homelessness, immigrants and refugees, members with disabilities, and groups in underserved geographical regions
- Host several thousand member-facing events and thousands of "office hours"
- Meet regularly with advocates, healthcare organizations, and other stakeholders to closely monitor member feedback, address and reduce barriers, and make short-term and long-term improvements

Strengthening customer service infrastructure: In preparation for significantly heightened volume, MassHealth added additional resources and supports for its Customer Service Center, allowing MassHealth to maintain customer service levels while processing over 1M member documents, and supporting thousands of scheduled and walk-in member appointments.

Beyond redeterminations

Even as the redeterminations period ends, MassHealth will continue its efforts to support members through their annual renewals and to continue to drive operational improvements that make MassHealth easier to navigate for its members. Many

of the federal policies and operational improvements will continue, in addition to new initiatives focused on simplifying the member experience.

For our members, the annual renewal remains a requirement of eligibility for MassHealth. MassHealth remains focused on helping members understand the following key messages:

- If you are a MassHealth member, you must renew your coverage every year
- If it's your time to complete a renewal, you'll receive a blue envelope in the mail
- Check your mail regularly and open all mail from MassHealth, even mail that arrives in a plain white envelope
- Make sure MassHealth has your updated contact information

Appendix

Highlights from June 2024 dashboard

May Data

- Overall, during May 2024, the MassHealth caseload decreased by approximately 15,000, or 0.79% from the prior month. Approximately 16,000 members newly gained coverage, approximately 16,000 re-joined coverage, and approximately 47,000 departed.⁵
 - The ~16,000 arrivals are within a typical monthly range for new entrants, as individuals become eligible for MassHealth.
 - The ~16,000 member re-openings are within a typical monthly range for members who departed and re-joined MassHealth within 12 months.
 - The ~47,000 departures represent an expected monthly volume for members leaving coverage.
 - For context, prior to the COVID-19 Public Health Emergency, approximately 52,000 members departed MassHealth coverage each month (based on data from CY2018 and CY2019).
 - Since April 2023, MassHealth has averaged approximately 65,000 departures per month.
- MassHealth initiated redeterminations for approximately 47,000 members in May.
- Moving forward, it is important to note that all members will need to undergo an annual redetermination, or eligibility review, on a yearly basis.

You can learn more about MassHealth's renewal process at mass.gov/masshealthrenew

⁵ Some members who join or re-join MassHealth are eligible for retroactive enrollment. As a result, caseload data reported in prior months' dashboards may fluctuate as new information is uploaded each month. For example, in last month's dashboard, we reported an April caseload of ~2.040M members. This month's dashboard now shows an April caseload of 2.039M members, reflecting retroactive enrollments and re-openings.