

Preparing for the End of the Federal Public Health Emergency (FPHE) Eligibility Protections

Executive Office of Health and Human Services

March 2022

CONFIDENTIAL; FOR POLICY DEVELOPMENT PURPOSES ONLY

Agenda

- **Overview of FPHE Eligibility Protections**
- **Overview of Renewal Process**
- **Anticipated Timeline to End FPHE Eligibility Protections**
- **Strategies to Minimize Unnecessary Churn**

MassHealth has maintained coverage for members since March 2022 as part of the federal Maintenance of Effort (MOE) provision

What is the MOE provision?

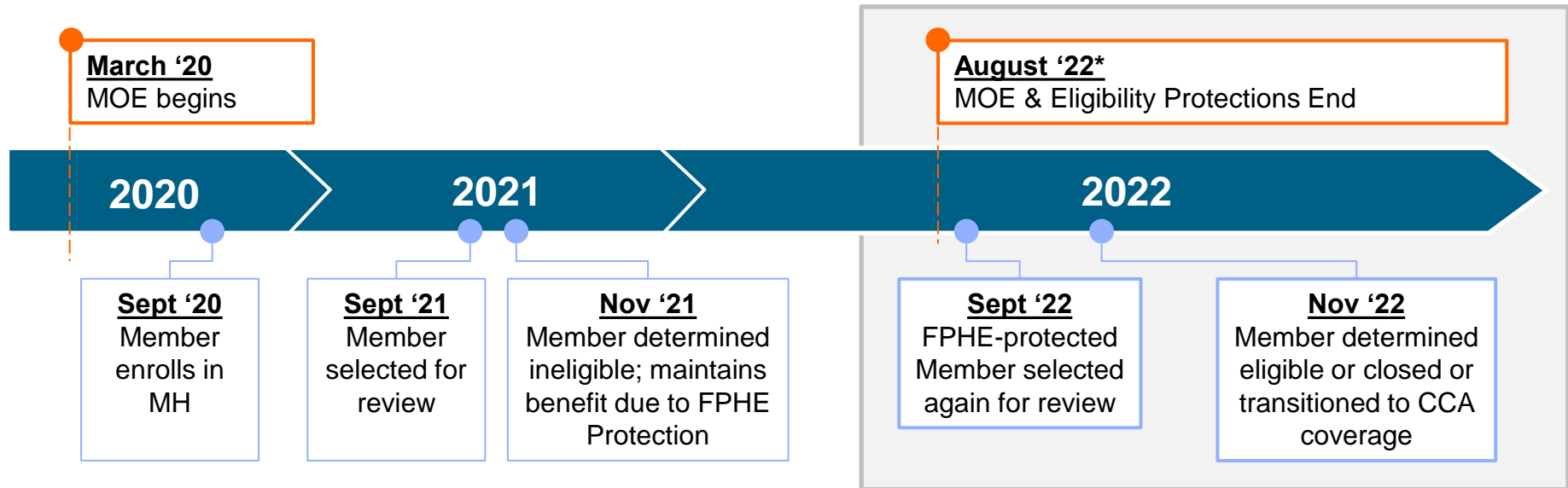
- In March 2020, **MassHealth suspended eligibility redeterminations and began protecting members' coverage in compliance with the MOE** provision of the Families First Coronavirus Response Act (FFCRA), allowing the state to claim enhanced federal matching funds.
- This means that even if a member was determined ineligible or did not respond to a renewal, they would not lose coverage during the federal public health emergency (FPHE), except **if a member moves out-of-state, is deceased, or by voluntary withdrawal.** .
- Additionally, **children in separate CHIP are not subject to the continuous coverage requirement** and continue to have their eligibility updated to reflect changes in circumstance, which could result in loss of coverage.

What was the impact of the MOE provision on MassHealth caseload?

- As a result, MassHealth's membership has **grown from 1.8M in FY19 to 2.2M in FY22.**
- **~700K individuals who normally would have been found ineligible or downgraded from their current benefit remain protected due to the MOE provision.**
- Once the FPHE ends, **MassHealth will be focused on a smooth resumption of redeterminations, ensuring that members receive the benefit for which they are eligible and avoiding unnecessary eligibility churn** through enhanced outreach, streamlined processes, and operational preparation.

FPHE eligibility protections likely to end August 1, 2022, though timeline is not yet finalized

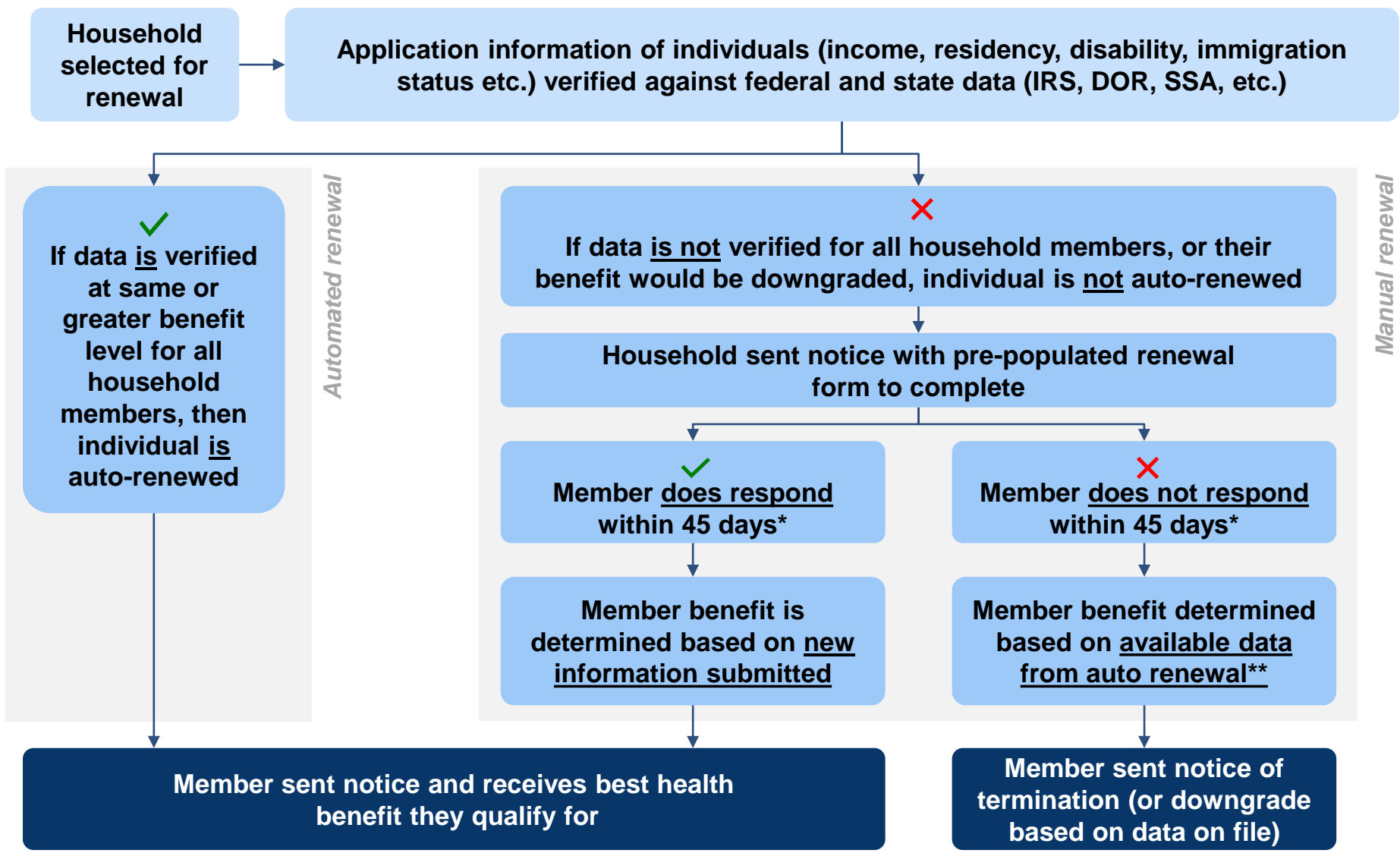
— Example of member impact



- All members, including the ~700K currently protected due to the FPHE, will need to be **fully redetermined** after the MOE period ends.
- This means **MassHealth must “start over”** reviewing a case even if the member was determined ineligible during the federal public health emergency (FPHE).

**August 2022 is most likely timing but is not yet confirmed. Redeterminations can take ~2-3 months, given member noticing, response requirements, and processing time; MassHealth maintains member benefits during this review period*

Overview of MassHealth HIX Annual Renewal Process for those under 65



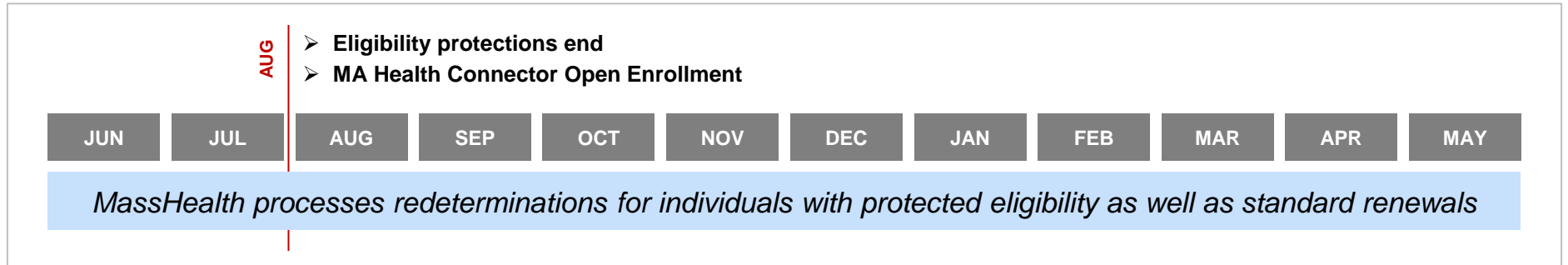
Note: The MA-21 renewal process for MassHealth's community elder, HCBS waiver, and long-term care populations is separate. Some MA-21 members are eligible for administrative renewal and do not need to complete a renewal form. All others must complete a paper renewal form.

*Members have 45 days to respond plus 5 days for mailing; members can respond online, by mail, by phone, or in-person.

**If member does not respond and no data is available from the autorenewal process, member coverage will be terminated.

CMS guidance gives states flexibility on redetermination timing while focusing on promoting continuity

- Once states start the redetermination process, states will have a maximum of **12 months to initiate all renewals**, and an **additional 2 months to complete all renewals**; **MassHealth is aiming to complete all renewals in 12 months**
- MassHealth is planning to **prioritize the renewal of individuals with protected eligibility** who may be ineligible for MassHealth and moved into other coverage, based on their earlier renewal results
- MassHealth plans to **start the redetermination process in June 2022** (~two months prior to the end of the FPHE), consistent with federal guidance
- This process will be closely coordinated with the **outreach campaign** and **in partnership with the Health Connector & Health Care For All**



— Benefits of proposed timeline —

- ✓ **Prevents the need to disrupt operations by pausing renewals**, allowing MassHealth to continue processes that have been occurring since May 2021
- ✓ Provides opportunity for slower ramp up prior to open enrollment (OE) to **test systems/processes and refine member experience**
- ✓ Enables **more renewals to occur near the end of FPHE**, when public awareness will be highest

MassHealth is preparing for the end of FPHE protections in order to minimize unnecessary churn and improve member experience



Increase capacity to address elevated renewal volume

- Hire **additional staff and expand vendor capacity** to support call center, applications processing, and appeals
- Implement operational changes to **increase speed of processing**



Maximize automated renewals for eligible members

- Automated renewals are based on federal or state data matching and **do not require member action**
- Change compatibility threshold of income matching from 10% to 20% to **increase automated renewals**



Execute comprehensive outreach strategy

- Collect updated **contact information**
- Develop **equity-oriented messaging** approach
- Coordinate closely with **advocates and community organizations**

More detail on next slide

MassHealth's outreach strategy has three key pillars

#1. Prioritize collection of updated contact information before eligibility protections end

- Continue to **request updated contact information on each call** with the Call Center
- Partner with **health plans and community organizations** to update contact information
- Encourage members **via social media and flyers** to update information

#2. Develop messaging for plans and community partners, in partnership with the Health Connector

- Prioritize **equity-oriented approach** to outreach efforts
 - Messaging will be multi-lingual and culturally relevant based on stakeholder input
 - Hold **regular meetings** with advocates and disability advisory group to solicit feedback and input
- Share **members who are up for renewal** with plans to support outreach directly to members
 - MassHealth to hold regular **meetings with plans** on outreach efforts to members
- Coordinate with **Health Care For All in their deployment of \$5M funding for member outreach**, including on-the-ground canvassing in targeted communities, sub-grants to community groups, and media buys

#3. Improve effectiveness of direct to member outreach

- Develop **email and text message capability** to support member outreach
- **Redesign envelopes** to increase response rate for mail
- Encourage **use of self-service tools** (e.g., HIX online account) for members
- **Specialized approach for homeless individuals and members with disabilities**, including targeted outreach channels and close coordination with advocates

Sample Communications

DRAFT



MASSHEALTH MEMBERS:

Don't miss important information and updates about your health coverage.

Update your contact information (phone, address, and email) if it has changed in the past 2 years.

MassHealth

DRAFT




MIEMBROS DE MASSHEALTH:

¿Te has mudado recientemente?

Actualice su dirección para no perderse información importante.

MassHealth

DRAFT 

MASSHEALTH MEMBERS:

If you didn't respond to a request for information and/or a renewal notice you still kept your MassHealth benefits due to the COVID-19 emergency. We expect the COVID-19 emergency will end soon. When it ends, MassHealth will need send another request and/or renewal to assess your MassHealth eligibility.

Beginning April 1, 2022, Requests for information and/or renewal notices will be sent to members in a blue envelope. If you get a blue envelope in the mail, you need to take action to make sure you do not lose health coverage.

TIPS FOR SUCCESS

UPDATE YOUR CONTACT INFORMATION:



If your contact information has changed in the past two years (address, phone number, email address, etc.) call MassHealth Customer Service or log on to your MA Login Account to update it now and make sure you get notified if MassHealth needs information from you.

REPORT CHANGES:



Reporting changes ahead of time can help MassHealth assess your eligibility faster. Report changes like: a new job, changes to income, or disability status; if someone in your household becomes pregnant, if someone moves in, or anything else that may affect your MassHealth eligibility. Changes can be reported by phone, mail, fax or online.

REPLY TO REQUEST FOR INFORMATION:



If you or someone in your household receives a blue envelope asking for information about your MassHealth coverage, respond before the deadline. This will help make sure that you don't become uninsured.

GO ONLINE TO YOUR MA LOGIN ACCOUNT



If you are under the age of 65, you can review your information at [MAhix.org](https://ma.hix.org). This is the fastest way to update your information and upload any documents needed from you.

Questions? Call MassHealth Customer Service at (800) 841-2900; for TTY (800) 497-4648