

WEBVTT

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Tricia Brooks: Good afternoon, everyone. This is Tricia Brooks from the Georgetown Center for children and families. As usual. It takes a little bit of time for everybody to get in the room and find their seats, so we'll be starting in just a minute or 2.

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Tricia Brooks: Good afternoon again. This is Tricia Brooks at the Georgetown Center for children and families. Thank you so much for joining us. I think I may have lost track of how many webinars we have done on the unwinding with our partners at the center on budget and policy priorities and our communications partner. Gmb, but I think we're up to either 14 or 15 and we're not through this yet.

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Tricia Brooks: So next slide, please, Rachel, today we are going to catch you up on where things stand with the unwinding both in terms of timing. Because we know now that we've passed the year mark since the continuous coverage requirement was lifted.

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Tricia Brooks: And so what happens next? What's gonna happen with the data reporting what's gonna happen with the E 14 waivers, some of which have been cited as being instrumental in helping keep eligible people enrolled. We'll talk some of the best about some of the best practices that have been noted during the unwinding, and how some of the things that we are doing that is new

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Tricia Brooks: will continue on as best practices.

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Tricia Brooks: We're going to talk about some concerns we have in terms of application backlogs and their timeliness.

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Tricia Brooks: And what's coming up next? We know that Cms

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Tricia Brooks: identified a number of deficiencies

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Tricia Brooks: in States renewal processes as they prepared for the unwinding. And Cms has indicated that they're going to get serious about compliance with regulatory requirements

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Tricia Brooks: and going forward States gonna have to come up with compliance plan that will show that where there are deficiencies in their renewal processes that have been mitigated with different strategies during the unwinding. When are they gonna come into full compliance?

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Tricia Brooks: And then, for those of you who pay attention to eligibility enrollment. You know that a big rule dropped on eligibility and enrollment back. A couple of weeks ago, we have a new explainer on our website, and we're gonna touch on some of the high points there

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Tricia Brooks: and then. Thinking about moving forward. You know, what? What have we learned? What are the big buckets of things that we need to pay attention to, in addition to compliance and continuing those best practices. And what efforts should we be engaged in to reconnect eligible kids and families with coverage who may have lost coverage for procedural reasons during the unwinding.

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00:05:00.150 --> 00:05:24.859

Tricia Brooks: And with that I am going to turn it over to well, maybe I should introduce everybody who's gonna speak first. It's you have me and you have my as we call her, my partner in crime on all things, eligibility, enrollment. Ally Gardner will be going up next, and a new face at Ccf. That not so new to us, but new perhaps to the unwinding work

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Tricia Brooks: Natalie Lawson. Who's gonna preview? A new resource that we are hoping to post by the end of the month. And then, of course we are joined by our friends from the Center on budget and policy priorities, Fara, Azouki, and Jen Wagner, and then, last, but not least, Sandy Juan, our partner, our communications partner at Gmb, and with that I'm gonna turn it over to Ally.

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00:05:51.070 --> 00:06:09.206

Allie Gardner: Thanks so much, tricia so to kick us off. A level setting of. We've all heard about the unwinding. We've all been every all States are been going through the unwinding. When will the unwinding actually be over, though? And that is a question that we don't yet have an answer to

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Allie Gardner: States started at different times, and as a result will end at different times. And while States were given 12 months to initiate and 14 months to complete renewals as the initial guidance from Cms due to voluntary or required pauses, and some or all disenrollments, special approvals for timelines like Oregon and Alaska got to extend beyond that 14 month period.

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Allie Gardner: and some States, specifically Kentucky and New North Carolina, pushing out renewals for kids 12 months. We know States unwinding periods in some cases will go beyond that initial 14 month period Cms. Has indicated publicly that they will soon be releasing an updated timeline for all States, indicating when they are expected to complete their unwinding periods.

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Allie Gardner: And most States have actually initiated about or over 75% of renewals. But large shares for a number of states of those renewals are just remain are identified as pending rather than having found official determination of eligibility. And that's what you can see in this graph. Over to the right

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Allie Gardner: is about 67 million renewals have actually come due, and that includes some of the pending cases. But over 20 million are still are individuals who are still in need of a renewal, as of December 2023 data from Cms next slide, please.

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Allie Gardner: And speaking of data, again, kind of a level setting on where things are with data reporting. And where are they going?

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Allie Gardner: As a reminder. The Consolidated Appropriations Act required States to report, and maybe more importantly, Cms to publicly

post specific data metrics that covered renewal outcomes related to the unwinding Call Center statistics that were already part of States performance indicator require data requirements. And then new data on marketplace transfers and enrollment.

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Allie Gardner: So the Ca mandates, those data reporting requirements extend through June 2024. However, even prior to the Ca Cms. Had indicated, those data, elements were going to be required to be reported from States, and they are likely going to require States to continue reporting those data pieces beyond the June 2024 date through the end of their whatever. Their unwinding period is.

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Allie Gardner: In addition. Right now, Cms has been publishing data on about a 3 month lag but they have also been requiring States to go back for previously reported data and update those pending renewals that I talked about earlier to show how those pending renewals ended up in their final determination of eligibility.

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Allie Gardner: Cms anticipates. We're leasing those updated data reports soon, and we'll probably see them for the first few months of data reporting, and with additional lags moving forward

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Allie Gardner: and Cms like I mentioned, has regular authority to extend or add reporting requirements. Some data like the Call Center statistics, like, I said, were part of the performance indicator data, and Cms already had required. The a lot of the unwinding data for States prior to the Ca, the Ca, the big piece of the Ca was, requiring Cms to publicly post that data.

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Allie Gardner: And but there is a caveat for future renewal data, unwinding data that Cms may post, and that is, as States have held certain renewals, or as they're trying to finish pending renewals do renewals for kids that they may have pushed out renewal outcome data will start in some States being a combination of unwinding related renewals as well as

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Allie Gardner: those normal operation operational renewals. So the data will not moving forward for some States may not be separated by

unwinding related and normal renewals.

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Allie Gardner: And with that I will pass it over to Jen to talk more about section the 19 or E 14 waivers. Pardon me.

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Jennifer Wagner: Thanks so much. Tricia ali and as Tricia put in the chat, please be sure to submit queue questions. As we go through this. We're gonna be kind of jumping around to a lot of relevant topics, but are happy to take a pause and dive more deeply into anything that would be helpful.

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Jennifer Wagner: So, as has been shared, we're really thinking about what happens after unwinding what's next? And one of the questions is, what are some good things from unwinding that we'll be able to continue. And what is going to end. So a big area within that is the E 14 waivers. Many of you are familiar with. These most States have taken advantage of at least some of them, and these E. 14 waivers are part of the Social Security Act and allow waivers to parts of statute to establish income and eligibility determination systems that protect beneficiaries.

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Jennifer Wagner: So even though the statute doesn't say they're temporary, they generally have been used as temporary authority in times of strain on systems. So you might have seen States use them as they expanded Medicaid eligibility, or had system constraints, or more most recently, during unwinding, there are about 30 different waivers that have been offered by Cms. And almost 400 total are in effect, and, as Ali just very helpfully put it in the chat, you can see a list of all the different waivers in the States that have taken them up.

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Jennifer Wagner: And so the question is, will these end when unwinding ends? And that was a big question, as some States have allegedly finished their unwinding, or as we come up on the year mark that just passed a few weeks ago. Fortunately, in December, release, Cms. Made clear that the E. 14 waivers will continue until the at least the end of 2024.

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Jennifer Wagner: So that's a huge deal. But the question is, what

happens after that? And one of the things we wanna talk about today is that E. 14 should be thought of as a monolith. Like all of them, extend. All of them go away because there are different aspects to different ones of them. So if we look on the next slide, here are some of the kind of top ones that States have taken up and they have different outcomes, different impacts, especially looking post on Yd.

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Jennifer Wagner: so one is to renew Medicaid based on snap eligibility. So this is what was used to be known as Strategy 3 or fast track estate expanded, but it allows the State to X part to renew a case based on the fact that the Medicaid Enrollee also participates in snap, and that the snap income is below the eligibility threshold. So this has been used heavily, especially in non integrated States, to increase X part day rates.

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Jennifer Wagner: Now, because the waiver actually waves the difference in household and income counting it is a waiver. There's not an existing regulatory basis to continue it. And so we do anticipate that this may end at the end of 2024.

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Jennifer Wagner: The good news here, though, is that there are multiple alternatives available. There's a express line eligibility that does essentially the same thing as the waiver, but is limited to kids. And that's a state plan option.

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Jennifer Wagner: There's another fast track state plan. Option that applies to adults requires a little more parsing of cases and doesn't get quite as many people as the waiver does. But there are other options available. And so if your state has been relying heavily on this and if you're concerned that they might just end it when the waiver goes away. Please reach out. We've been working closely with a lot of states on trying to kind of depending on their setup, navigate and and figure out what other options are

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Jennifer Wagner: available.

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Jennifer Wagner: Another important one, centered on renewals is conducting a next part day renewal when there's no hit in the income

or asset data sources.

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Jennifer Wagner: So, as you may know, pre prior to unwinding. If a State ran an X part day and got no information back from quarterly wage data. The work number, etc. Cms. Had instructed States to go through a manual renewal process. So they said that that's not confirmation of no income, that that is a a situation where you have to actually send a renewal.

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Jennifer Wagner: Well, there's a waiver available during unwinding at first it was limited to people who only had 0% income on their case prior to the unwinding renewal. Then it was extended to families with under 100% fpl income on their case. And this is created allowed X part day rates to increase substantially in a lot of States. We can look at States

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Jennifer Wagner: the month before and after they implemented this particular waiver. And you can see a jump of like 20% in some States. So this is really important to lift up and advocate for. And the good news here is that there's nothing in the regulations that prevents Cms from allowing it. It's an interpretation of the preamble of a rule way back in Aca implementation. So we're really hopeful that this one will be at least partially extended.

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Jennifer Wagner: Then there are 2 that fortunately the waiver is no longer needed, as Trish is gonna talk about in more detail. In a few minutes the eligibility enrollment rule that was recently finalized actually addresses some of the things that previously required An. E. 14. And those are the next 2 suspending the requirement to apply for other benefits, and accepting an updated address from a reliable source without having to send a notice to an old address. Even though that's

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Jennifer Wagner: fine to send a notice. The old address, a lot of systems couldn't actually execute this, and eligibility systems couldn't maintain an old and a new address, and so that effectively prevented States from taking these updated addresses. So both of those are addressed in the E and E rule, and a waiver is no longer needed

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Jennifer Wagner: another one that might be of interest to you all is permitting the designation of an authorized representative over the phone without assigned form. And so this has allowed application, assistants, navigators, etc, to help people remotely, both during the pandemic and during unwinding as kind of the model of service, has changed a little bit.

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Jennifer Wagner: Unfortunately, there is something in the regulations that explicitly requires. That there is a signature obtained either a written one electronic one, a telephonic one. And so this we don't anticipate being able to continue. Perhaps someday there'll be a rule change but as it stands right now, unless they decide to use E. 14 waivers indefinitely, or something. This is unlikely to continue.

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Jennifer Wagner: And finally, the last 2 we have here include waving the recording of the telephonic signature by the State. We know that individuals have to be able to sign a renewal or an application over the phone, but some states that were unable to make a recording of that were given a waiver to allow a State to just document that it was done.

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Jennifer Wagner: and a similar one is conducting it completing an x part day prior to termination, so states that were unable to run an X part day on all their population before sending a form. Cms allowed them to do what's called kind of a back end export day, that if the form wasn't returned the next part day, then

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Jennifer Wagner: now these are both structured to address noncompliance of the State with things that are required in the regulations. So our best guest here is that States are going to be able to maybe continue these waivers until they come into compliance.

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Jennifer Wagner: So that's great. But we also want the State to come into compliance as soon as possible. And so these waivers hopefully won't be available indefinitely. But just kind of as a bridge until states come into compliance. So these have all made a tremendous difference. We've learned a lot from them. And we need to kind of look at which waiver we want to continue others that we don't, and where the basis is to advocate for it, to continue and again, that those X

parking ones with no hit are really essential. And we're really hopeful that we're going to get some movement there.

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Jennifer Wagner: So I'm going to turn it over to my colleague Farrah, to talk about some other best practices that will hopefully continue post on winding.

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Farah Erzouki: Awesome thanks so much, Jen. So, as Jen mentioned, you know, states have taken up lots of good waiver options during the unwinding

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Farah Erzouki: and although many of the stat the status of many of them remains to be seen, states also innovated in many areas that didn't really require waivers or special permissions. And you'll see that there may be some overlap in the topics between best practices and waivers. And what's to come in the E and E rule which we'll talk about more. But, broadly speaking, these are the sorts of things that

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Farah Erzouki: you know, states innovated around that they can choose to do, and that fall around the way that States communicate with Enrollees, and how they reach them.

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Farah Erzouki: So we saw, you know, we saw States do all sorts of things ranging from public facing outreach like billboards and social media campaigns, to launching new methods of communicating with enrollees like text message campaigns, to be able to reach them directly.

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Farah Erzouki: and many States bolstered their outreach capacity in a pretty short amount of time, leading up to the unwinding, and really saw success in their ability to reach more people as a result of that and probably increase the amount of people they were able to keep covered.

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Farah Erzouki: So as the unwinding is coming to an end. We've heard, you know, from different states that

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Farah Erzouki: there might be thoughts around scaling back in their investments around these areas like outreach efforts and how much effort they make in their work in proactively communicating with their enrollees and sort of trying to focus their efforts more on the day to day and sort of the high priority areas that they've identified in their in their, you know, renewing their case loads and sort of just those those things that they

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Farah Erzouki: is really important. And obviously, those things are important. But you know, in addition to that, it's really important for States to sort of continue this proactive outreach within roleies and making sure that they are sort of continuing these practices on into the future that we've seen. Hold a lot of success.

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Farah Erzouki: So in your advocacy with your State agency sort of, in addition to promoting the obvious streamlining policies in the enrollment and renewal process. It's important to also continue this drumbeat around these best practices to reach people and keep them enrolled.

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Farah Erzouki: And you know, some of the methods are things that I've mentioned, like using text message and email to reach people conducting social media outreach and other public facing outreach and also things like using data sources like usps and manage care plans to update enrollee contact information.

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Farah Erzouki: when there's an indication that it's changed. And when you know, folks mail comes back as returned among other methods

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Farah Erzouki: so we're gonna talk about outreach efforts in greater detail later on in the presentation but with that I'll turn it back to Jen to talk more about the challenges that are ahead for States.

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Jennifer Wagner: Thanks, Fara. So next we're gonna talk about application processing timeliness. And not to say that we're moving on

from renewals. But there are some major operational issues that have in part been created by unwinding there's some serious challenges that are showing up in the forms of long call center. Wait times, delays and renewals, but also serious delays and applications, and many States have been dramatically understaffed. And we're during the pandemic.

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Jennifer Wagner: You then add on the renewal workload which many States weren't doing during the pandemic, and then also the increase in reapplications from people who lost coverage at renewal, and that was a recipe for disaster, and that's what we're seeing right now in a lot of states.

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Jennifer Wagner: So when we looked at unwinding, you know, when the Consolidated Appropriations Act passed way back. In December of 2022. We were all really excited about the Enforcement mechanisms in there. It gave Cms explicit authority to force a state to pause procedural terminations if there was a violation of requirements around redeterminations.

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Jennifer Wagner: Unfortunately, we did not see much enforcement by Cms. Or any enforcement by Cms. On that provision during unwinding. And one of the things that Cms consistently pointed to is that there wasn't an explicit violation of a requirement. So, for example, the regulations require a state to accept renewals over the phone, but they don't require a maximum wait time, and that states provide certain types of customer service over over the phone.

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Jennifer Wagner: And so that's why a lot of us have been kind of shifting to focus on application processing timeliness a a little bit, especially this year, and it is not connected to any of those temporary provisions in the Ca. Many of those provisions expire in June of this year. And again, they're required. We're related to redetermination requirements.

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Jennifer Wagner: The good news is that there is a longstanding requirement in the Federal regulation specific to app processing timeliness, and that's that they all have to be done in 45 days for most cases in 90 days. If a disability determination is required. And we're seeing States fall

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Jennifer Wagner: very much short of this. I'm talking about more than 60% of applications being processed on timely right now. And that's very concerning

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Jennifer Wagner: the other thing that's interesting about this particular issue is that pressure on this issue could lead to improvements elsewhere.

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Jennifer Wagner: So the app processing delays are usually result of lack of resources, of lack of staffing, of the system overall being bogged down. And so if there's pressure on a state to fix this, it could lead to improvements elsewhere. For example, export a rates. If you were to increase those rates of automated renewals, then there would generally be more resources to handle applications, and there'd be fewer reallocations from people procedurally denied

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Jennifer Wagner: and so, putting pressure on this could lead to improvements throughout the whole ecosystem.

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Jennifer Wagner: The good news is that we now have more current application, processing, timeliness data. That used to be posted like a 3 month snapshot used to be posted like a year later. That was not terribly useful. But now it's part of this unwinding data release. It's part of the operation snapshot that comes out at the end of every month, in addition to unwinding renewal outcomes. And so we're seeing that monthly. The most recent data is from December but it's much more current than it was before.

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Jennifer Wagner: and I also wanna flag flag that many states that are integrated, that administer snap and Medicaid together, are struggling with snap timeliness as well. And almost every State is on a corrective action plan, with fns related to snap application, processing, timeliness and or error rates. And so that's important to consider and to monitor that as well, because sometimes that can be lead to resources directed towards Snap and away from Medicaid.

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Jennifer Wagner: Sometimes it can lead to improvements and efficiencies in the overall system that frees up resources for both.

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Jennifer Wagner: But looking at this next slide here. This is a great visualization from Georgetown. That shows you where things are, as far as application, processing, timeliness.

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Jennifer Wagner: And you can see here that things are bad in a lot of states, I mean Fn. Or Cms. Has not set an explicit, explicit threshold of what compliance actually means with this requirement. But we can see that there's 7 States that are between 10 and 20 untimely one state between 20 and 30

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Jennifer Wagner: 5 states that about a third of their applications are being processed untimely right now, and 2 states that are in complete crisis with more than 40% of their applications being processed untimely.

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Jennifer Wagner: And it's important when you look at these data to look at the trends over months. So, for example, there were some states that obviously had some kind of extreme event, and fell behind terribly, but then recovered. So Kansas, for example, was in really bad shape a few day months ago, and seems to have turned the corner. And now they're not perfect, but they're not in kind of the dire straits that they were before. The other thing to consider. When you look at these data is that a state that's actually catching up.

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Jennifer Wagner: that's reducing their backlog may have really bad numbers for a couple of months. And that's because if they're actually processing those old cases.

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Jennifer Wagner: you know those. The application processing timeliness for that month is going to be really bad, because those cases came in a long time ago. And so it's important to look at the trends over time and the nuances to try to discern if a state is actually catching up and going to do better in in months ahead, or if they're following for following further and further into the abyss.

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Jennifer Wagner: So, as you mentioned as Ellie put in the chat. This is a a visualization that Georgetown has used, and they're tracking the application processing data, timeliness data as well as monthly application volume and they've got a comparison to pre pandemic as well as pre unwinding application volume levels.

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Jennifer Wagner: And that's important to both indicate how many people who are procedurally denied are coming back in suggesting that they were, in fact eligible but lost coverage inappropriately, and have to reapply to regain coverage, and that number also influences where the State is likely to be on that processing timeliness, because if they've had a huge increase in application volume, it's pretty unlikely that they're going to be able to keep up with the demand.

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Jennifer Wagner: So on the next slide, we talk about, what can you do about this? Well, one thing is something that a lot of us are working on advocating with Federal agencies to hold States accountable. This administration broadly, has had a real, strong emphasis on customer experience and customer service.

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Jennifer Wagner: And we think it's really important for them to say, this is not okay. It's not okay to make people wait 60, 90 days to get access to healthcare or food assistance. It's not okay to have 6 h. Wait times on call centers, and so we really appreciate the progress that Cms has made partnering with States, helping them implement waivers and and working with them to address issues.

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Jennifer Wagner: But there's also a a point at which we need the Federal agencies to really hold the States accountable and say, you need to fix this immediately. Otherwise we're gonna take action and so we appreciate more voices. You know, pushing on that issue.

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Jennifer Wagner: Another thing for you all to do at the State level is, look at state data. It's great to have federal data available. It's a couple of months late. A lot of states do post their own data on Medicaid and snap application process and timeliness. Some states. I don't know why they post it, because it's terrible. So it's it's

interesting that they do post it publicly. But take a look at your state and see if that's up there, and you're able to monitor that more closely.

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Jennifer Wagner: It presents a great opportunity here to look for win-win solutions. There are a lot of things that both streamline eligibility, determinations, or renewals and reduce workload.

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Jennifer Wagner: Obviously, X part day is one of the most classic examples there. An x part day. Renewal does not require casework or action in most cases, and those are folks who are not losing coverage and having to reapply. But obviously, that's a really great benefit to clients as well.

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Jennifer Wagner: So when you look at things that streamline eligibility, determinations, whether that's relying more heavily on data, sources, better forms, etc. You can often kind of sell that to the State as reducing workload and helping them free up resources to be more timely on application processing.

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Jennifer Wagner: This is also a message and issue that often resonates with legislature media other outside entities. So if the State is not receptive to the suggestions that you're making or they're not engaging with you, there's usually an opportunity to work with the legislature and the media to lift up both the problems and the solutions.

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00:28:49.850 --> 00:29:13.700

Jennifer Wagner: The State might point to their dramatic understaffing or lack of budget, and that might be legitimate. But in nearly every State there are opportunities to streamline. And if you can come up with some of those solutions and lift them up as okay. We know the State struggling. But here are these policy solutions. Here are these waivers, here are these strategies that they haven't implemented yet, and if they would implement this, it would greatly reduce this problem

94

00:29:13.700 --> 00:29:26.099

Jennifer Wagner: that makes it your messaging more effective. And hopefully, that legislature or media would go to the agency as well, and say, Okay, we've heard that you could do this, but you're not and

really put pressure on them to improve as well.

95

00:29:26.430 --> 00:29:49.840

Jennifer Wagner: And finally, another action step is if you are administered along with snap to monitor those corrective action plans. And the escalation process fns does have a more aggressive escalation process around things like application, processing, timeliness, and many States have received advance warning letters and maybe progressing to other State. Other steps in in that escalation process soon.

96

00:29:49.860 --> 00:30:07.549

Jennifer Wagner: and, unlike Cms. Fns, is requiring most States to submit corrective action plans around here, and those can be incredibly informative. They can say what goals the State is trying to meet you might find if they're diverting resources for Medicaid to work on snap or ideally, they're putting in place

97

00:30:07.550 --> 00:30:24.430

Jennifer Wagner: hiring initiatives, improvements, the eligibility systems, or other things that might help both snap and medicaid so if you're able to get a hold of those or work with snap focus colleagues. It's important to kind of get more information from that side to see what's happening that might affect Medicaid as well.

98

00:30:25.430 --> 00:30:39.350

Jennifer Wagner: Okay, next, we're gonna touch on compliance plans. And you may notice that I've got a crystal ball here as the Graphic, because we're not terribly sure what's happening next on these. But we've heard a lot of things we want to kind of give you the lay of the land as we understand it.

99

00:30:39.550 --> 00:30:58.150

Jennifer Wagner: But if we take a step back to the beginning of unwinding, we know that Cms identified that there were a lot of states that were, in fact, out of compliance with Federal requirements around redeterminations. And I'm not talking about this new E and E rule that came out. I'm talking about aca regulations that have been on the books for a decade.

100

00:30:58.150 --> 00:31:17.670

Jennifer Wagner: So there were a lot of states that identified that they were not conducting X part day renewals on all the population. You could not apply online or over the phone. They were not sending up

pre-populated renewal forms, etc. And so, as States identified these issues, Cms, then said, Okay, as long as you put into these into place these mitigation plans.

101

00:31:17.670 --> 00:31:26.169

Jennifer Wagner: you can get the enhanced F map. During unwinding, however, this is contingent on coming into compliance within 2 years from the end of unwinding

102

00:31:26.492 --> 00:31:35.319

Jennifer Wagner: and as Ali put in the chat. You can take a look at those mitigation plans and see what your State identified as an area of non-compliance, what they were doing about that as well.

103

00:31:35.590 --> 00:31:54.169

Jennifer Wagner: the question now is, when is the end of unwinding? As Ali talked about? States are in different places. Certain populations are done, others aren't. And so we're expecting Cms guidance pretty soon. That will tell us both. When is the end of unwinding and when it's compliance required. But also, what does compliance mean.

104

00:31:54.630 --> 00:32:16.489

Jennifer Wagner: For example, we know some States allow telephonic renewal, but they send out a form for a client to sign and send them back, and that that's not actually complying with allowing a full renewal by over the phone and accepting a telephonic signature. So we think that Cms is going to put out some more guidance on this timing, as well as more details. On what compliance with each of these provisions means

105

00:32:16.680 --> 00:32:27.720

Jennifer Wagner: States will have maybe 6 months. We don't know to submit compliance plans to say, this is our area of non-compliance. Here's what we're working on to remedy it. And here's when we expect it to be finished.

106

00:32:28.010 --> 00:32:41.819

Jennifer Wagner: Now, as I've flagged earlier, we think that there's some E fourteens that may be allowed to continue until a State comes into compliance, namely, around this back end, expert day process and things like not being able to record a telephonic signature.

107

00:32:42.100 --> 00:32:44.549

Jennifer Wagner: So this is really important. It's

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00:32:44.610 --> 00:33:00.560

Jennifer Wagner: essential that states come into compliance with these longstanding regulations. But I also wanna flag that it may not address some of the major customer service issues that States are experiencing and that we just talked about related to application, processing, timeliness. There are a lot of states that check the boxes.

109

00:33:00.560 --> 00:33:24.425

Jennifer Wagner: and they may allow a telephonic renewal, but it might be a 6 h. Wait time. They may have an online renewal, but you have to do identity proofing and can't actually get through it. And so everybody just does it on paper or something like that. So these are basically 2 parallel but very important lanes, compliance plans and overall state performance and operations. And on the next slide we talk a little bit more about what is compliance.

110

00:33:24.720 --> 00:33:37.110

Jennifer Wagner: So in this context, it is limited to places where there are clear Federal requirements related to redeterminations. So, for example, the Regs require that you attempt the next part day renewal for all populations.

111

00:33:37.110 --> 00:33:57.180

Jennifer Wagner: however, they do not set a minimum X part day rate. So we know that there are states that are struggling dramatically on timeliness and customer service that checks the box for attempting X part day renewal, however, their rate is 5 or something poultry. We don't anticipate that being addressed by a compliance plan that's more in the Operations customer service bucket.

112

00:33:57.350 --> 00:34:08.829

Jennifer Wagner: The Regs do require that state, send out pre-populated renewal forms, but there is no requirement on a maximum procedural termination rate, or a measure of how effective their overall renewal process is.

113

00:34:08.949 --> 00:34:19.110

Jennifer Wagner: You have to submit a be able to submit renewals through all modalities. But there aren't call center performance standards. You have to be able to transfer accounts to the marketplace, for all populations.

114

00:34:19.110 --> 00:34:42.612

Jennifer Wagner: determine eligibility on all bases which is essential for folks going from magi to non magi, or vice versa. But there aren't requirements for additional outreach or efforts to make sure that people complete their renewals. So these compliance plans are essential. It's something to watch for. We anticipate there being Cms releases around it, and it's a great opportunity to advocate for your State to come into compliance as quickly as possible.

115

00:34:42.929 --> 00:35:00.069

Jennifer Wagner: But there are some. This doesn't solve all the problems. Some of the States that are struggling. The greatest don't even have areas of noncompliance identified. And it won't necessarily address all these other operational challenges. So please think of them as 2 parallel lanes to to advocate for both of them.

116

00:35:01.130 --> 00:35:05.379

Jennifer Wagner: All right. With that I'll talk. Turn it over to Trisha to talk more about the new E and E rule.

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00:35:06.390 --> 00:35:21.180

Tricia Brooks: And jen before we move on. There was a question in chat I that might be more timely to answer now, and that was whether the snap. Corrective action plans are public.

118

00:35:21.490 --> 00:35:45.470

Jennifer Wagner: That's a great question. No, they are not. We are trying to get our hands on them. We know a lot of advocates are trying to get their hands on them. So if there's somebody in your state who works on Snap, you can check with them. We've encouraged a lot of our advocate partners on the snap side to reach out to their state. And we're hoping to be able to share, to get more information and share more information on that in the near future. But unfortunately, no, they are not public right now.

119

00:35:48.470 --> 00:36:04.130

Tricia Brooks: Thanks, Jen and if you haven't picked up on this, transparency is really important as we go forward, what? Whether it's in the data, whether it's in what States are expected to do to come into compliance. We know that

120

00:36:04.544 --> 00:36:25.705

Tricia Brooks: not all of the information that we need to help advocate for better outcomes is available to the broader community. But there's no reason why, even if Cms. Doesn't require it that you can't be advocating for your State to be more transparent with information like that.

121

00:36:26.495 --> 00:36:44.140

Tricia Brooks: So now we wanna change gears a little bit and talk about that E and E rule. Some people look at a 287 page rule and go. Oh, my goodness, the actual regulation section of that is more like 50 pages

122

00:36:44.553 --> 00:37:08.560

Tricia Brooks: but there's a lot of information in between including something called the preamble of a rule. And that's when Cms talks about some of the comments that they've heard and how they're responding to the comments with any potential changes, or how the rule in addition, a A actually affects that particular question.

123

00:37:08.560 --> 00:37:37.009

Tricia Brooks: So these rules affect Medicaid Chip and the basic Health plan. It was actually the second part of a rule that was proposed in September of 2022 but the first part which had to do with Medicaid savings programs those are the programs that help elderly pay their cost, sharing and and Medicare so over 65 that part of the rule was released previously.

124

00:37:37.640 --> 00:38:03.530

Tricia Brooks: So some of the provisions really hit on some of the issues that we've highlighted during the unwinding, and that is that States actually have different rules for non-magi and Magi renewal requirements. And some of those are more protective in Magi than they are in non magi, for example, requiring States to provide at least 30 days

125

00:38:03.530 --> 00:38:31.770

Tricia Brooks: before they, you know, act on a renewal if they haven't heard from someone, if they need that information. So those are the kinds of things that will make improvements to the Non Magi side, including, not only the 30 days to respond, but also sending out pre-populated forms, reiterating, you know that we have to have export renewals, so those renewal requirements are now

126

00:38:31.780 --> 00:38:34.200

Tricia Brooks: will now be aligned.

127

00:38:34.960 --> 00:39:02.479

Tricia Brooks: Then what on first blush appears to be a very complicated section on timeliness and performance standards. Currently, as Jen talked about in the requirements for timeliness of Medicaid, applications being 45 days for Magi and 90 days for non Magi. There were no other standards in terms of

128

00:39:02.670 --> 00:39:22.760

Tricia Brooks: how quickly you need to act on a renewal or a change in circumstance or transitions between programs and States are going to have to set standards for these that are within the Federal parameters that Cms has established in the rule.

129

00:39:23.302 --> 00:39:46.400

Tricia Brooks: And then I was really pleased to see this particular provision. As you probably have all known. During the unwinding. We've talked a lot about that 90 day reconsideration period where people can submit their information, even if their case has already been closed to have their eligibility reviewed or reconsidered.

130

00:39:46.400 --> 00:40:06.329

Tricia Brooks: And they don't have to fill out a brand new application for that. Well, that is going to be the same for changes in circumstances as well as new applications, so that will be a standard that aligns these requirements across the different types of eligibility transactions that occur

131

00:40:07.208 --> 00:40:12.050

Tricia Brooks: Jen mentioned this one and again, very helpful

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00:40:12.539 --> 00:40:36.990

Tricia Brooks: new provision that States can accept updated contact information from reliable sources that they name specifically to be the contracted, managed care organization. Since the State uses to deliver services. The Usps mail itself when mail is returned with a forwarding order. That would be an end state forwarding

133

00:40:36.990 --> 00:41:02.449

Tricia Brooks: order and then using the national change of address database at usps to proactively speak information about new addresses or address changes so States will be able to go ahead and update that

contact information directly without requiring further verification from the enrollee.

134

00:41:02.760 --> 00:41:27.059

Tricia Brooks: Now, the only thing is that there can be a long timeline for some of these changes, and although the rule is effective on June third of this year, most of the provisions are going to allow States 12 to 36 months to implement those particular changes. And it's going to be interesting, I think, to see how this interrelates

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00:41:27.060 --> 00:41:38.190

Tricia Brooks: to the compliance plans on renewals in particular, because this rule really is a big focus on on renewals going forward.

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00:41:38.500 --> 00:41:47.890

Tricia Brooks: And so we could see that Cms instead of giving States 2 years for those compliance plans that they're going to have 3 years, because all of this gets intertwined

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00:41:48.040 --> 00:41:49.530

Tricia Brooks: next slide, please.

138

00:41:50.590 --> 00:42:13.719

Tricia Brooks: and there are just a few things that we wanted to point out that are really important to eligibility enrollment that are not associated with the unwinding in any way. Although, actually, one of these might be. But I'll get there in a moment. First of all, that there have been some really interesting changes to

139

00:42:13.720 --> 00:42:30.779

Tricia Brooks: coverage for separate chip programs. So, as you all know, States have a choice of covering kids who are eligible for chip and using that higher chip match to enroll children in Medicaid. We talk about those as being M. Chip states

140

00:42:31.173 --> 00:42:59.130

Tricia Brooks: and those that coverage has to be exactly what Medicaid is, with one exception, and that is, the child must be uninsured. But a separate chip program has different rules, and some of those rules in the past have been have have not been helpful to keeping kids enrolled. So, for example, States have been able to lock kids out of coverage for a period of time.

141

00:42:59.400 --> 00:43:24.300

Tricia Brooks: If the family fails to make a premium payment. So car engine blows up. You have an \$800 bill. You can't make your premium payment this month. But guess what you get. Your child gets coverage loss, and in turn you have to wait 90 days before you can reapply for coverage. It forces a gap of uninsurance for many children. Those are going to be prohibited going forward.

142

00:43:24.300 --> 00:43:37.139

Tricia Brooks: No State can pick up a new lockout period as of the effective date. June third states that currently have lockouts will have to eliminate them within 12 months.

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00:43:37.970 --> 00:44:02.930

Tricia Brooks: The other provisioning separate chip programs has been that States could require individuals to wait before they're eligible for coverage require them to go through a forced period of uninsurance, because chip dollars can only be supporting coverage for an uninsured child might be another thing that we want Congress to revisit at some point.

144

00:44:02.930 --> 00:44:24.489

Tricia Brooks: because, actually, it cost a State less to deliver services if the child also has esi, but that has always was always a concern when Chip was originally enacted, that people would drop their private coverage to enroll in the public supported program. But

145

00:44:24.490 --> 00:44:37.699

Tricia Brooks: the jury, still out on, whether crowd out, as they call it, was a real thing. Did Chip have a big impact on that. And so now States will have to remove those waiting periods.

146

00:44:38.190 --> 00:44:58.040

Tricia Brooks: And then, although not many States had these annual or lifetime. Dollar limits were allowable in chip you saw this more frequently on the dental side of things, where you might be limited to a thousand dollar benefit and going forward. That's not gonna be allowed.

147

00:44:58.800 --> 00:45:07.488

Tricia Brooks: This next bullet is the one that I was alluding to when we turned to this slide that maybe this does have something to do with the unwinding, and that is that

148

00:45:07.870 --> 00:45:27.480

Tricia Brooks: much to our chagrin. Even if a State has data through an expert, a review that indicates the child is chip eligible. They still have to send that Medicaid pre-populated renewal form. They have to wait the 30 days for a family to send it back in, and then

149

00:45:27.680 --> 00:45:40.060

Tricia Brooks: Dms. Of guidance says it is at the State's discretion as to whether they enroll that child in chip or not, and guess what? There are certainly a handful of states that are not doing, that

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00:45:40.060 --> 00:46:00.239

Tricia Brooks: this rule is intended to get rid of that opportunity for States not to use that data, states will have some flexibility and how they implement it. But basically Medicaid and chip programs are going to have to accept a determination made by the other

151

00:46:00.240 --> 00:46:28.390

Tricia Brooks: program, and the best way for them to do that is to share an eligibility service which most States do. But this is going to hopefully eliminate some of the concerns we have about children that are not making it from Medicaid to chip during the unwinding if you remember the Urban Institute actually had estimated that 57

152

00:46:28.390 --> 00:46:57.590

Tricia Brooks: of children who were no longer eligible for Medicaid, including those in chip kids, would move to separate chip programs. And that is simply not happening. If you're what stay in tune to say and the Ccf data on enrollment and, by the way just to plug, we will be doing a report that catches everyone up on where enrollment is for kids as of the end of 2023. That's gonna be coming out in early May.

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00:46:57.930 --> 00:47:10.010

Tricia Brooks: Another couple of provisions you may be interested in. If you've been around as long as I have. You'll know that at some point there were some very onerous

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00:47:10.020 --> 00:47:29.659

Tricia Brooks: documentation requirements put in place for proving us citizenship or qualified immigration status. And then we finally went to electronic verification. But it was only if you were able to verify

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00:47:29.670 --> 00:47:35.510

Tricia Brooks: I your citizenship through your Us. Citizenship

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00:47:35.510 --> 00:47:47.310

Tricia Brooks: through the Social Security Administration that you didn't have to take another step. So now states do not have to have separate identity verification.

157

00:47:47.310 --> 00:48:11.159

Tricia Brooks: If the Us. Citizenship was confirmed through the State vital statistics records, or through the Department of Homeland Security. Save system. So that will hopefully speed up determinations for people whose Us. Citizenship cannot be determined directly through Ssa.

158

00:48:12.320 --> 00:48:21.369

Tricia Brooks: Also, as Jen mentioned, applicants will no longer be required to apply for other benefits as a condition of eligibility.

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00:48:21.370 --> 00:48:45.000

Tricia Brooks: And then this is gets into the weeds a little bit. But there's symbolism here. We have not updated the record keeping requirements for Medicaid since 1986, and, as you know, computers have become King of the hill instead of paper paper documents and files.

160

00:48:45.513 --> 00:49:09.140

Tricia Brooks: But what this will do is that hopefully it will bring States more in compliance with the documentation requirements. So they're not being noted as having an eligibility error. If they didn't have the documentation to show that they had information that verified someone's eligibility.

161

00:49:09.140 --> 00:49:37.580

Tricia Brooks: Big problem in the payment error rate measurement program that. The last it was paused during Covid, and once it restarted we found out that there were high eligibility errors that were reported by Cms. But the majority of those were due to a lack of documentation. So hopefully as States put these new requirements in place, we can eliminate that.

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00:49:38.040 --> 00:49:45.000

Tricia Brooks: And so we're gonna change gears just a little bit more

next slide, please.

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00:49:45.592 --> 00:50:14.959

Tricia Brooks: And just sort of stepping back a little bit. I mean, Jen and Farrah talked about, you know some of the action steps and maintaining best practices, and that States are gonna have to come into compliance with this new eligibility rule, as well as all of the renewal re requirements on the books. But when we take a step back and we think about what needs to happen in order to make the system work better for children and families.

164

00:50:15.660 --> 00:50:28.169

Tricia Brooks: If there was just one thing States could do, I would say I would put export a and improving those export rates at the top of the list, and Jen talked a lot about that, so I won't go into more detail about that

165

00:50:29.127 --> 00:50:53.160

Tricia Brooks: authority, my side, and a problem I have known about for 3 decades that I've been doing this work is that we really have lousy notices, and we send contradictory notices, and we send notices too late for someone to take action. We need to pay attention to this. We need to nail this form of communications with folks

166

00:50:53.573 --> 00:51:06.400

Tricia Brooks: in a better way. And a, you know, as we learned during the unwinding, using multiple modes to communicate with people, particularly when action is required. And we really need to.

167

00:51:06.400 --> 00:51:17.390

Tricia Brooks: you know, test these ideas and these notices out with people who have to read them. We used to talk it when I ran the healthy kids program in New Hampshire about

168

00:51:17.390 --> 00:51:41.790

Tricia Brooks: taking a look at 2 different ways of writing the same message in a letter and sh going to a community health center and going the waiting room and saying, Can you read this and tell me what you think it says, and see which one is more understandable. There's really easy ways to do consumer testing and their formal ways. But we need notices to resonate with the people that they're intended to

169

00:51:41.790 --> 00:51:43.810

Tricia Brooks: send a key message to

170

00:51:44.802 --> 00:52:04.130

Tricia Brooks: third in my bucket out here is data reporting and transparency. It is so important, that we continue to have access to data, and that we enhance those data so that we know what's happening and can advocate for rapid response when things are not going well.

171

00:52:04.130 --> 00:52:14.800

Tricia Brooks: And last, but not least, which is what we're going to end. This webinar on is talking more about outreach to reconnect eligible people with coverage next slide, please.

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00:52:16.130 --> 00:52:29.765

Tricia Brooks: So before I talk about boosting outreach and consumer support. I just wanna note that at the end of the month, as I had previewed earlier, we're gonna be

173

00:52:30.360 --> 00:52:54.450

Tricia Brooks: launching a new resource that we think will be helpful for you in advocating for your State to boost, outreach and consumer assistance, and it is going to have links to 50 state resources where we could find them on a on a variety of items. Now Natalie Lawson on the Ccf. Team, has done the heavy lifting on this project, and she's going to give you a sneak

174

00:52:54.450 --> 00:53:09.470

Tricia Brooks: in a few minutes. But I wanted to. Intro that because I think it will be helpful as you tackle some of these strategies that we're gonna talk about in connecting eligible kids and families with Medicaid and chip.

175

00:53:10.290 --> 00:53:32.899

Tricia Brooks: So I'm gonna start with targeted outreach. We have learned over time. That broad based outreach isn't doesn't always capture the attention of the people who need to hear the message, there's no one. Size fits all. So messages that are most effective are really tailored to resonate with different types of people.

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00:53:33.360 --> 00:53:57.090

Tricia Brooks: States also have the opportunity going forward out of this unwinding to directly reach out to individuals and families because they know who was procedurally disenrolled. Can we not do some

direct marketing. Can we not do some direct sharing with community health centers, with providers, people who.

177

00:53:57.090 --> 00:54:21.780

Tricia Brooks: we're procedurally disenrolled so that they can be on the lookout to hopefully provide them with additional assistance. But States can do that. Direct marketing states can look at things like, where, what's the proportion of people in different geographic regions that are losing coverage. Was it kids? Was it? You know, expansion adults who was losing coverage

178

00:54:21.780 --> 00:54:40.720

Tricia Brooks: coverage, so that the more we know about who is losing coverage. The more we can tailor that targeted outreach to those specific groups and disenrollment surveys can help us shed light on why people lost coverage, so that we can pay attention to that going forward and make other changes.

179

00:54:41.140 --> 00:55:03.729

Tricia Brooks: I would tell you that we've Alli and I, in particular, have been in on several state interviews. With other research. Partners. Asking, you know what what's been most effective? What are the top things that have been most effective in keeping people engaged. And I'm telling you that all of the States

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00:55:03.730 --> 00:55:14.160

Tricia Brooks: talk about the community partnerships, and about how providers and plans and family serving organizations have really helped

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00:55:14.700 --> 00:55:27.130

Tricia Brooks: to share the messaging broadly. So we want to continue to use those trusted messengers. But we need to nurture those community partnerships.

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00:55:27.130 --> 00:55:52.119

Tricia Brooks: And honestly, one of the best ways to do that is to have regional outreach coordinators that that's their job. It's sort of like in business where you have a sales and marketing force that are out there talking to customers selling the product. It's not any different in doing outreach and working on public benefits. We need to make sure that people know what's available

183

00:55:52.120 --> 00:56:06.529

Tricia Brooks: available to them and assist them in enrolling. And those community partners are a big part of spreading the word, but they need to be in the know. They need to have materials. They need to understand how the programs work

184

00:56:06.530 --> 00:56:16.770

Tricia Brooks: and outreach coordinators can help nurture and feed those community partnerships so that they continue to be robust and engaged.

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00:56:17.750 --> 00:56:29.919

Tricia Brooks: And then I'm gonna get to this a little bit, or Natalie will get to this a little bit more when she gives you a sneak preview. But one of the things that we've been doing in our outreach scan is looking at state websites.

186

00:56:29.920 --> 00:56:54.839

Tricia Brooks: I'm telling you that it is next to impossible to find a paper application on a handful of state websites. You have to be really persistent to find it, and if you don't know that it should be there, you might give up after the first or second try frequently asked questions. And you know, just general program information and making it clear who's eligible and how

187

00:56:54.840 --> 00:57:00.129

Tricia Brooks: to apply. Is that information all easy to find on state websites.

188

00:57:00.630 --> 00:57:20.200

Tricia Brooks: The other thing is that you know, we may be moving forward and using computer systems for eligibility. But are we keeping track of changes in the real world where smart mobile devices are becoming much more popular than computers, and those the

189

00:57:20.320 --> 00:57:34.730

Tricia Brooks: online applications and online accounts that we have don't necessarily translate into easy to use apps on a smartphone, and we know that only about a dozen States have created

190

00:57:34.730 --> 00:57:59.079

Tricia Brooks: apps for applications so encouraging your State to do that would be really helpful. Leveraging social media. All, all of the

States have social media accounts, so most of them have more than one. Are they being really active on those accounts, and if they're not, they can use them more of their cost, effective way to reach people. And then, lastly, the one of the things that

191

00:57:59.160 --> 00:58:24.110

Tricia Brooks: we have in the outreach scan are noting where states have, how to videos, how to apply, how to renew, how to open an account even how to reset your password. These are like 2 and 3 and 4 min videos that are really helpful to guide people through these processes. So these are some of the things your state can be doing, and we certainly would encourage you

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00:58:24.340 --> 00:58:32.869

Tricia Brooks: to be advocating for the State to do more in each of these areas. And I think I'm gonna pass it off to Sandy from there.

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00:58:33.960 --> 00:58:34.773

Sandy Won: Thanks, Tricia.

194

00:58:35.280 --> 00:58:59.760

Sandy Won: So before we get to Natalie's scan of state resources, we just wanted to do a little bit of a a overview on some messaging that we think is important. Now that the continuous coverage provisions are behind us and we're moving forward in a regular Medicaid cycle. What we think is important especially, and these messages are mostly geared towards families with kids. But we do think, broadly speaking.

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00:58:59.820 --> 00:59:08.090

Sandy Won: it's important to just remind people that renewals are happening every year now. And so if you've got medicaid coverage, if you've got

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00:59:08.510 --> 00:59:21.529

Sandy Won: something that you've got an appointment plan soon that you should check in with your State Medicaid agency to make sure that you're you're covered. Make sure kids are covered. But really sort of driving home the point that renewals are happening every year.

197

00:59:21.600 --> 00:59:44.980

Sandy Won: The second message here is really for those who might have realized that they've lost coverage. But don't realize that their kid may still be eligible because of the higher eligibility limits for

children. So the message here is just your child may qualify, even if you don't. So if a parent has lost coverage that they should still check to see if their kids can be enrolled in Medicaid or Chip.

198

00:59:45.150 --> 00:59:53.600

Sandy Won: and really highlighting that income level. So folks, parents, caregivers can see what that number is and see themselves in that message.

199

00:59:53.880 --> 01:00:07.680

Sandy Won: Then the last message here is just that Medicaid and chip enrollment goes year round. So there is no special or open enrollment season that you need to apply during, but that this is something. As soon as you find out that your child doesn't have coverage, you should go

200

01:00:07.680 --> 01:00:26.839

Sandy Won: and get the resources. You need to find out how to enroll again, just opening this up to a year round enrollment message. So parents can take action right away. And really all these messages are intended to drive parents, caregivers directly to resources where they can reconnect their kids to coverage.

201

01:00:28.340 --> 01:00:30.660

Sandy Won: and I will pass it on to Natalie.

202

01:00:32.630 --> 01:00:52.659

Natalie Lawson: Thanks so much, Sandy really excited to share this work with everyone today. So we completed a scan of outreach related activities for all 50 States and DC Medicaid agency websites as well as integrated State based marketplaces or Sbm websites and other accounts. When it was applicable.

203

01:00:53.000 --> 01:01:07.980

Natalie Lawson: So we organize the scan into several sections which you can see on the right hand side of our slide. We have links to the agency and Sbm websites that we used as well as enrollment landing pages and portal landing pages.

204

01:01:08.624 --> 01:01:34.380

Natalie Lawson: Next was social media, where we found agency accounts for Youtube, Facebook, Instagram and X, or formerly Twitter. Among others, we also have how to videos, general outreach activities from

states, language supports and community based assistance. So now, the moment you've all been waiting for, I'll have Rachel stop sharing her slides

205

01:01:34.470 --> 01:01:37.139

Natalie Lawson: that I can share my screen quickly.

206

01:01:42.670 --> 01:01:45.779

Natalie Lawson: Excellent! And I can see Tricia. So, Tricia, can you give me a thumbs up

207

01:01:46.300 --> 01:01:48.970

Natalie Lawson: if you can see my screen? Excellent! Thank you so much.

208

01:01:49.450 --> 01:01:52.210

Natalie Lawson: So as you can see here.

209

01:01:53.040 --> 01:01:57.399

Natalie Lawson: this is an example of our table. For how to videos.

210

01:01:57.850 --> 01:02:02.179

Natalie Lawson: So we have all 50 states here with totals at the bottom.

211

01:02:04.050 --> 01:02:10.539

Natalie Lawson: we have this divided into 4 different columns. So first we have portal and account creation.

212

01:02:11.022 --> 01:02:21.889

Natalie Lawson: How to apply videos, renewal, and then unwinding renewal videos as well, and we will have links included in the scan as well.

213

01:02:22.330 --> 01:02:23.570

Natalie Lawson: And the next

214

01:02:24.080 --> 01:02:38.509

Natalie Lawson: is an example of more of a visualization here. A map. This is a map of the number of social media accounts operated in each

State. We have it on a scale of 0 to 6 here.

215

01:02:39.600 --> 01:02:59.489

Natalie Lawson: so you're able to roll over a state and see what platforms they operate. Accounts on. So South Dakota here operates a Youtube account X, Facebook and Instagram and then in Minnesota they operate the same 4 accounts as well as a threads account. And Vimeo.

216

01:03:00.602 --> 01:03:02.849

Natalie Lawson: so that is all.

217

01:03:03.260 --> 01:03:13.370

Natalie Lawson: And so we hope this is gonna be a really useful resource for advocates and states as we move out of unwinding. So I'll pass it back to Fara for our Q. And a.

218

01:03:14.701 --> 01:03:39.320

Tricia Brooks: Farrah, before you jump in. I I just wanted to add, I I think there was a another question in the chat about when hopefully, by the end of the month we're we're close. It's it. It's been an interesting 6 month project getting dragged out a little bit but, we're really excited about this. I I'm not aware of any resource of this

219

01:03:39.320 --> 01:03:53.670

Tricia Brooks: sort. At least I've never seen anything, and we're just really hoping that you can find good examples of things that you can go and show your state and say, Look what such and such a State's doing. Can we do something like this.

220

01:03:58.500 --> 01:04:01.376

Farah Erzouki: Great, so we can go ahead and start with some questions.

221

01:04:01.930 --> 01:04:14.249

Farah Erzouki: I'll start with a question that was submitted in the chat. Is there any chance that the 0 income and under 100 fpl income options for Xp party will continue after the unminding.

222

01:04:14.790 --> 01:04:38.659

Jennifer Wagner: Yeah, those are the ones that I referenced on the E 14 chart. That we are hopeful because there is no actual regulatory

constraint preventing that. It's it's allegedly part of the preamble to one of the old rules. And how Cms has interpreted that? So we group those as the 0%, the 100% and the no hidden Avs as kind of collectively. 3. No hit strategies.

223

01:04:38.939 --> 01:04:52.080

Jennifer Wagner: That it's really important for Cms to allow to continue in order to keep those exparte rates high. We fear that the the tremendous increase we've seen during unwinding could dip back down. If those aren't continued, and we we hope there's a path forward. There.

224

01:04:53.880 --> 01:05:02.990

Farah Erzouki: Great next question, does the person need to give consent to the Mcco to have the Mcco provide updated address information to the State.

225

01:05:04.760 --> 01:05:05.410

Jennifer Wagner: No.

226

01:05:07.200 --> 01:05:11.019

Jennifer Wagner: that doesn't require a consent. It's it's a file that gets shared back to the State.

227

01:05:11.780 --> 01:05:35.930

Jennifer Wagner: So they do have to make sure the Mcco has to have gotten it from the client. It's themselves the Enrollee. So we are wary of bad address information. Some of you may know that Lexis, lexis nexus, and others claim to know the real address of people and that that has caused problems with inaccurate out of state addresses old addresses and things like that. So Cms is doing a good job of walking the line between

228

01:05:36.020 --> 01:05:42.209

Jennifer Wagner: updating addresses from third parties, but also making sure that those addresses are accurate, and came from the individual themselves.

229

01:05:43.170 --> 01:05:54.799

Tricia Brooks: I I think that we'll see that any guidance that Cms puts out on this rule will mirror the guidance that they put out for the unwinding on the E. 14.

230

01:05:56.750 --> 01:06:19.639

Farah Erzouki: Great, and folks as a reminder, you can submit questions through the QA. Function. We have a few more. So I'll go through them now. So the next one is, what does the definition of separate chip programs mean? I was under the impression that this was Rep, referring to states like Florida, that have separate agencies administer Chip from the Medicaid program similar to State based marketplaces and Medicaid programs.

231

01:06:20.160 --> 01:06:39.350

Tricia Brooks: It it? That's a good, great question, but it's not limited to states that ha! Have actually a separate, you know, agency that's administering chip. Sometimes they're in the same agency, but the State chose to have it as a separate program.

232

01:06:39.788 --> 01:07:00.860

Tricia Brooks: Because they wanted to have the greater flexibility that chip offers chip allows States to have limitations on benefits, even though they, you know, not gonna have any dollar limits going forward. But what benefits are offered. Chip does not have to cover Epsd

233

01:07:01.286 --> 01:07:08.960

Tricia Brooks: so there are a handful of other States. We have seen a movement of some separate chip programs

234

01:07:08.960 --> 01:07:33.210

Tricia Brooks: moving into an M. Chip State, North Carolina, Illinois, all were very recent where they said, you know what? It doesn't make sense for us to administer these as separate programs. We appreciate the funding that's out there for Chip. We would never want it to go away. But there's some logic in that. And so it is simply a matter of the designation that the State has

235

01:07:33.240 --> 01:07:37.079

Tricia Brooks: chosen. The other thing is that

236

01:07:37.770 --> 01:07:57.554

Tricia Brooks: if you choose to cover pregnancy in chip beyond. The kids. You expand it to pregnant people. Who are adults. That has to be a separate program. It would have to be listed as a separate program. So there are some other reasons for that. And

237

01:07:58.190 --> 01:08:24.659

Tricia Brooks: the way that we report our in the 50 State survey. You can see which States have a separate chip program for children simply in the table one. Maybe we can get that dropped in the chat real quick of the 50 State survey that we do with Kf every year where there's an actual column for separate chip program. If there's nothing in that column. That means all the kids are in Medicaid.

238

01:08:27.569 --> 01:08:31.989

Farah Erzouki: Awesome. So our next question is asking about the timeline for compliance plans.

239

01:08:33.124 --> 01:08:33.839

Farah Erzouki: So

240

01:08:33.909 --> 01:08:38.069

Farah Erzouki: states. Cms mentioned that States have 2 years to come into compliance

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01:08:38.760 --> 01:08:47.759

Farah Erzouki: with what was stated in their mitigation plans is that 2 years after the unwinding ends, especially when given, we don't know. We have. There's some uncertainty around compliance plans.

242

01:08:48.260 --> 01:08:57.865

Jennifer Wagner: So this is the 1 million dollar question. In the mitigation plans, it said. 2 years from the end of unwinding and that was always assumed to be, you know, mid 2026

243

01:08:58.426 --> 01:09:23.080

Jennifer Wagner: with the end of the unwinding happening, you know, over the next couple of months. In theory as the unwinding has been more complicated than expected. States have pushed off children's renewal for a year. Some States have gotten 18 months. And Cms is encouraged. States. Take more time and be more careful. We're uncertain how they're gonna define the end of unwinding. That's what the guidance that Cms is working on will hopefully share. It could be theoretically the end of 2025,

244

01:09:23.080 --> 01:09:28.379

Jennifer Wagner: for is the official end of unwinding. So states have to come into compliance by the end of 2,026,

245

01:09:28.380 --> 01:09:40.889

Jennifer Wagner: we anticipate that it will be a single date for all States to simplify things rather than having each State's timeline. different. So stay tuned watch from releases to to answer that question officially.

246

01:09:41.899 --> 01:09:42.620

Jennifer Wagner: Great.

247

01:09:43.420 --> 01:09:48.080

Farah Erzouki: And our next question can the State share? Address information with third parties?

248

01:09:48.689 --> 01:10:16.757

Jennifer Wagner: Depends what the third party is. There are requirements around for the administration of programs under the state plan and things like that. So there's data sharing allowable. But it depends what it is. So if there's a specific third party you're wondering about we could, you know, try to answer that question, but it's usually has to be related to the administration of Medicaid. So, for example, the State shares it with the Mcco right, because they might do outreach or send you information that's part and parcel to you receiving Medicaid

249

01:10:17.279 --> 01:10:24.849

Jennifer Wagner: but it doesn't mean that they could share it with the housing authority to do outreach to you. That one's a little trickier. So it depends on who the third party is.

250

01:10:25.510 --> 01:10:31.300

Tricia Brooks: And they would have to have data sharing agreements in place with the 2 parties.

251

01:10:34.820 --> 01:10:45.009

Farah Erzouki: Will Cms be offering states any incentives or ta programs to monitor modernize their data systems in order to pro improve export rates for those who are lagging in this area.

252

01:10:45.270 --> 01:11:10.230

Jennifer Wagner: Yeah, that's a great question. And fortunately the answer is, yes, they have been. Cms has been partnering with us

digital services which is actually a kind of tech focused entity based in the White House that does different projects for Federal and State entities. And so we can dig it up and and share it. But there was a great case study shared, looking at the different states that Usds has worked with and how they've helped implement waivers connect with

253

01:11:10.230 --> 01:11:33.729

Jennifer Wagner: more data sources. Usds has been in the room with the State agency and the vendor and gotten some changes made very quickly. And so there's a whole playbook they've developed. They've engaged with civic tech partners as well like code for America to expand their reach and work with other States. So the good news is, there are a lot of resources out there to help with the actual implementation of X part day. The question is, are all States willing?

254

01:11:33.730 --> 01:11:45.810

Jennifer Wagner: Are all States interested? Some of the States, with the lowest export? Day rates are not as open to the assistance but if your state needs some help, please reach out to us and and we'll make sure that they get connected to folks who can help them.

255

01:11:46.480 --> 01:11:47.180

Jennifer Wagner: Hoop.

256

01:11:47.420 --> 01:12:01.319

Farah Erzouki: And going off of that last question. On a related note. What is preventing Cms from enforcing ex parte compliance more stringently? Is it because they don't have, because states don't have the capacity to make these improvements more quickly?

257

01:12:02.060 --> 01:12:09.159

Jennifer Wagner: I mean the issue right? There is. There is nothing in the Regs beyond. You must conduct an Xp review.

258

01:12:09.491 --> 01:12:34.119

Jennifer Wagner: The the Regs do not have a minimum standard for the minimum rate of export type. And so Cms has looked where there are explicit violations with the policy. That's what led to the whole individual versus household issue last fall, where they did put serious pressure on States to fix that issue. And that is hopefully is driving up exported rates and minimizing coverage loss for children. But there is not a requirement to

259

01:12:34.120 --> 01:12:50.110

Jennifer Wagner: use a certain set of data sources there aren't requirements on the logic there within the system. For the X part day process Cms is putting out more guidance some of their partners are, you know, putting more ta and tools out of making it sure that states, making sure that States know what they can do

260

01:12:50.370 --> 01:12:59.990

Jennifer Wagner: and where there are requirements. But the fundamental problem is that there is no. The regulations are not as strong in this area as they could be, and so they don't have the grounds for enforcement.

261

01:13:01.320 --> 01:13:26.310

Tricia Brooks: Well, I think there are also issues around. What penalties Cms can assess. So the Consolidated Appropriations Act gave some very specific new authorities to Cms to act on discrete components of the process, or data reporting that don't exist in in statute

262

01:13:26.310 --> 01:13:45.690

Tricia Brooks: or rags other than a broad authority that Cms can withhold Medicaid dollars. Right? So one area that would improve this going forward, I think, is for there to be a statutory change that gives Cms very explicit ability to penalize the State for

263

01:13:45.690 --> 01:13:57.240

Tricia Brooks: specific things. You don't take all their Medicaid money away for just one item that is causing a problem for 1% of the population is, it's we don't throw the baby out with the bath water.

264

01:14:01.040 --> 01:14:15.030

Farah Erzouki: Great and perfect timing for our last question going off of the question about sharing information from the State agency to third parties, so can the State share address information with the State Primary Care Association.

265

01:14:17.490 --> 01:14:20.309

Tricia Brooks: Think the answer is the same. There's

266

01:14:23.530 --> 01:14:52.399

Tricia Brooks: right? Now, a lot of providers have access to the medicaid records, so they can see, you know, information about the

Enrollee, including the address. So it's not that that information is hidden from them, but I think the question is, can they proactively say, oh, here's a bunch of people that we have changes of address from. I think the and I'm happy to hear what Jen has to say on this

267

01:14:52.400 --> 01:15:15.310

Tricia Brooks: the issue would be that you you wouldn't send addresses to a provider that wasn't the provider for that person right? There would be no reason to right. And so is the Primary Care Association able to identify that this person's connected with that primary care with that Chc. And get the information to the right

268

01:15:15.320 --> 01:15:24.399

Tricia Brooks: person. So I I think it's a little trickier than having an intermediary, like a primary care association. But Jen may have different thoughts.

269

01:15:24.710 --> 01:15:50.239

Jennifer Wagner: Yeah, I would just expand. Depends what the purposes. If it's for the Pca to somehow do outreach we saw a lot of data sharing happening during unwinding with entities like Mcos that were helping with renewal, outreach and the States share not only address information as they had been but dates of renewal, so that the Mcos could do targeted, outreach, and expand the States capacity. So if if it were like that, and, as Tricia said if they were a patient of

270

01:15:50.240 --> 01:15:59.259

Jennifer Wagner: people associated with the Pca. And it were related to the actual administration of Medicaid, there there could be an avenue there. But it all depends on on what purpose.

271

01:16:05.420 --> 01:16:09.750

Farah Erzouki: I think that's it for questions. I'll turn it over to Tricia to close us out.

272

01:16:10.860 --> 01:16:32.149

Tricia Brooks: Well, thank you all for joining us, I think. Most people hung in there for a very eclectic mix of information. But we're always here to support your efforts. And we love hearing from what's from you about what's going on in your state. So stay tuned, and we hope to see you soon.

273

01:16:33.730 --> 01:16:35.100

Jennifer Wagner: Thanks! Everyone take care!

274

01:16:35.610 --> 01:16:36.210

Tricia Brooks: But time.