

CABINET FOR HEALTH AND FAMILY SERVICES

Interim Joint Committee on Health Services
June 21, 2023

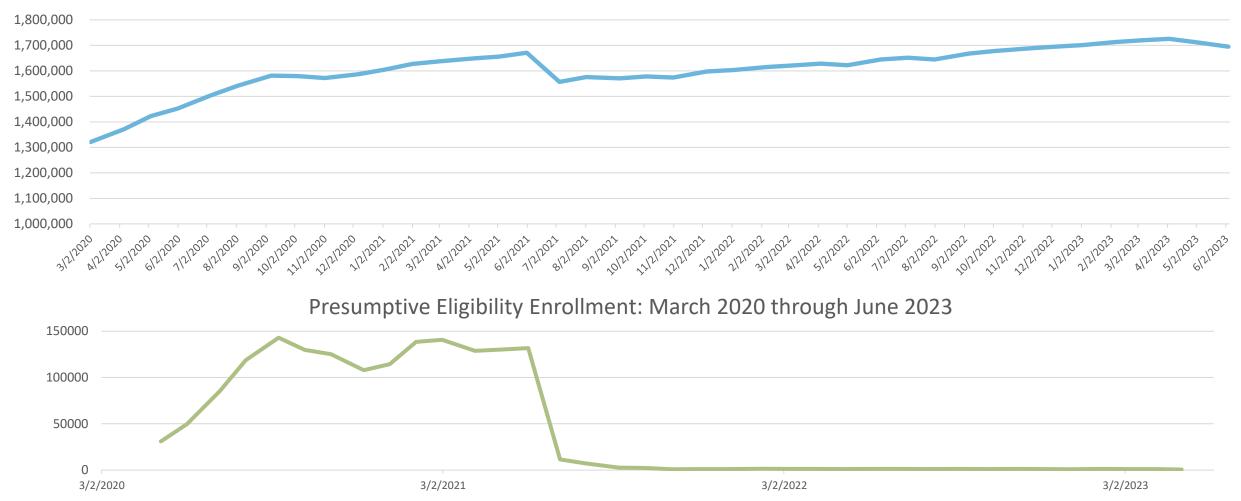
Public Health Emergency

Veronica Judy-Cecil, Senior Deputy Commissioner
Department for Medicaid Services



Medicaid Enrollment during PHE

Medicaid Enrollment: March 2020 through June 2023





Renewal Caseload Distribution

Renewal Due Date	Caseload Distribution Count	Percent of Renewals
5/31/2023	72,430	8%
6/30/2023	79,533	8%
7/31/2023	48,490	6%
8/31/2023	48,461	6%
9/30/2023	80,369	9%
10/31/2023	78,498	9%
11/30/2023	58,604	7%
12/31/2023	58,065	7%
1/31/2024	83,087	10%
2/28/2024	89,097	10%
3/31/2024	88,492	10%
4/30/2024	87,477	10%
Total	874,602	100.00%

Updated 6/1/23



May Renewal Data as of June 2, 2023

<u>Individual</u> count – 74,004

Medicaid Approvals – 37,182

- Passively renewed 26,835
- Actively renewed 10,347

Pending – 2,698

Medicaid Terminations – 34,124

- Determined ineligible 9,404
 - QHP/APTC eligible 5,967
 - QHP enrolled 460
- Procedural reasons 24,720

Reinstated w/in 90 days - 0



May Renewal Outreach as of 6/2/23

23,208 active renewal notices mailed

20,983 passive renewal Requests for Information (RFI) mailed

9,405 email messages sent relative to renewals

791 Alert Calls Made



- 1,982 cases undeliverable by mail. All have been acted on.
- 41,801 outreach calls have been conducted
- 16,371 calls have been received related to renewals



16,956 Nudge Messages Left

1,183 Alert Messages Left



^{*}Alerts notify active renewal of upcoming renewal

^{*}Nudges are sent when member response requires additional information or member has not responded

June and July Renewals as of 6/2/23

79,533 Medicaid Renewals due 6/30/2023

57,196 Passive Cases

22,337 Active Cases

2,893 Active Renewals Completed for June

Determined Eligible	2,295
Determined Eligible for QHP/APTC	134
Eligibility Terminations	598

52% of passive cases automatically renewed

48,490 Medicaid Renewals due 7/31/2023

39,236
Passive Cases

9,254 Active Cases

73 Active Renewals Completed for July

Determined Eligible	67
Determined Eligible for QHP/APTC	12
Eligibility Terminations	6

July passive cases will run on 6/10/23



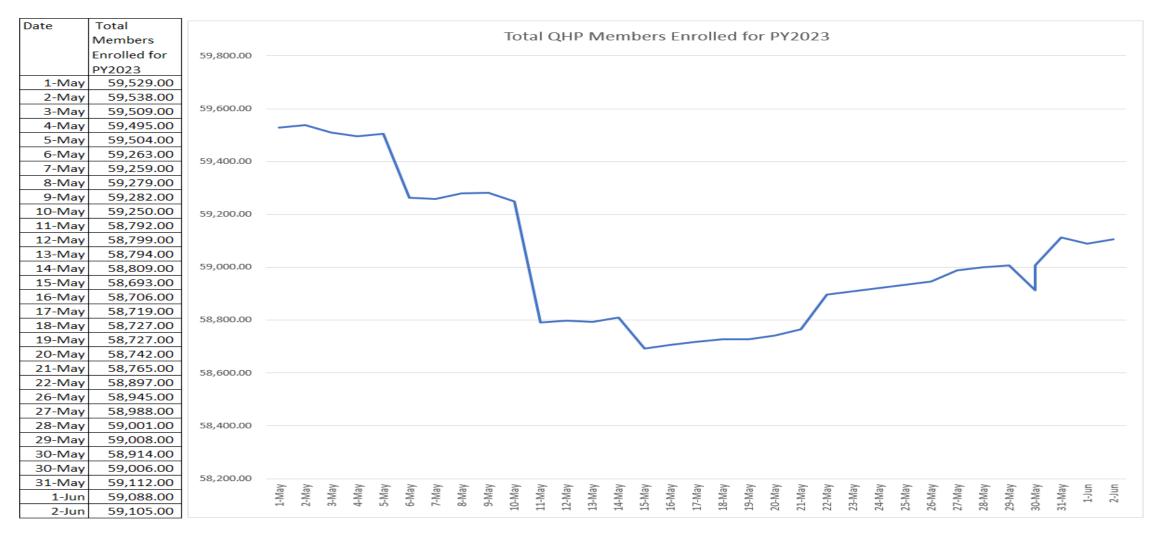
June and July Renewal Outreach as of 6/2/23

Active Renewal Notices Mailed June: 22,337 July: 9,254 **Notices undeliverable by mail:** June: 1,071 July: 211 Passive Renewal Requests for 94,483 outreach calls to date Information (RFI) Mailed 33,858 calls received on renewals to June: 27,727 July: 0* date **Email Messages Sent On Renewals** June: 48,622 July: 32,837



^{*} July passive cases will run 6/10/23

Qualified Health Plan Enrollment as of 6/2/23





PHE Flexibilities

This is not a full list of all flexibilities. Please reference the **KY PHE Flexibility Tracker** for full information.

Ending May 11, 2023

- Suspension of provider revalidations
- Use of unlicensed facilities as alternative locations
- Hospital 20% add-on to DRG for COVID-19 diagnosis
- Nursing Facility \$270 per diem add-on
- Second Presumptive Eligibility (PE) period in CY

Extended through PHE Unwinding

- LTC Resource disregard
- 90-day period to file an appeal and for the state to make a decision
- Telehealth audio-only
- Non-HIPAA platforms extended through 8/9/23*
- Re-enrollment of member MCO if within 120 days

Permanently Implemented

- Nurse Aide applicants' use of I-9 instead of Social Security Card (907 KAR 1:250)
- Expanded telehealth (907 KAR 3:170)

*Following <u>CMS guidance released on April 11, 2023</u>, Office of Civil Rights is providing a 90-calendar day transition period for covered health care providers to come into compliance with the HIPAA rules with respect to their provision of telehealth (begins May 12, 2023 and will end on August 9, 2023).



Enhanced Federal Match Phase Down

Continued receipt of enhanced FMAP from April 1, 2023 to December 31, 2023 contingent upon the following conditions:

- Comply with federal requirements and any other strategies approved (or required at a later date) by the Department of Health and Human Services
- "Attempt to ensure" up-to-date enrollee contact information (including mailing addresses, phone numbers, and email addresses)
- Do not disenroll anyone who is determined ineligible for Medicaid based on returned mail, without first making a good faith effort to contact the individual using more than one modality
- Eligibility standards, methodologies, or procedures cannot be more restrictive than those in place as of January 1, 2020

Transition Period	FMAP Enhancement
Beginning of the PHE through March 31, 2023	6.2 percentage points (as under Family First Coronavirus Response Act (FFCRA))
April 1, 2023 through June 30, 2023	5.0 percentage points
July 1, 2023 through September 30, 2023	2.5 percentage points
October 1, 2023 through December 31, 2023	1.5 percentage points
January 1, 2024	FFCRA FMAP bump expires



KY PHE Website Resources

https://medicaidunwinding.ky.gov



During the COVID-19 Public Health Emergency (PHE), the Kentucky Department for Medicaid Services (DMS) made sure that all Medicaid beneficiaries kept their coverage. DMS stopped all annual renewals. But soon, DMS will begin annual renewals for Medicaid members. You may be at risk of losing Medicaid coverage if we cannot reach you. You should update your contact information as soon as possible and keep it updated so Kentucky Medicaid is able to reach you when it is your time to renew!

Please update your information as soon as possible!

Visit <u>kynect.ky, gov</u> or call kynect at 855-4kynect (855-459-6328) to update your mailing address, phone number, email and other contact information.

Kentucky Medicaid will then be able to reach you when it is your time to renew

ittns://khhe kv.gov

Kentucky PHE Plans and Reports

Through the PHE Unwinding, Kentucky will be prioritizing transparency across all operations and progress through the unwinding. The following materials will provide insight to all operational plans and up-to-date information on our progress through the 12-month unwinding period. Additional reports will be added to this section as they are available.

- Kentucky Unwinding Approach March 2023
- Kentucky PHE Flexibilities Tracker
- Renewal Redistribution Report
- System Artifact Report

Stakeholder Session Information

KY PHE Reports

FAQs

Medicaid Member Information

Medicaid Provider Information

Communication Materials

Communications Materials

If you should need any materials to share with your customers or partners, please feel free to leverage the following resources, developed and approved by Kentucky Medicaid.

Member Information Brief español

Member Renewals Information español

Provider Information Brief

Alternative Coverage Options español

Qualified Health Plan (QHP) español

Medicare Enrollment (Members)

Medicare Enrollment (Provider)

How to Access Your Renewal Date

How to Access Your Patient's Renewal Date

KY PHE Renewal Pathway Brief

Provider Renewals Guidance Document

Stakeholder Sessions

In March, DMS hosted Stakeholder Engagement meetings to provide information about the PHE Unwinding and Medicaid renewals. You can find the materials from those sessions here:

- Presentation Recording KY PHE Stakeholder Engagement Meeting Recording March YouTube
- Presentation Slides
- Kentucky Unwinding Stakeholder Frequently Asked Questions Document

To help support Medicaid partners, DMS is holding virtual stakeholder forums.



Please join us for the Monthly Stakeholder Meeting every third Thursday at 11:00 am ET.

If you have any questions for DMS that you would like for us to speak to during the upcoming monthly meeting, please submit those questions through this <u>survey</u>. Thank you!

In addition, Thursday, April 20th we will be hosting a Provider Informational session on Medicaid Renewals and the PHE unwinding, Please <u>register for the event</u> to learn about updates specific to providers and hear answers to some of your questions!





Questions

