Strategies used in Minnesota for the unwinding of Medicaid and CMS post Public Health Emergency: July 2023

Timothy Schulz BA Julie Sabo PhD, RN, APRN, CNS, FCNS

Introductions







Julie Sabo

- Project Sponsored by the St. Catherine University Summer Scholars 2023
- Funded by Mary T. Absolom Endowed Fund for Health Policy Research for Nurses (St. Catherine University Alumni)

Background & Significance

- COVID outbreak in January 2020
- Public Health Emergency (PHE 319) Declared
 - Allowed the HHS secretary to waive or modify certain Medicaid/CHIP requirements
 - Allowed for Medicaid continuous enrollment in exchange for enhanced federal funding
- Consolidated Appropriations Act (CAA) delinked continuous enrollment March 31, 2023
 - Requires all Medicaid enrollees to redetermine eligibility

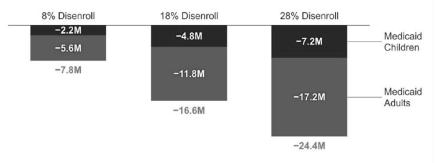
Potential Impact

- Kaiser Family Foundation (KFF) estimated 8-24 million disenrolled in US by May 2024
- HHS estimated 15 million
- Disenrollments will vary by state based on policy choices and administrative infrastructure
- 1.5 Million Minnesota residents currently enrolled
- 25% increase of Minnesota Medicaid enrollees since beginning of PHE

Kaiser Family Foundation, April 26, 2023

Between 8 and 24 Million Enrollees Could Lose Medicaid When the Continuous Enrollment Provision Unwinds.

Number of People Losing Medicaid Between March 2023 and May 2024 Under Three Scenarios



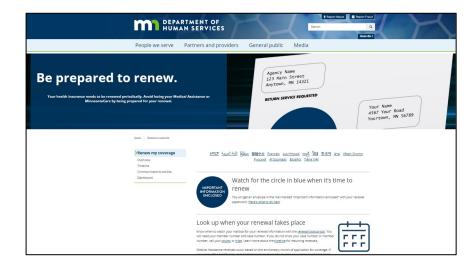
NOTE: Excludes all Children's Health Insurance Program enrollees and Medicaid enrollees who were only eligible for partial benefits. Children includes all enrollees under age 19. Analysis assumes that 87.5 million people were enrolled in Medicaid in March 2023. SOURCE: KFF estimates based on analysis of enrollment data from the Centers for Medicare and

SOURCE: KFF estimates based on analysis of enrollment data from the Centers for Medicare and Medicaid Services (CMS) Performance Indicator Project (PI data), and the T-MSIS Research Identifiable Files, 2019. See methods of KFF's How Many People Might Lose Medicaid When States Unwind Continuous Enrollment? for more information.



Public's Awareness of Unwinding

- 65% enrollees unaware
- Nearly ½ of enrollees have not been through renewal process
- 33% have not provided update contact information
- 33% have had a change in income/status



Methodology

- Contacted 15 Facilities or agencies requesting an interview and/or information
- Created standardized 8 question interview tool
- Interviewed 8 policy or healthcare personnel from state agencies, clinics, and facilities across MN
 - Josh Syrjamaki, Executive Project Leader for the Unwind/Renewals
 - Interviewed front line workers at both hospital and state level

Methodology (Cont.)

- Reviewed & utilized Minnesota Department of Human Services dashboard
- Reviewed Minnesota state agency & county websites
- Analyzed publically available data from news publications and current literature
- National, state, and non-profit, non-partisan health policy

Resuming Renewals in Minnesota Health Care Programs

This dashboard shows data on the progress in resuming Minnesota Health Care Programs renewals. The data may be filtered by renewal date, major program, age group, race/ethnicity, and social vulnerability index (SVI).

Select Select		Select	Select	Select	
Enrollee Program Race/Ethnicity		Social Vulnerability Quartile	Renewal Month	Major Program	
All	All	All	All	All	

Enrollees by renewal date (not filterable by renewal date)

Renewal Month	Enrollees due for Renewal	Enrollees auto-renewed	Enrollees with coverage extended	Enrollees with coverage closed	Enrollees still being processed
2023-06 June	73,850	10,418	72,001	1,357	423
2023-07 July	91,916	11,516	42,121	1,619	39,556
2023-08 August	98,552	13,719	42,672	2,162	52,279
2023-09 September	98,772	12,053	33,013	1,690	63,572
2023-10 October	104,867	0	1	1,792	103,278
2023-11 November	127,250	0	0	0	125,508
2023-12 December	146,090	0	0	0	144,256
2024-01 January	262,905	1,174	11,516	71	248,206
2024-02 February	116,383	0	0	0	114,588

https://mn.gov/dhs/medicaid-matters/renewal-dashboard/

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KFF Nine Key Metrics to Support Coverage

- Renewal Policies
- System capacity measures
- Eligibility policies
- MN meets 6 of the 9 key metrics

Table 1

Minnesota: Key Metrics to Promote Continued Coverage During the Unwinding of the Medicaid Continuous Enrollment Provision

Metric	Meets Metric?
Renewal Policies	
Will complete all renewals in 12-14 months	Yes
Follows up with enrollees who need to take action to maintain coverage	No
System Capacity Measures	
Renewal processing is mostly automated	Yes
50% or more of renewals are conducted on an ex parte basis	No
Has taken steps to improve ex parte renewal rates	No
Eligibility Policies	
Adopted Medicaid expansion	Yes
Adopted 12-month postpartum coverage	Yes
Adopted 12-month continuous eligibility for all children in Medicaid and CHIP	No
OURCE: Based on a national survey conducted by KFF with the Georgetown University Ce	Inter for Children and Families • PNG

Kaiser Family Foundation, . (2023, April 26). Eight to 24 million lose Medicaid coverage by Mary 2024 due to the end of pandemic-era enrollment protections. https://www.kff.org/medicaid/press-release/eight-to-24-million-could-lose-medicaid-coverage-by-may-2024-due-to-the-end-of-pandemic-era-enrollment-protections/

Renewal Policies

- State is taking 12–14 months • to complete Medicaid renewals
- State is following up on • returned mail
- State is following up with • enrollees who haven't responded to renewal request before ending coverage



Kaiser Family Foundation (2023 April 26) Fight to 24 million lose Medicaid coverage h

System capacity measures

- Process for renewing enrollees is "mostly automated"
- 50% or more of renewals are done on "*ex parte basis*"
- State is working on improving *ex parte* renewal rates

Kaiser Family Foundation, (2023, April 26). Eight to 24 million lose Medicaid coverage by Mary 2024 due to the end of pandemic-era enrollment protections. https://www.kff.org/medicaid/press-release/eight-to-24-million-could-lose-medicaid-coverage-by-may-2024-due-to-the-end-of-pandemic-era-enrollment-protections/

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Eligibility policies

• State has expanded Medicaid

• States extended postpartum coverage to 12 months

 State has 12-month continuous eligibility for children in Medicaid & CHIP

Kaiser Family Foundation, . (2023, April 26). Eight to 24 million lose Medicaid coverage by Mary 2024 due to the end of pandemic-era enrollment protections. https://www.kff.org/medicaid/press-release/eight-to-24-million-could-lose-medicaid-coverage-by-may-2024-due-to-the-end-of-pandemic-era-enrollment-protections/

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Minnesota Guiding Principles

 Maintain coverage for all eligible enrollees without interruptions

• Comply with evolving federal guidance

• Minimize burden on the workforce to aid timely processing of renewals

- **Incident Command Project** ٠ Structure
- Project Management by Deloitt ٠
- Increase workload & staff •
- Staff readiness ۰
- **Electronic Health Record Prompts** •
- Communication toolkits
- Multilingual resources •
- DHS Unwinding Dashboard •

አማርኛ اللغة العربية 종陽中文 Francais Lus Hmoob ကသီ [2] 한국어 No English 🕋 651-431-2000 ฉาอ Afaan Oromo Русский Af Soomaali Español Tiếng Việ **Keep your health insurance** If you have Medical Assistance or MinnesotaCare, your health insurance needs to be renewed annually. Be prepared for your renewal. Updates for health care workers, license holders, county and tribal workers, grantees and other program administrators Expect instructions for partners related to actions and process changes through regular communication channels including email messages and websites English (DHS-8270-ENG, PDF) Hmong (DHS-8270-HMN, PDF) Checklist -Patient Sidebar Russian (DHS-8270-RUS, PDF) Somali (DHS-8270-SOM, PDF) 2 Notifications (1) Verify All Spanish (DHS-8270-SPA, PDF) Most recent eligibility message received on 4/11/2023 Vietnamese (DHS-8270-VIE, PDF) **ESTABLISHED / SIMPLE VISIT**

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Finish

The Medicaid Renewal document has not been collected. Please update after renewal information

has been presented to the patient.

Finish



- SF 2265/HF2286 signed March 30, 2023
- Address new requirements and provide funding for eligibility redetermination
 - 58.6 million 2024-2025
 - 10.3 million to the health care access fund
 - Total 68.8 million
- Funding distributed to Counties for unwinding implementation St. CATHERINE UNIVERSITY

- Extensions Given for the first two months of unwinding period
 - Enrollees due for re-enrollment in June were given an extension until July
 - Enrollees due for re-enrollment in July were given an extension until August
 - DHS has given similar extensions to enrollees through January of 2024

Minnesota Department of Health. (2023, August 23). *Medical Assistance and MinnesotaCare deadlines extended*. https://mn.gov/dhs/media/news/?id=1053-588996

Minnesota Council of HEALTH PLANS

Home FAQs Resources - About - News Blog 🔎

Keeping Minnesotans Covered as Medicaid Renewals Return

Everyone has a role to play to make sure Minnesotans keep their health care coverage as the state resumes eligibility reviews for the state's public programs, Medical Assistance (Minnesota's Medicaid program) and MinnesotaCare.

With the end of pandemic-era policies for public health care programs, federal law requires states to restart regular Medicaid renewals. This means that over the next 12 months, everyone with health care coverage through Medical Assistance or MinnesotaCare will have to renew their coverage. The vast majority of enrollees will still be eligible for these programs. For those no longer eligible for these programs, there are other options for health coverage, like employer-sponsored insurance, MNsure health plans, or Medicare.

Gaps in coverage lead to gaps in care and it will be critical to ensure Minnesotans have the support they need to keep their coverage or transition to new coverage.

The tools on this page provide information and resources for enrollees, providers, community organizations, and employers on common questions and how to help Minnesotans needing to complete a renewal, re-enroll, or find new coverage. Use these tools to get the word out and support Medical Assistance and MinnesotaCare enrollees in renewing their coverage or transitioning to other forms of health insurance.

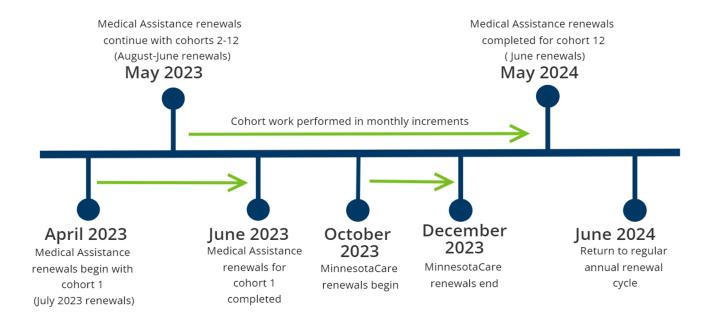
https://mnhealthplans.org/resources/medicaidu nwinding/

PUBLIC HEALTH & HUMAN SERVICES

Home / DEPARTMENTS A-Z / Public Health & Human Services

ABOUT PUBLIC HEALTH &	Renewals starting for Medical Assistance Recipients	CONTACT		
HUMAN SERVICES	Everyone who receives Medical Assistance will need to complete a	218-726-2222		
ADULT SERVICES	 renewal packet within the next year. You can expect to get renewal forms about two months before the month you originally applied for health insurance. For example, if you applied in July, your MA renewal 	Email All contacts		
BUSINESS SERVICES	forms will be mailed to you in May. Do not worry if you don't remember when you applied. We will mail renewal forms to you when it is time to renew your MA. Return the requested materials by the			
CHILDREN &	 deadline to prevent losing your coverage. Follow the instructions included in the packet for how to submit it. 	***NEW FEATURE**		
FAMILY SERVICES	We can help vou:	Submit documents to		

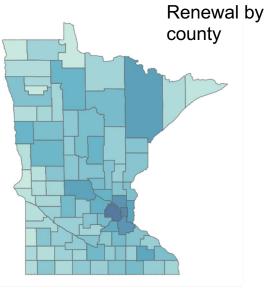
- Partner with public health clinics
- Partner with payors



Personal communication, Minnesota Department of Human Services, June 14, 2023

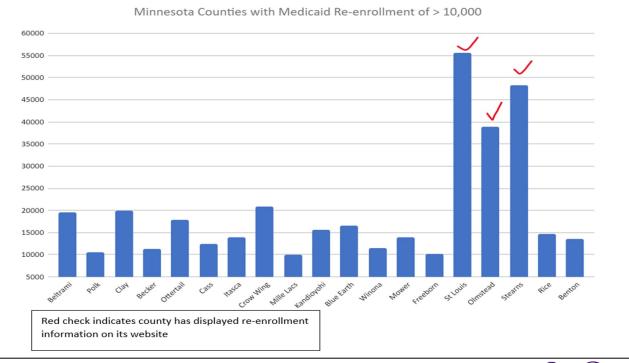
County Led Approach

- SF 2265/HF2286 Bill provided funding to MN for unwinding
- Funding distributed to counties to implement unwinding
- No follow-up from DHS to counties
- 16/19 non-metro counties (with > 10,000 enrollees) lack unwinding information on website



MN DHS Renewal Dashboard https://mn.gov/dhs/medicaid-matters/renewal-dashboard/ July 10, 2023

Minnesota County Data



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Site Specific Strategies/Actions

- MNSure Navigators
- Multilingual workers
- Proactive approach with clients and update case files
- On-site eligibility workers
- Shifting processes to meet the need
- Overtime in some clinics and agencies St. CATHERINE UNIVERSITY

Interview Themes

- Fragmented Approach leading to trickle down effect from DHS, counties, organizations, and enrollees
- Inconsistent communication between state and organizations
- Unclear process for frontline workers
- No consistent method for data collection or sharing
- Communication methods similar between counties and facilities
- Relationship building between agencies



Urban vs. Rural Counties

- Urban areas have more resources and access to DHS
- Residents of rural areas may have greater risk of disenrollment due to disparity of resources
- At this point, bulk of the work at state and county level
 - Might not be felt by healthcare system until the unwinding has further progressed

The Real Impact

- St. Louis County
 - Disparities with rural vs. urban
 - Even with swag, QR codes, town hall meetings, phone calls, and mail, no effective
 - US Postal issues
 - Panic Mode
 - Development of partnerships
 - \$750 million spent on MA recipients
 - Potentially 27,000 will lose insurance
- Patient story
 - Renewed insurance via the renewal form but lost in mail
 - Utilized insurance for monthly mental health medication
 - Couldn't afford the medication but needed it to remain functional
 - Needed to wiat a 3-4 week turnaround for

The Washington Post. (July 28, 2023) Nearly 4 million in US cut from Medicaid, most for paperwork reasons.

Current Data

- Kaiser Family Foundation
 - As of the end of August 2023, 86,180 people have been disenrolled from MA and 107,995 have successfully renewed their MA in MN
 - 34,537 children & 51,643 adults disenrolled
 - 38.4 thousand disenrolled in July and 47.8 thousand disenrolled in August
 - 49.6 thousand renewed in July and 58.4 thousand renewed in August
 https://wkfg.org/report-section/medicaid-enrollment-and-unwinding-racker
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Kaiser Family Foundation,. . Medicaid Enrollment and Unwinding Tracker https://www.kff.org/report-section/medicaid-enrollment-and-unwindingtracker-state-enrollment-and-unwinding-data/

Current Data

MN Dashboard

Enrollees by renewal date (hover for outcome data)

Renewal Month	Enrollees due for Renewal	Enrollees auto-renewed	Enrollees manually processed	Enrollees in progress	Enrollees not yet processed	Enrollees retained in MHCP	Enrollees disenrolled from MHCP
2023-07 July	95,578	12,366	53,619	393	0	52,634	35,778
2023-08 August	107,352	23,894	45,089	442	0	61,729	44,958
2023-09 September	100,562	22,037	36,817	469	41,239	53,274	5,574
2023-10 October	108,195	23,732	23,603	5,794	55,066	43,495	3,596
2023-11 November	126,171	18,736	5,875	938	100,622	23,878	730
2023-12 December	142,940	23,082	304	4	119,550	23,309	77
2024-01 January	255,826	0	0	0	255,826	0	0
2024-02 February	111,557	0	0	0	111,557	0	0
2024-03 March	121,927	0	0	0	121,927	0	0

https://mn.gov/dhs/medicaid-matters/renewal-dashboard/

Conclusions & Implications

- Too early to draw significant conclusions
 Process must be carefully monitored
- Unwinding is multifaceted and has inconsistencies
- Initial disenrollment up to 375,000 Minnesotans
 - May have deleterious effects on MN residents, healthcare organizations, and public health agencies
- Advocate for change
- Legislature should take action for equitable unwinding St. Catherine University

Cause for Concern?

Letter to US Governors from HHS Secretary Xavier Becerra

"....The Department of Health and Human Services, through our Centers for Medicare and Medicaid Services, is closely monitoring changes in Medicaid and Children's Health Insurance Program (CHIP) enrollment. I am deeply concerned with the number of people unnecessarily losing coverage, especially those who appear to have lost coverage for avoidable reasons that State Medicaid offices have the power to prevent or mitigate...."

June 12, 2023

Updates September 21, 2023

Medicaid coverage restored to half million after computer errors found

29 states & DC directed by CMS to restore Medicaid

Significant number of children denied coverage will have coverage restored

The New York Times. (September 21, 2023). Nearly 500, 000 in US will regain health insurance ageter state errors. https://www.nytimes.com/2023/09/21/health/medicaid-disenrollments-children.html



Implications for Future Student: Faculty Pairs

- Beneficial to establish project development and goals
- Requires a high time commitment
 - A student researcher who is not a senior
 - Student's commitment primarily to project
- Interview counties first and then organizations
- Professional development
 - Experience in public health and policy development
 - Networking, leadership exposure, and scholarly engagement
- Valuable partnerships created in process

Special Thanks

- Mary Absolom
- Josh Syrjamaki
- Interview Participants
- St. Catherine University Summer Scholar Program

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KFF. Medicaid Enrollment and Unwinding Tracker

https://www.kff.org/report-section/medicaid-enrollment-and-unwinding-tracker-state-enrollment-and-unwinding-data/

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The New York Times. (September 21, 2023). Nearly 500, 000 in US will regain health insurance ageter state errors. https://www.nytimes.com/2023/09/21/health/medicaid-disenrollments-children.html

Personal communication, Community-University Health Care Center, July 11, 2023

Personal communication, Hennepin County Medical Center, June 29, 2023

Personal communication, Minnesota Department of Human Services, June 14, 2023

Personal communication, Olmsted County Human Services,

The Washington Post. (July 28, 2023) Nearly 4 million in US cut from Medicaid, most for paperwork reasonS.

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