Readiness for the End of the Public Health Emergency

MARISSA WOLTMANN
Health Connector, Senior Director of Policy and Applied Research

MONICA SAWHNEY
MassHealth, Chief of Staff

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Overview

MassHealth and Health Connector staff have been closely collaborating on plans for the end of the Federal public health emergency (PHE).

- This presentation will review:
  - Background on continuous coverage requirements
  - Preparations underway at MassHealth and the Health Connector to support individuals throughout the process of redetermining eligibility after the PHE ends
MassHealth is preparing to renew eligibility for all members within a year following the end of the Federal Public Health Emergency

- Federal Medicaid eligibility protections have been in effect since March 2020, and are expected to be extended at least into fall 2022
  - Given the lack of a 60-day notice for the Federal Public Health Emergency to end in July, it is now expected to be extended at least until mid-October. If the Federal Public Health Emergency ends in October, protections would be extended until November 1, 2022
  - This timing is not certain, as these protections could be extended further past this fall

- MassHealth has continued processing renewals throughout the pandemic, providing a head-start on the renewal process once the Federal Public Health Emergency formally ends
  - Many members’ eligibility has been renewed as normal
  - Other members who did not respond or who were found ineligible have had their eligibility protected in accordance with federal requirements

- MassHealth must complete renewals for all 2.2M members within a year of the federal public health emergency ending

- The Baker-Polito Administration is committed to minimizing gaps in coverage and supporting members as they maintain or transition to the appropriate coverage
  - MassHealth and the Health Connector are working closely together, and have contracted with Health Care For All to implement an outreach campaign to members
  - MassHealth has been ramping up operations (call center, staffing) to manage increased volume
  - MA’s integrated eligibility system (HIX) and Health Connector subsidies will enable smooth transitions for members no longer eligible for MassHealth
MassHealth will re-evaluate its 2.2M members to determine if they still qualify for MassHealth coverage.

Some members will auto-renew into MassHealth coverage based on available data:
- If HIX can confirm an individual still qualifies for at least the same level of coverage they currently have, they can be automatically renewed.
- Expanded allowable variance between income on file and data sources to allow for increased auto-renewal.

Some members will need to actively renew by updating their application:
- Depending on available data and whether member responds, they will be determined eligible for MassHealth benefits, Health Connector benefits, or not eligible.
- The Health Connector will help members found eligible for its programs to enroll.
Preparations Underway at MassHealth
MassHealth will complete all renewals over 12-months to balance operational impacts and comply with federal requirements

While the timeline is not yet certain, if the Federal Public Health Emergency ends in mid-October, this process would begin in September and coverage changes would not occur before November 1st.

Note: Bar heights in chart above are illustrative.

Member Renewal Process:

- Whenever possible, MassHealth will automatically process a member’s renewal by matching their information against state and federal data sets.
- If a member’s renewal cannot be automatically processed, they will receive a blue envelope in the mail with a renewal form to complete.
- Members must submit the requested information to receive the health benefit they qualify for. Depending on a member’s coverage, they can renew online, by mail, by fax, or in-person.

Note: Bar heights in chart above are illustrative.
MassHealth is preparing for the end of the PHE in order to minimize gaps in coverage

- Hire additional staff and expand vendor capacity to support call center, applications processing, and appeals
- Implement operational changes to increase speed of processing
- Increase capacity to address elevated renewal volume

- Raise reasonable compatibility threshold to increase automated renewals
- Implement system changes to support redeterminations
- Stand-up text and email channels to communicate with members
- Improve member contact information accuracy (e.g., National Change of Address data matching, vendor service for validation)

- Execute comprehensive outreach strategy
- Focus on collecting updated contact information to prepare for unwind
- Develop equity-oriented messaging approach (media buys, comms toolkit)
- Coordinate closely with advocates, providers/health plans, and community groups

More detail on next slide
MassHealth and the Health Connector are coordinating closely with Health Care for All and other stakeholders to support outreach and equity efforts

- **April**: Entered into a joint contract with Health Care for All for outreach campaign

- **September**: Launch outreach campaign with Health Care for All, Health Connector
  - On-the-ground outreach (canvassing, tabling) and **grants to community groups** in targeted communities *(see right)*
  - Targeted media buys with multi-lingual and culturally relevant messaging

- Execute **direct-to-member campaigns** with text, email, mailings, and robocalls

- Partner with **managed care plans, providers, assisters, and other stakeholders** to share key messages, update contact information, and support successful renewals

- Encourage use of **self-service tools** *(e.g., HIX self-service portal)* and MassHealth enrollment center **appointment scheduling**

- **Additional support for members with disabilities**, members **who are homeless**, and members **who are 65+**, including targeted communications and dedicated outreach channels

**Targeted Outreach Communities**

1. Dorchester (Boston)
2. East Boston
3. Brockton
4. Chelsea
5. Everett
6. Fall River
7. Framingham
8. Lawrence
9. Lowell
10. Lynn
11. Malden
12. New Bedford
13. Revere
14. Springfield
15. Worcester
Encouraging members to share any change of address or circumstances with MassHealth to make sure their information is accurate

We are conducting outreach to ensure members share new address and contact information with MassHealth:

**Online:** If a member is under the age of 65, the fastest way to update their information is with a [MA login account](#).

**By Phone:** Call a Customer Service Representative at (800) 841-2900, Monday through Friday from 8:00 AM till 5:00 PM

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**Sample Communications**

**MASSHEALTH MEMBERS:**
Don't miss important information and updates about your health coverage. **Update your contact information** (phone, address, and email) if it has changed in the past 2 years.

**MIEMBROS DE MASSHEALTH:**
¿Te has mudado recientemente? Actualice su dirección para no perderse información importante.
Preparations Underway at the Health Connector
Health Connector Preparations

The Health Connector is working on initiatives to help support members transitioning from MassHealth to Health Connector eligibility.

- Designing clear, effective, and consistent messaging that affordable coverage is available and distributing it widely
- Building operational capacity for volume
- Making coverage easier to get and keep for those who qualify
Messaging Affordability

Many people mistakenly assume that they will not be able to afford Health Connector coverage.

- National data suggest relatively low awareness of Marketplace options and affordability supports
- Focus groups in five languages throughout the month of June will inform key messaging strategies
- Focus group findings will be incorporated into broad-based outreach and marketing as well as “toolkit” materials for stakeholder partners
- Informational materials about Health Connector programs will be updated and translated into 24 languages other than English

![Chart](https://www.urban.org/sites/default/files/publication/104860/uninsured-adults-marketplace-knowledge-gaps-persisted-in-april-2021_0.pdf)

Building Capacity

Staff are working to ensure readiness for an influx of members and applicants in need of support.

- Uncertainty around timing is a challenge, and staff are considering interactions with Open Enrollment preparations

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<thead>
<tr>
<th>Function Area</th>
<th>Activities</th>
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<tbody>
<tr>
<td>HIX System</td>
<td>▪ New functionality to manage MassHealth renewals, support assisters, and alert individuals to needed updates or account changes is ready to be turned on</td>
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| Call Center/Operations        | ▪ Accenture is planning to recruit and train additional call center staff to support increased call volume associated with those newly eligible for and enrolling in Health Connector plans  
  ▪ Considering impact of increased outbound mail as well as returned mail  
  ▪ Chat and chat bot functionality available in June; staff exploring texting capacity |
| Appeals                       | ▪ The Appeals team is anticipating increases in volume and will be ready to schedule higher numbers of hearings as needed |
| Navigators and assisters      | ▪ Staff are gathering information on how Navigators would assist individuals at the end of the PHE as part of the ongoing grant application cycle for fiscal years 2023 and 2024 and will reflect in funding as appropriate |
Simplifying Enrollment

Ongoing efforts to reduce administrative barriers to coverage will become even more important in the context of PHE redeterminations.

- A new option for applicants to opt-in to be automatically enrolled in zero-dollar premium coverage if they qualify and do not shop has enrolled over 400 individuals since its launch in April.
- In February, the Health Connector and MassHealth changed to the allowable variance between the income an applicant indicated and electronic data sources used to validate eligibility from 10 percent to 20 percent to reduce the need for verification documents.
- Health Connector and MassHealth staff are working on new templates to help individuals provide income verifications.
- Health Connector staff are considering a recommendation to extend the length of the special enrollment period available to individuals who lose MassHealth coverage from 60 to 120 days.
Next Steps
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Preparations for membership transitions will continue as a top priority, despite uncertainty around timing for the end of the PHE.

- Much of the work underway will be a long-term investment in reducing member gaps in coverage associated with eligibility changes
- Staff will closely monitor developments with an eye toward mid-August, when the administration would provide a 60-day notice of a mid-October PHE end
- Staff will report back to the Board as needed, but with a particular focus on Open Enrollment readiness