

Open Enrollment and End of Medicaid Protections Update

PATRICIA GRANT
Chief Operating Officer

JASON LEFFERTS
Director of Communications & Outreach

MARISSA WOLTMANN

Senior Director of Policy and Applied Research

Overview and Agenda

Today's presentation will (1) review results from Open Enrollment 2023 and (2) outline preparations for the end of Medicaid continuous coverage requirements on March 31, 2023.

- Open Enrollment ("OE") went smoothly and saw more new Health Connector enrollments than last year
- While enrollment has declined steadily since Medicaid protections were implemented in March 2020, ongoing Health Connector preparations for the end of those protections is likely to result in enrollment gains 100,000-200,000 Health Connector members by June 2024



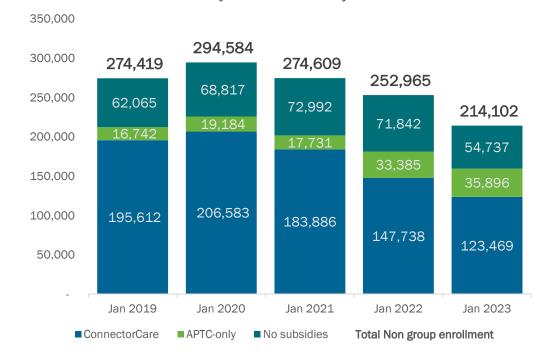
Open Enrollment 2023 Recap

Recent Health Connector Membership Trends

As context, Health Connector membership has declined since February 2020 as a result of individuals maintaining MassHealth despite changes in income.

- Advance Premium Tax
 Credit-only ("APTC-only")
 membership continues to
 grow because of
 enhanced subsidies
 provided by the American
 Rescue Plan
- Enrollment decreases
 have been concentrated in
 ConnectorCare, as fewer
 people transitioned to
 ConnectorCare due to
 Medicaid maintenance of
 effort rules
- The Health Connector expects membership to rebound to and exceed pre-pandemic levels after Medicaid protections end

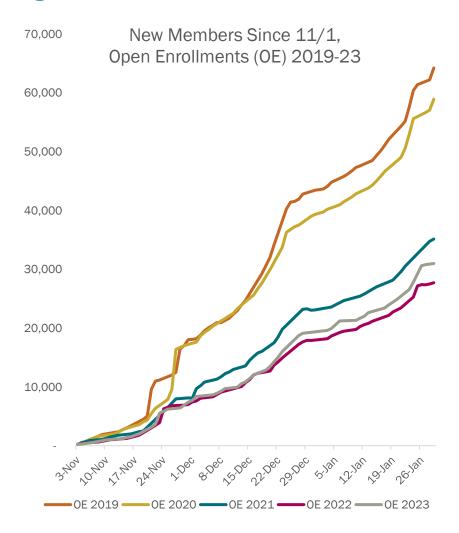
Qualified Health Plan (QHP) Enrollment by Program, January 2019 - January 2023





Open Enrollment 2023: Enrollment and Shopping

- As of the end of Open Enrollment new enrollments in Health Connector Coverage were 12 percent higher than last year, at 31,000 compared to 27,800 at the same point last year
- Retention among existing members is strong and consistent with last year, at 93 percent
- Eligibility was stable for many renewing members, as we were able to verify continued eligibility for subsidies through data checks last fall
- Consistent with prior years, about 22 percent of renewing members reviewed their plan options or shopped for a new plan

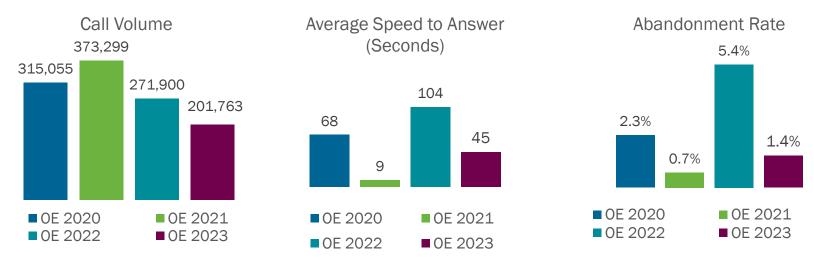




Open Enrollment 2023: Contact Center

The Contact Center was available to support members during Open Enrollment.

- With exception of peak volume days, the contact center was appropriately staffed to provide callers with timely access to assistance from agents
- On the final day of Open Enrollment, January 23rd, the contact center experienced longer wait times (average of six minutes) and higher abandonment rates (11 percent). Outbound calls were made, between January 24th and January 26th, to all members who abandoned after trying to connect with customer service on January 23rd
- The Contact Center continued to experience lower call volume, compared to previous Open Enrollment periods, largely due to a lower membership base





Open Enrollment 2023: Outreach and Education

Broad-based World Cup partnerships and communitybased events fueled visibility and awareness throughout Open Enrollment.

- Digital and on-air World Cup spots generated more than 12 million impressions
- The Health Connector sponsored or participated in 34 community events
- Health Connector staff and Navigators conducted interviews or conducted activities that generated 54 stories in media throughout the state
- More than 1,600 signs and 3,900 flyers were distributed during community walks and in literature drops







Health Connector Preparations for the End of Medicaid Protections

The End of Medicaid Protections

Due to a new federal law, Medicaid protections that have been in place since 2020 as part of the federal Public Health Emergency will end on March 31. Over the course of the following year, MassHealth will conduct redeterminations on 2.3 million Massachusetts residents' MassHealth coverage.

- Beginning April 1, for the first time in three years eligibility, changes may result in individuals losing MassHealth coverage and transitioning to Health Connector plans
- Across April 2023 to June 2024,
 MassHealth will engage all of its 2.3
 million members in a renewal
 process to gather updated
 information and reassess whether
 they still qualify for coverage
- Staff have been working closely internally, with counterparts at MassHealth, and with other external stakeholders to make coverage transitions as easy as possible

Health Connector Framework for Supporting Member Transitions





Member Transitions

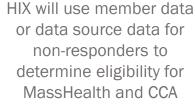
Massachusetts's integrated application system for MassHealth and Health Connector coverage will streamline the renewal process for members.

Renewal Form



If eligibility isn't verified, the household receives a renewal form with 45 days to respond

Eligibility Determination



programs simultaneously

Enrollment

Individuals can shop online or contact customer service to enroll and pay their premium



Data Review

A renewal starts with MassHealth checking data sources to verify continued eligibility. Some members can be auto-renewed if their information is verified

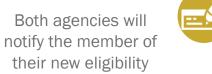


Member Action

Members can respond online, by phone, by mail, or in person to provide updated information.



Eligibility Notices



(e.g., denied MassHealth, approved for Health Connector)





Eligibility Determinations

The HIX system gathers information and applies the rules necessary to determine whether someone qualifies for MassHealth or Health Connector coverage.

- When an applicant requests help paying for coverage they must be considered for Medicaid and Marketplace programs
- Because individuals must not have access to other coverage, including Medicaid coverage, to qualify for Health Connector subsidies, HIX checks MassHealth eligibility before finding someone eligible for Advance Premium Tax Credits or ConnectorCare
- When HIX determines eligibility, it does so for both agencies simultaneously and shows members their program right away
- While eligibility determinations are integrated, each agency sends its own notice to tell individuals why they did or did not qualify

Health Connector Eligibility:



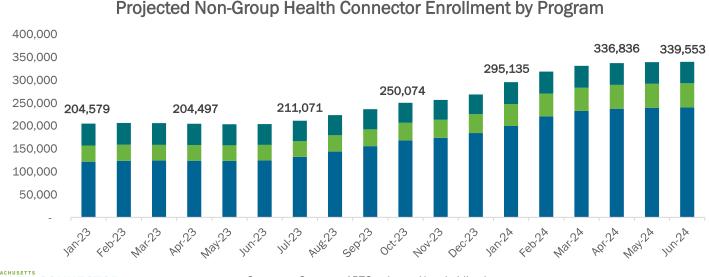
- For all plans, an individual must:
 - Be a resident of Massachusetts.
 - Be lawfully present in the U.S.
 - Not be incarcerated
- To receive help paying for coverage, an individual must:
 - Meet income guidelines
 - Not have access to other kinds of insurance, like employer-sponsored coverage, Medicare, or MassHealth



Expected Enrollment

The end of Medicaid protections will result in the largest coverage event since implementation of the ACA.

- Staff expect roughly 100,000 to 200,000 people to enroll in Health Connector coverage after losing MassHealth between April 2023 and June 2024
- These assumptions informed program budget development and represent relatively aggressive enrollment growth resulting in *net* membership growth of nearly 135,000 people
- These estimates come with a high level of uncertainty, given the unprecedented nature of this process
- Reaching these targets will require historic levels of high-visibility outreach and public engagement,
 and successful coordination across Health Connector and MassHealth and our shared systems





Messaging Affordable Coverage

Phase 1 Communications

Phase 1, together with MassHealth and Health Care For All, focuses on encouraging MassHealth members to update eligibility information.

Item	Expected dates
MassHealth Eligibility Redetermination Outreach Toolkit	Late January
Eligibility redetermination earned media campaign	Mid-March-September
Health Care For All community-based orgs activities	March-July, August-November
Health Care For All media buy (print, radio, TV, digital)	Mid-March-August
Health Care For All community canvassing	April-July

- Consistent look and feel, with key message: "Act now. Stay covered." based on learnings from focus groups held in English, Spanish, Portuguese, Cape Verdean and Haitian Creole
- Members are encouraged to update information immediately, and look for a blue envelope from MassHealth
- Health Care for All (HCFA) will be conducting key Phase 1 activities through community-based organizations,
 paid media and canvassing create additional activity and visibility in communities of focus



Phase 2 Communications

Phase 2 of the outreach effort focuses on encouraging residents transferring out of MassHealth to enroll in Health Connector coverage.

Item	Expected dates
Transitional enrollment social media and digital toolkit created by the Health Connector	Late March
Expanded Navigator capacity to support enrollment	April 2023-April 2024
Direct outreach by Health Connector (mail, email, text, robo)	April 2023-June 2024
Paid and earned state-wide media visibility targeting transitioning members	April 2023-April 2024
Enrollment events for members transitioning to the Health Connector	June 2023-June 2024

- Continued consistent look and feel, with key message: "Act now. Stay covered."
- Messaging highlights available premium support, and notes the state individual mandate
- Direct outreach from the Health Connector to individuals losing MassHealth eligibility scheduled for weekly contact through various methods
- Enrollment events located in all parts of the state will provide opportunity for in-person help from Navigators and Certified Application Councilors, and for participation by interested carriers



Member Communications

Member communications will be in a consistent style with other unwinding and enrollment messaging.

- Direct communications will encourage enrollment and direct enrollees to help
- Methods of communication include:
 - Mail
 - **Fmail**
 - Robo-calls
 - Texts
- People moving out of MassHealth will be messaged once a week for two months, and then three times a month after that

Si vas a perder tu cobertura de MassHealth, ¡Massachusetts Health Connector puede ayudarte a subsidiar tu nueva cobertura de seguro médico!

con Massachusetts Health Connector.

médico gratuito o a bajo costo con Massachusetts Health Connector. MassHealth y Health Connector son programas diferentes



Connector tiene planes que te ayudan a cubrir los gastos de chequeos anuales,

¿Cúal es el próximo paso?

- y haz clic en "iniciar sesión"

- Para recibir ayuda, llama al 1-877-MA ENROLL (1-877-623-67-65) TTY:

¿Necesitas ayuda?

- 133 Portland St., Boston
- 88 Industrial Ave., Springfield 146 Main St., Worcester









Member Communications







If you are losing your MassHealth coverage, you can find new health insurance at the Massachusetts Health Connector, and you may be able to get help paying for your new plan.

The good news is that many people who qualify for Health Connector coverage are eligible for low-cost or even free health insurance. MassHealth and the Health Connector are different programs, but both provide excellent access to providers and benefits.

Massachusetts requires everyone to have health insurance, and the Health Connector has plans that make sure you can get the care you need. Many people qualify for plans that help pay for things like annual checkups, prescription drugs, lab work, and more.

What to do next

- Visit www.MAhealthconnector.org and click on "Sign in"
- If you have a new address, income, or other information, update your account
- Review available plans and pick the one that best meets your needs
- If you have trouble logging in, call Health Connector Customer Service at 1-877-MA ENROLL (1-877-623-6765) or TTY: 1-877-623-7773

Get Started



Robocalls

This is the Massachusetts Health Connector calling with important information about an upcoming enrollment deadline. People who have lost MassHealth coverage and want to enroll in a Health Connector plan must enroll by XX/XX to stay covered. Visit www.mahealthconnector.org to log in or create a new account or call Health Connector Customer Service at 1-877-623-6765.



Texts

People who lost MassHealth and want a Health Connector plan must enroll by XX/XX. Visit

MAhealthconnector.org or call the Health Connector, 877-623-6765



Capacity for Volume

Contact Center

The Health Connector's contact center will be increasing staffing to account for expected increase in call volume during the unwind process.

- Additional staff hired for Open Enrollment who are customarily let go after the end of Open Enrollment will remain working in the call center
- An additional net 135 170 Tier 1 Full Time Employees (FTEs) will be hired, trained and onboarded between January 2023 and August 2023 to support inbound calls and chat requests
- Additional Tier 2, Escalations, Quality Assurance (QA), training and supervisory staff will be hired relative to the number of new Tier 1 agents
- CCA has requested that the current contact center vendor, Accenture, cross train all document processing and walk-in center staff to answer incoming calls so that they can provide phone support if needed
- CCA is evaluating options for extended hours of operations during the transition period
- CCA is working with MassHealth on an escalation process for members who contact one call center but are actually members of the other agency

CCA will continuously monitor call volume, wait time, abandonment rate and number of transfers to and from the MassHealth call center to make adjustments as needed.



Document Processing

CCA will be working with MassHealth to support document processing.

- While the online application allows for real-time submission and processing of updated information, many individuals complete their renewal by returning a paper version of their renewal form
- Mailed forms are scanned so agents can data-enter them into the HIX system
- Discussions are underway with MassHealth regarding ability of CCA vendor staff to assist with paper processing to help keep queues to a minimum
- CCA has requested that renewal forms mailed by households with both Health Connector and MassHealth members be uploaded to a specific area in the processing system for CCA vendor staff to work on
 - This will allow current CCA members to have their information processed without delay as these
 applications will not be part of the MassHealth processing queue



External Resources

CCA will be seeking additional external supports to assist with contact center activities outside of inbound calls and escalations.

- An external vendor will be retained to provide 30 60 FTEs of support to help process documents and mixed household applications as well as to assist with outbound calls to CCA members to educate them about the upcoming redetermination process
- In the event that inbound call volume is very high, CCA will request that Accenture document processing staff move to phones and the external vendor can take over all paper processing. This will allow Accenture to move 30 FTEs of paper processing staff to phones



Administrative Simplifications

Easing Coverage Transitions

The Health Connector is committed to maintaining gains in coverage and ensuring that state residents continue to benefit from the health and financial security of health coverage.

- Massachusetts saw a significant decrease in uninsurance from 3 percent in 2019 to 2.5 percent in 2021¹
- The Health Connector intends to open a broad Special Enrollment Period from April 1st to November 23rd to promote smooth coverage transitions and minimize coverage losses due to administrative issues
- Because some individuals are likely to transition to employer-sponsored coverage after leaving
 MassHealth, the Health Connector is developing materials to educate employers and brokers about the upcoming coverage transitions

Sample supports for transitioning members

- Increased range of incomes that can be verified without the need for paper documentation
- Automatic enrollment for individuals who opt in and qualify for a \$0 plan
- Expanded specialized support for populations with unique circumstances (e.g. the selfemployed)
- Planned enhancements to the Health Connector's premium hardship waiver process



Partnering with Health Plans

A number of local carriers participate in both MassHealth and the Health Connector, making them uniquely situated to support members in this transition.

Communications and outreach

- MassHealth is working with its health plans to facilitate outreach to members undergoing renewal as well as to engage with providers
- Federal guidance allows Medicaid plans to share member data with their associated Marketplace plan so that it can inform the member about Marketplace coverage
- Health Connector staff will distribute a communications "toolkit" to carriers and other stakeholders later this spring containing messages they can use to support their members in finding Qualified Health Plans
- Health plans will be invited to participate at enrollment events around the state to support transitioning members

Continuity of care

- The Health Connector asked its plans that also participate in MassHealth to assess the level of overlap in provider networks between the offerings at each agency, as well as the proportion of their MassHealth members using overlapping providers and found generally high levels of both network overlap and use of overlapping providers
- Staff have also engaged with carriers to consider how prior authorizations approved under
 MassHealth can be honored if a member transitions to a Health Connector plan

Looking Ahead

Moving Forward

Supporting Massachusetts residents transitioning to Health Connector coverage during the Medicaid unwind process is a top priority for the organization.

- The Health Connector is working closely with MassHealth, Health Care For All, carriers, enrollment assisters, advocates, employers, and other stakeholders to ensure widespread public awareness and engagement throughout the process
- Staff will include regular updates to the Board throughout the MassHealth redetermination process regarding ongoing Health Connector activities to support individuals moving from MassHealth to Health Connector coverage

