

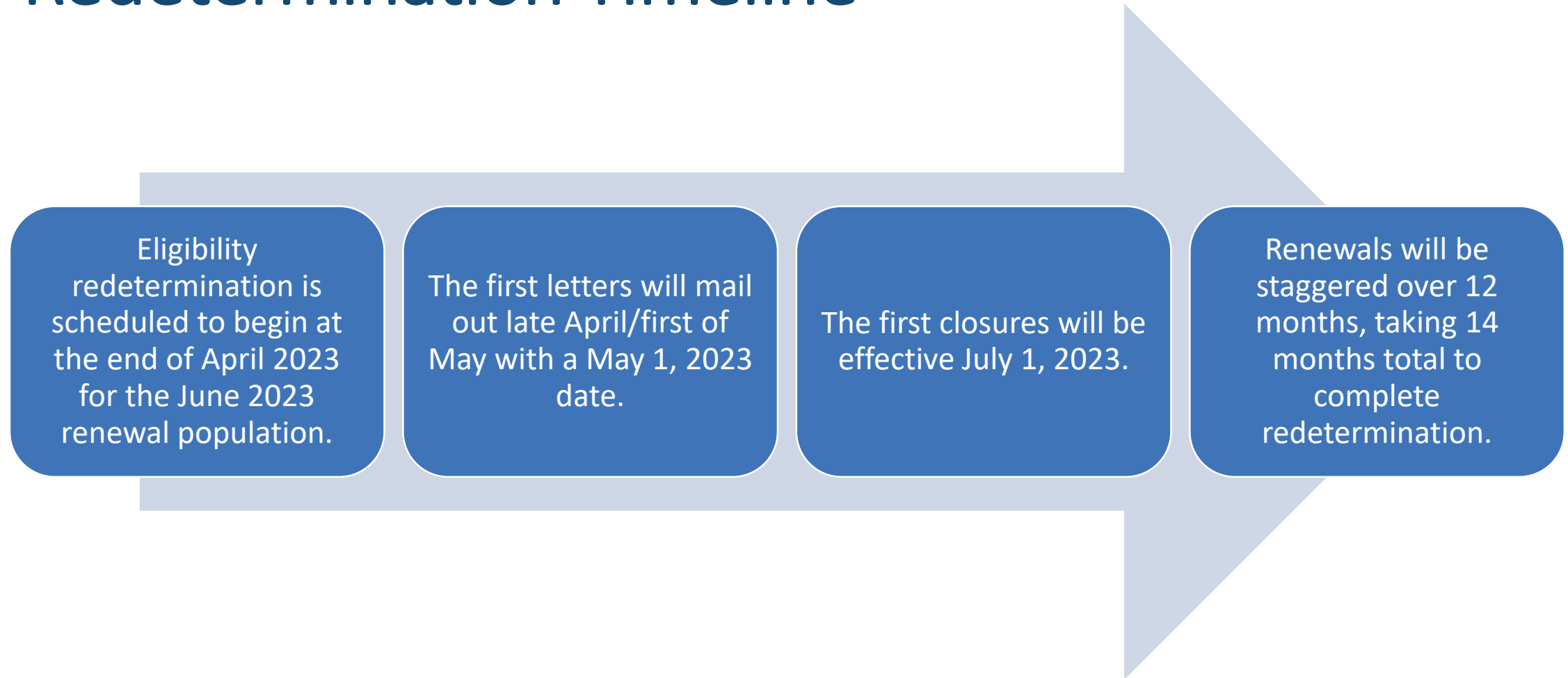
Ending Medicaid Continuous Coverage

An Explanation of Upcoming Changes

- In March 2020, the Louisiana Department of Health (LDH) made a number of operational changes to its Medicaid program in response to the federal COVID-19 Public Health Emergency (PHE).
- Through provisions in the Families First Coronavirus Response Act (FFCRA), Congress offered states an Enhanced Federal Medical Assistance Percentage (FMAP) as a means to finance the additional costs that were anticipated as a result of the pandemic.
- Along with the enhanced FMAP came a federally required eligibility maintenance of effort (MOE). For states collecting the enhanced FMAP, the state cannot terminate coverage of any enrollee except for the following reasons:
 - Death
 - Move out of state
 - Request termination
- Louisiana Medicaid currently provides health insurance coverage to just over two million individuals throughout the state which equates to approximately 40% of the LA population.

- President Biden signed the 2023 Consolidated Appropriations Act (CAA) into law on December 30, 2022.
- This law uncouples the continuous coverage provision of the FFCRA from the COVID-19 PHE.
- The continuous coverage requirement ends on April 1, 2023.

Redetermination Timeline



- Some eligibility reviews can be completed by using information from electronic databases.
 - Many will require additional information which will require members to respond to mail.
- For this reason, it is VITAL that members confirm that Medicaid has their most up-to-date contact information, including cell phone numbers and email addresses.
 - LDH will allow individuals to submit requested information over the phone, via mail, online, and in-person
 - LDH will pre-populate renewal forms for individuals enrolled in Medicaid, CHIP, and BHP on a MAGI basis, consistent with federal requirements.
- Members who do not respond to requests for information risk losing their coverage, even if they are eligible.

Assistance Requested

- CAA places new requirements on states:
 - States must attempt a good faith effort in obtaining updated contact information from members prior to redetermining.
 - If a state receives a returned renewal packet with no updated address, states are required attempt to reach the member in a second modality (ie. text, phone, etc)
- We are requesting assistance with our extensive outreach campaign to prepare Medicaid members, providers and other key stakeholders of the redetermination process.
- The robust and comprehensive outreach campaign seeks to gather updated contact information from beneficiaries and prepare them for the eventual return to normal operations.
- Medicaid ask that you post signage provided by LDH in your offices and public areas.
 - The signage will include a QR code that provides members a link they can use to update their information

Member Resources

- Members can update contact information by:
 - Logging on to MyMedicaid.la.gov,
 - Emailing MyMedicaid@la.gov,
 - Calling their health plan on the number on their ID card or
 - Calling Medicaid's Customer Service Center at 1-888-342-6207.
Assistance is available Monday through Friday, 8 a.m. – 4:30 p.m.
 - Completing a Contact Update Form
- In-person help is also available at any of the regional Medicaid offices.
 - For an office closest to you, visit www.ldh.la.gov/medicaidoffices.

The State also intends to implement the following CMS recommended strategies:

- Utilize updated contact information from managed care plans (MCO), Program of All-Inclusive Care for the Elderly (PACE), Enrollment Broker and the National Change of Address (NCOA) database before sending a notice to the current address on file with the State;
- Utilizing existing data to verify eligibility for TANF/adult SNAP participants to streamline renewals.
- Ex parte renew individuals whose attestation of zero-dollar income was verified within the previous 12 months and when no information is returned from a financial data sources.

CMS recommended strategies continued:

- Extend the time frame to take final administrative action on fair hearing requests;
- Eligibility will remain open if returned mail is received until contact by a second modality has been completed;
- Complete a statewide outreach to obtain updated contact information all 64 parishes by meeting beneficiaries where they are.

Expansion of Eligibility and Enrollment Operations:

- The State is working to ensure that all eligibility analysts and administrative support vacancies are filled and providing additional training for Unwind procedures and renewal processes.
- The state will bolster its existing call center and mail room resources through staff augmentation.

Key Messages for Medicaid Members

- **Louisiana Medicaid is resuming eligibility reviews.**
- **Medicaid members need to:**
 - ✓ **Keep their contact information up to date**, including your cell phone number and email address.
 - ✓ **Check their mail** for letters from Louisiana Medicaid/LaCHIP.
 - ✓ **Respond to requests for information.** Not responding could cause members to lose their health coverage, even if they are eligible.

THANK YOU

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