

MassHealth's Renewal Plans for 2015

February 25, 2015



Agenda

- MassHealth Member Renewal Strategy
 - Center for Medicare and Medicaid Services (CMS) requirements
 - Overall Renewal Numbers
 - Streamlined Renewals
 - Current Renewals
 - Helpful Instructions for Completing an Application
 - Closing MassHealth Benefits
 - Remaining 2015 Renewals
- Outreach Strategies/ Efforts

Annual Renewal Requirements

- CMS requires that states review all elements of eligibility that might change every 12 months
- MassHealth needs to review eligibility for approximately
 1.2 million members who are subject to Modified Adjusted
 Gross Income (MAGI) methodology under ACA
- Renewals were suspended beginning in October 2013 because we did not have a functional system to make MAGI eligibility determinations
- We resumed renewals for our MAGI populations in January 2015 and need to complete them by December 2015

Renewal Groupings for 1.2 Million MAGI Members

MassHealth

200K - Streamlined Renewals

27K - CGI HIX CarePlus

257K - MA21 Standard/Family Assistance

220K - MA21 CarePlus

500K - CY15 Renewals

1.2 Million Members Total

Member Counts by Renewal Group

Streamlined Renewals



- Approximately 200K members comprising 120K households renewed through streamlined renewals
- In September, Express Lane renewal process was resumed for children and parents receiving SNAP benefits. Expanded to childless adults receiving SNAP benefits in October
 - SNAP data is used to automatically renew benefits for households within certain income thresholds
- In November, ex parte renewals were implemented for households who have a match for Department of Revenue (DOR) quarterly wages in last quarter that is +/- 20% of earned wages on file in MA21
- Households meeting criteria for Express Lane or DOR renewal are sent a notice telling them they have been reviewed automatically and that they do not need to respond to MassHealth unless they have changes to report

Renewals for CGI HIX Members Mass Health

CGI HIX CarePlus Renewals

- 27,340 members comprising 27,338 households selected for renewal on 1/15/15
 - Majority of members are receiving CarePlus benefits
 - Majority applied online last year
- Renewal letter sent to head of household, were encouraged to reapply online and did not receive paper application

• <u>Timeline</u>:

- 1/15/15: Households mailed renewal letter
- 3/15/15: Date members told they need to reapply by
- 3/31/15: Actual closing date of benefits in MMIS

Renewals for MA21 Members

MassHealth

MA21 Standard/Family Assistance Renewals

- 257,311 members comprising 102,425 households selected for renewal on 2/6/15
 - Households selected for renewal if they had at least one member receiving Standard or Family Assistance benefits
 - Did not include individuals who were disabled or in premium assistance
- Renewal letter sent to head of household, were encouraged to reapply online but sent a paper application
- A copy of the renewal notice was sent to valid PSIs or ARDs

Timeline:

- 2/6/15: Households mailed renewal letter
- 3/23/15: Date members told they need to reapply by
- 4/11/15: Actual closing date of benefits in MMIS for those who don't reapply
- If we receive a member's application by the date they are told to reapply they will remain in MassHealth coverage until we process their application

Renewals for MA21 Members (cont.)

MassHealth

MA21 CarePlus Renewals

- 219,965 members comprising 167,661 households were selected for renewal 2/12/15
 - Households selected for renewal if they had at least one member receiving CarePlus benefits
 - ~67K members comprising 22K households contained Standard or Family Assistance members who were not included in 2/6/15 renewal mailing
 - Did not include individuals who were disabled or in premium assistance
 - Renewal letter sent to head of household, were encouraged to reapply online but sent a paper application
 - A copy of the renewal notice was sent to valid PSIs or ARDs

Timeline:

- 2/12/15: Households mailed renewal letter.
- 3/29/15: Date members need to reapply by
- 4/17/15: Actual closing date of benefits in MMIS for those who don't reapply
- If we receive a member's application by the date they are told to reapply they will remain in MassHealth coverage until we process their application ⁸

Renewal Totals as of 2/12/15

MassHealth

Renewal Mailing	Households	Members
#1 - CGI HIX (1/15/15)	27,338	27,340
#2 - Standard/Family Assistance (2/6/15)	102,425	257,311
#3 - CarePlus (2/12/15)	167,661	219,965
Total	297,424	504,616

 An additional 200K members comprising 120K households were selected for streamlined renewals, including Express Lane renewal and Ex Parte renewals using Department of Revenue (DOR) quarterly wage data

MassHealth Renewal Timeline MassHealth

Renewal Group	Mail Date	Action Date	Closing Date (if fail to reapply by action date)
#1 - Applied through old HIX (CarePlus)	Jan. 15, 2015	March 15, 2015	March 31, 2015
#2 – Standard/Family Assistance	Feb. 6, 2015	March 23, 2015	April 11, 2015
Select #3 – CarePlus	Feb. 12, 2015	March 29, 2015	April 17, 2015

Helpful Tips for Completing an Application for MassHealth Renewals

MassHealth

- Members who received a renewal letter in the mail, should complete an application online right away.
- All households selected for review were sent a notice explaining that they need to submit a new application through the new online system at MAhealthconnector.org or complete an ACA-3. Those selected for review on February 6 and 12 were also sent a paper ACA-3 application. To facilitate processing this application contains a box on Page 1 that says "Renewal".
 - If a person misplaces this application, they can always submit an application online, over the phone, or complete an ACA-3.
- MassHealth did not send renewal letters to households who have already applied through MAhealthconnector.org or sent in a paper ACA-3 application.
- Additional guidance on how to complete an application and answers to Frequently Asked Questions (FAQs) will be located on the Health Connector and MassHealth websites.
- MassHealth members receiving renewal letters may contact MassHealth Customers Service 1-800-841-2900 (TTY: 1-800-497-4648) with question¹3.

Helpful Tips for Completing an Application for MassHealth Renewals (cont.)

- The Start Your Application section:
 - Include all members of their household who are on MassHealth and any additional members in the household who are seeking coverage.
 - Indicate that all family is seeking help paying for some or all of their health insurance.



- The Additional Questions section:
 - MassHealth specific questions if an applicant(s) current insurance is MassHealth, they should answer NO to the question "Do you have health insurance now?"
 - If they have other insurance through Medicare, your employer, Veterans or TRICARE or any other sources OTHER than MassHealth they should answer¹² yes and proceed to provide additional information.

Tips for SEP and MassHealth Renewals

MassHealth

- When assisting those with MassHealth renewals complete the application, before you reach the signature page the Special Enrollment Period (SEP) questions may appear near the end of the application.
- The applicant may encounter these questions because they and/or members of the household may no longer be eligible for MassHealth. The applicant will need to take these steps:

Step 1: Click "**Yes**" to the first question "Did any of the following people in the household lose health coverage or expect to lose it?

Qualifying Life Events				
Please select any of the below options to qualify for coverage outside Open Enrollment Period				
Did any of the following people in the household lose health coverage or expect to lose it? \dot{t}	⊚ Yes ⊚ No			
Did any of the following people gain a dependent or become a dependent? \dot{t}	⊚ Yes ⊚ No			
Did anyone in your household who was not previously a lawfully present immigrant become lawfully present immigrant? \underline{t}	Yes No			
Did anyone in your household recently move to Massachusetts, or will anyone move to Massachusetts soon? \not	⊚ Yes ⊚ No			
	Save and Continue			

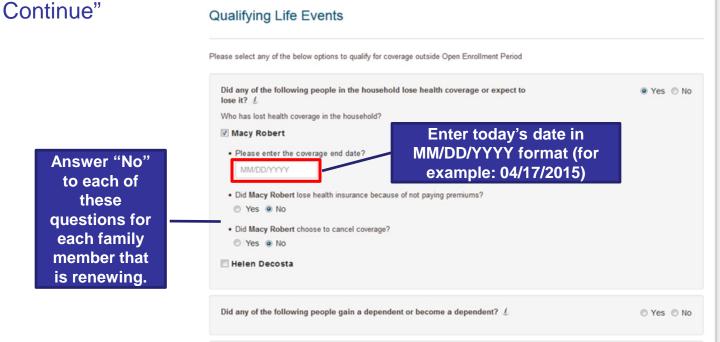
Tips for SEP and MassHealth Renewals (cont.)

MassHealth

Step 2: Select the people in the household who are current MassHealth members and for the coverage end date, enter **the date you are completing the application**.

Note –Current MassHealth member's coverage will not end on the date of their application. After the application is submitted, MassHealth and the Health Connector will send another letter letting them know when their coverage will be ending and any additional next steps the applicant will need to take to enroll in their new coverage.

Step 3: Answer "No" to both the questions below the date. Then, click the "Save and



Closing of MassHealth Benefits

- Individuals who submit a new application and are determined eligible for different benefits will be closed from their current MassHealth benefits using the timelines outlined in the MassHealth regulations (130 CMR 502)
- This means that if a current MassHealth, CMSP, or HSN-only member submits a new application and is determined eligible for:
 - A different MassHealth, CMSP, or HSN-only benefit, their previous benefits will close 14 days from their new determination date
 - A subsidized QHP, their previous benefits will be closed based on the following rules:
 - If their closing date would have fallen on the 1st- 15th of the month,
 MassHealth coverage will continue to the last day of the month
 - If their closing date would have fallen on the 16th end of month,
 MassHealth coverage will continue to the last day of the following month
 - An unsubsidized QHP or ineligible, their previous benefits will be closed
 14 days from their new determination date

Closing of MassHealth Benefits

An example of when an individuals MassHealth benefits may close is found in the table below:

Determination Date	If eligible for diff MH or unsub QHP, MH Closing (14 days)	If eligible for sub QHP, MH Closing
4/4/2015	4/18/2015	5/31/2015
4/15/2015	4/29/2015	5/31/2015
4/18/2015	5/2/2015	5/31/2015
4/30/2015	5/14/2015	5/31/2015
5/1/2015	5/15/2015	5/31/2015
5/2/2015	5/16/2015	6/30/2015

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Renewals in Remaining 2015

MassHealth

- Approximately 500K members will need to be reviewed in second half of 2015
- Outreach to these members is scheduled for the summer
- Household types remaining to be reviewed in 2015:
 - Limited, CMSP, and HSN households
 - Households with disabled members
 - Households with premium assistance member(s)
 - Standard/Family Assistance/CarePlus member(s) whose review date falls past 2/12/15
 - Members transitioning from TAFDC and SSI to MassHealth-only

Outreach Strategies/ Efforts

MassHealth

■ To include:

- Stakeholder engagement
- Updates to both MassHealth and Health Connector web pages
- Use social networks (eg. Facebook and Twitter) to reinforce messages related to renewals and inform members on how to find assistance
- Updates to the "Getting Started Guide", FAQs
- Engage Manage Care Entities/ Provider Engagement
 - Examples: MCEs working with MassHealth on member outreach strategies, including proactive outreach such as outbound calls, member mailings, and enrollment events
 - MassHealth will issue a provider bulletin

Partnership with Health Care For All



- Partner with Health Care for All (HCFA) to implement a robust consumer assistance and outreach projects for targeted populations related to renewals:
 - To implement a robust, culturally and linguistically-appropriate, telephoneand email-based outreach campaign to their current membership impacted by renewals
 - This campaign will specifically target hard-to-reach consumers with low and moderate incomes, and limited and non-English-speaking households.
 - Outreach will be conducted in English, Portuguese, and Spanish through direct communication including incoming, outbound and follow-up calls, text messaging, and emails.
- HCFA will also work with their extensive networks of community partners and advocacy organizations to assure that stakeholders are aware of:
 - The 2015 MassHealth renewal process and timeline
 - The availability of MassHealth and HCFA resources for consumers
 - Strategies and best practices on how to provide assistance to the consumers



QUESTIONS?