

Indian Health Service

Medicaid Unwinding

Updates

SARAH FORREST

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INDIAN HEALTH SERVICE, HEADQUARTERS

DIVISION OF BUSINESS OFFICE ENHANCEMENT

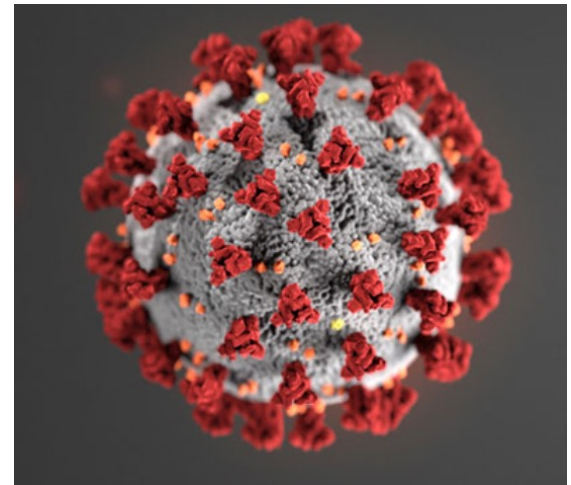
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AUGUST 22, 2023



PHE Background

- Public Health Emergency (PHE) for COVID-19 was declared on January 31, 2020 and ended on May 11, 2023.
- CMS waived certain Medicaid and CHIP requirements related to verifying eligibility in order to prevent people with Medicaid and CHIP from losing their health coverage during the pandemic.
- Medicaid has now resumed verifying eligibility and is terminating coverage for those no longer eligible or for those who do not respond to the notice to renew coverage.
- To see state timelines and data, use this tracker:
<https://www.kff.org/medicaid/issue-brief/medicaid-enrollment-and-unwinding-tracker/>



Outreach Efforts

Over the last year, IHS has been preparing for the end of the Public Health Emergency and Medicaid Unwinding. Planning has focused on strategies to minimize coverage loss for the patients we serve.

IHS has worked in partnership with CMS and the NIHB to develop guidance, toolkits, and strategies to inform AI/AN about renewing their coverage and exploring other available health insurance options if they no longer qualify for Medicaid or CHIP.

IHS has communicated with the Areas, and emphasized repeatedly, how important it is for our staff to make every effort to educate and inform so that patients will take action to respond to mail and seek help to protect their coverage.



IHS Unwinding Webpage

- IHS published a Medicaid Unwinding webpage in January
- Contains the essential information on Medicaid Unwinding, FAQs and links to many helpful resources.
- Can be found at:
<https://www.ihs.gov/coronavirus/medicaid-unwinding/>

IHS Facebook Page

- IHS has a Facebook page for Headquarters and has shared information on Medicaid Unwinding
- Areas, Service Units and others are sharing the posts and are also posting their own messages on social media



The image shows a Facebook post from the Indian Health Service. The post includes a profile picture of the IHS, the name 'Indian Health Service' with a verified badge, and a timestamp of '1d'. The main text of the post discusses the resumption of Medicaid renewals after a pause due to COVID-19, providing a link to a website for more information and using several hashtags. Below the text is a large blue graphic with a yellow banner that says 'MEDICAID RENEWAL LETTERS'. The graphic contains the text 'Make sure your mailing address is up to date!' and a smaller line of text: 'Check that your state Medicaid office has your current mailing address.' There is also an illustration of an envelope with a letter. In the bottom right corner of the graphic is the 'Medicaid.gov' logo with the tagline 'Keeping America Healthy'. At the bottom of the post, there are 2 likes and 12 shares, with buttons for 'Like' and 'Comment'.

Indian Health Service ✓
1d · 🌐

Due to [#COVID19](#), [#Medicaid](#) renewals were paused, but they're coming back. Don't wait - update and stay covered. States could begin to send renewal letters in February, and beginning April 1, in some states, individuals will lose their coverage if they are no longer eligible. Be sure your state Medicaid office has your current mailing address now. Visit <https://www.ihs.gov/coronavirus/medicaid-unwinding/> for more information. [#NativeHealth](#) [#IndianCountry](#)

MEDICAID RENEWAL LETTERS

Make sure your mailing address is up to date!

Check that your state Medicaid office has your current mailing address.

Medicaid.gov
Keeping America Healthy

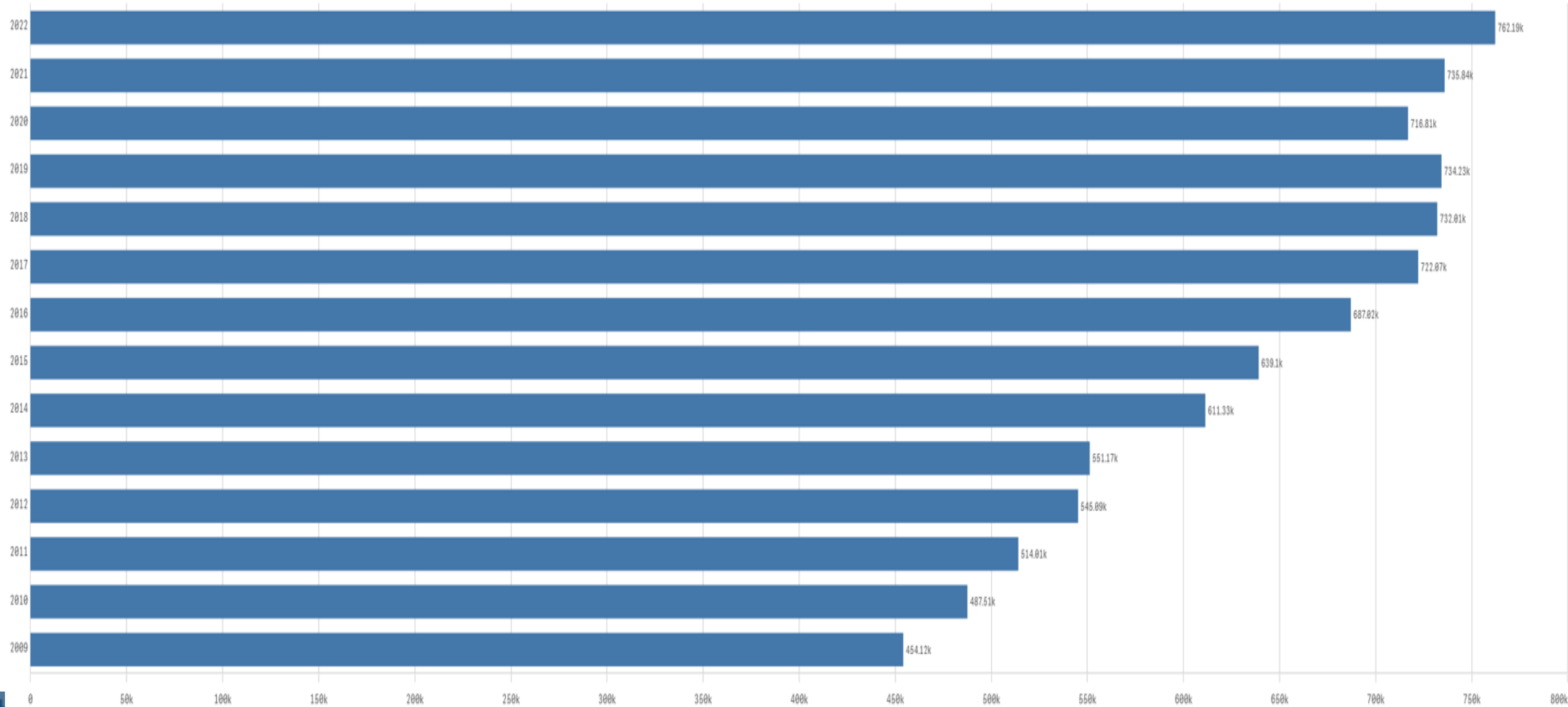
2 🍊 12 ➦

👍 Like 💬 Comment

IHS Data Call

- IHS ORAP conducted a data call in May to collect information on some of the specific Medicaid Unwinding activities that were occurring at IHS Federal facilities.
- The data call requested information from federal facilities on efforts related to:
 - Outreach and Education
 - Partnerships and collaboration
 - Relationships and data sharing with State Medicaid agencies
 - Reports used to identify patients that might need assistance
 - Feedback from patients

IHS Medicaid Enrollment Data



RPMS Reports for Monitoring

- The Resource and Patient Management System (RPMS) contains reports that can be used to analyze facility enrollment data and monitor the facility's number of patients enrolled in Medicaid.
- ORAP has encouraged the use of the AGSM Report to monitor the impact of Medicaid unwinding as this report can measure changes in enrollment at shorter frequencies for comparing enrollment changes monthly or quarterly.
- The AGSM report can also measure the number of uninsured patients so that the facility can look at trends such as patients losing Medicaid coverage but gaining other coverage such as private insurance.

Contact Information

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Indian Health Service

Medicaid Unwinding

DUSTIE CUMMINS

PATIENT BENEFIT COORDINATOR

AUGUST 2023



What is the Medicaid Unwinding?

At the start of the pandemic, Congress enacted the Families First Coronavirus Response Act (FFCRA), which included a [requirement](#) that Medicaid programs keep people continuously enrolled through the end of the month in which the COVID-19 public health emergency (PHE) ends, in exchange for enhanced federal funding. Primarily due to the continuous enrollment provision, Medicaid enrollment has grown substantially compared to before the pandemic and the [uninsured rate](#) has dropped. But, when the continuous enrollment provision ends, millions of people could lose coverage that could reverse recent gains in coverage. As part of an [end-of-the-year spending bill](#), Congress signed into law the Consolidated Appropriations Act (CAA) on December 29, 2022, that set an end to the continuous enrollment provision on March 31, 2023, and separates the continuous coverage provision from the COVID-19 public health emergency. The CCA provides for a phase down of the enhanced federal Medicaid matching funds through December 2023. States that accept the enhanced federal funding can resume disenrollments beginning in April but must meet certain reporting and other requirements during the unwinding process.

Phase 1: Prepare for the renewal process and educate Medicaid beneficiaries about upcoming changes.
(Help update contact information so once notices are sent they are received)

Phase 2: Ensure Medicaid beneficiaries take the necessary steps to renew coverage and transition to other coverage if they're no longer eligible.

<https://www.cms.gov/aian-unwinding>



What does this mean for Montana?

Montana will take 10 months to complete renewals for all enrollees. Each month (starting in April) a different group will start the renewal process. The final group will start the process in January of 2024. In mid-March, the Office of Public Assistance sent out a notice to all enrollees about upcoming changes. You can see a copy of that notice [here](#). The notice didn't end anyone's Medicaid, just provides information about what is happening with renewals and program changes in the coming months.

<https://www.mtpca.org/medicaid-unwind/>

How many Montanans were expected to lose their Medicaid coverage?

- In April, according to Kaiser Family Foundation (KFF) an estimated 27,800 individuals were expected to lose coverage overall.
- <https://www.kff.org/medicaid/issue-brief/how-many-people-might-lose-medicaid-when-states-unwind-continuous-enrollment/>

How many have lost coverage so far?

- According to Montana DPHHS dashboard, 34,204 Montanans have lost coverage in the first 2 months of the Medicaid Unwinding – 123% more than KFF originally projected, they have since update that number to a projected 59,000 overall.



What does this mean for Crow IHS?

According to an estimate from IHS Headquarters, a low of 344 to a high of 1170 Medicaid beneficiaries who visit the CRSU could potentially lose their coverage. According to an analysis done at Billings Area, there is a potential of 971 Medicaid beneficiaries being disenrolled due to the Medicaid Unwinding.

Throughout the PHE, each Medicaid patient brought in \$3,016/year on average; there is a utilization rate of 7 visits/year.

At a low we may lose \$1,037,504/year on average.

At a high we may lose \$3,528,720/year on average.

Potentially we may lose \$2,928,536/year on average.

A data share was requested to MT DPHHS, in order to curve these numbers. The goal is to lessen the drop in Medicaid revenue for CRSU between \$1,891,032 and the lower value of \$1,037,504/year on average.

- We cannot anticipate a zero Medicaid revenue loss, as a number of patients will no longer qualify for Medicaid.
- Patient Benefits Coordinators will pose other types of coverage options to those who no longer qualify for Medicaid.



What efforts have been done so far?

- Attended webinars with CMS, Medicaid, NIHB, and Cover Montana to gain knowledge and create a strategy on what to do each at phase.
- Data share approved from MT DPHHS to help in Medicaid Unwinding efforts.
- Member of national workgroups creating social media campaigns and creating best practices to disseminate.
- Presented on the Medicaid Unwinding at a national level.
- Regular social media posts on the Crow IHS Facebook page to keep our community members informed about the Unwinding.
- Advertise on Good Health TV and flyers in the facilities.
- Patient Registration is handing out slips to Medicaid patients to visit a Patient Benefit Coordinator if they need help updating their contact information or with their renewal.



What efforts have been done so far? – Social Media

Crow Indian Health Service
Published by Dustie Cummins · June 1 ·


IMPORTANT, PLEASE READ & SHARE!

Montana Medicaid renewals are back. Notices started going out in April. Renewals will happen in phases, so if you haven't received one yet, you will get one in the coming months. If your case is able to be auto-renewed you will receive a notice letting you know your coverage has been renewed.

If you have not received recent notices from Montana DPHHS, Office of Public Assistance, or mail is being forwarded, please update your address/phone/email by going online: <https://mt.accessgov.com/.../Page/medicaid/changeofaddress>; calling 1-888-706-1535 (option 1); walking in to your local office; or contact an IHS Patient Benefit Coordinator at 406-638-3418, 406-638-3418, or 406-638-3526.

Crow Indian Health Service Patient Benefit Coordinators will also be calling you to see if you need help completing your Medicaid renewal.

If OPA receives returned mail from you they will try to contact you another way like text, email or phone - if they have your information. However, BEWARE of SCAMMERS. If you feel as though you are being contacted by someone other than OPA or IHS, hang up/do not reply. However, you may still need to contact someone so use the information above to do so.



HAVE HEALTH INSURANCE?

Don't Lose Your Medicaid Coverage

Crow Indian Health Service
Published by Dustie Cummins · May 23 ·

IMPORTANT, PLEASE READ & SHARE!

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MEDICAID RENEWAL LET

Don't miss this letter

Check that your state Medicaid has your current mailing address. Your Indian Health Care Provider can help.

Medicaid.gov

Crow Service Unit - Indian Health Service
Published by Dustie Cummins · July 26 at 12:16 PM ·

Are you or will you no longer be eligible for Medicaid?
Does your employer offer health coverage or do you want to apply for Marketplace Insurance?
If so you may qualify for a special enrollment period for your employer's health coverage or through the Marketplace Insurance. ... See more

Recently lost Medicaid or CHIP?

You may qualify for a Special Enrollment Period

HealthCare.gov/Tribal

Contact your Indian Health Care Provider for help.

Crow Service Unit - Indian Health Service
Published by Dustie Cummins · July 28 at 9:45 AM ·

Have you recently lost your Medicaid Coverage?
Did you forget to turn in your Medicaid renewal packet? You can reapply at: www.apply.mt.gov or call an IHS Patient benefit Coordinator for assistance.
If your Medicaid coverage ended because you're no longer eligible, you may qualify for other health coverage options like Marketplace Insurance or your employer's insurance.
If you need assistance call an IHS Patient benefit Coordinator at: 406-638-3418, 406-638-3526.
If you are having trouble working with you.

Lost Medicaid or CHIP coverage?

Act NOW to see if you qualify for a special enrollment period at

HealthCare.gov

HealthCare.gov



Plan for Data Share?

- Combine the data with a template created.
- Reach out to households to assist with online account creation and online renewal.
- Lessen the effect of the Medicaid Unwinding for on the Service Unit.

CASE ID	DOB	NAME	ADDRESS	CITY	STATE	ZIPCODE	PHONE	CALL DATE	LETTER DATE	SCREENING RESULTS	ONLINE CASE CREATED	RENEWAL Y/N	EMP Y/N	ACA Y/N	MCR Y/N	NEW APP DUE TO ERROR	CASE NOTE DATE	COMMENTS



Contacting Households

- When the data is received, the main case holder(s) will be identified and outreach will be targeted to.
- Three call attempts on different days – unless there are no working phone numbers.
 - Leave a voicemail or message with each call to each phone numbers listed if there is a working voicemail or someone answers.
- After three attempts and no phone contact send a letter. A template will be provided.
- Document the HRN of each household member of the case; copy and paste notes. Include applications/activities in case.
 - Sample: DATE Called patient, unable to leave a voicemail due to no working voicemail. Sending Unwinding letter. DRC
 - Sample: Called and spoke to patient. Screened for MCD and household should remain eligible. Created online case and completed online renewal. DRC
 - Applications: Medicaid Renewal (pending); Apply.mt.gov (screening); Medicaid (screening).



Contacting Households

What do we do when we reach a patient?

1. Identify yourself and the reason you are calling.
2. Ask: Have received their renewal packet?
 - a) Yes, have they turned it in?
 - 1) Yes.
 - i. Complete a Medicaid screening to see if they will remain eligible.
 - ii. If they will, no other action besides documentation is needed.
 - iii. If they will not, educate about employer coverage and Marketplace Insurance, and help if needed.
 - 2) No.
 - i. Complete a Medicaid screening.
 - ii. Attempt to help them complete their renewal online. May need to create an online account.
 - iii. If they will not qualify, educate them on employer coverage and Marketplace Insurance, help if needed.
 - b) No – find out if they have moved or mailing/physical address has changed.
 - 1) Update their contact information online: <https://mt.accessgov.com/dphhs/Forms/Page/medicaid/changeofaddress>.
 - 2) Complete a Medicaid screening.
 - 3) Start online account and complete renewal.
 - 4) If they will not qualify, educate them on employer coverage and Marketplace Insurance, help if needed.
3. Document all encounters on spreadsheet and in HRNs.



What to do if they are no longer eligible?

If an individual or household is no longer eligible due to **income** you will want to educate patients regarding other coverages like Employer Sponsored Coverage and Marketplace Insurance.

- Renewal still needs to be completed. Medicaid ending is a qualifying life event for a Special Enrollment Period (SEP) for Employer coverage and Marketplace Insurance (Tribal members qualify for SEP year round), they need a copy of the letter from Medicaid showing when their coverage is ending.

If the patient is no longer eligible because they turned **65** (Medicare eligible) during the pandemic, there is a Medicare SEP given due to the Medicaid Unwinding.

- You will want to screen/apply for Medicare Savings Program and Extra Help using: [Should You Use This Application?, Extra Help With Medicare Prescription Drug Plan Costs, Social Security \(ssa.gov\)](#).
- Unless, there is a household with individuals who do not qualify for Medicare, than you should use the www.apply.mt.gov.

Ideally, we want as many individuals and families to maintain a type of health coverage. However, that will not likely happen in every case because there may be costs involved or refusal.



Documentation

Document each encounter in the spreadsheet and in each patient's HRN with notes and applications/activities.

Patient Benefit Coordinators received Medicaid Unwinding case note templates, that can be modified to fit unique situations.

In an instance where patients are unable to be reached, can wait until the last phone attempt to make all documentation in HRN(s), track on the spreadsheet in real time.

Applications/Activities are included for reports and follow-up.

Close cases that don't have applications/activities pending or follow-up needed status.



Indian Health Service

Medicaid Unwinding

KRISTEN BITSUIE

TRIBAL HEALTH CARE OUTREACH AND
EDUCATION POLICY COORDINATOR

AUGUST, 2023



Preparing for the Work Ahead

Most states have been actively preparing for the end of the continuous enrollment condition for over a year. CMS has encouraged all states to:

- Develop an unwinding plan to prioritize and distribute renewals
- Obtain updated contact information to ensure that individuals receive information on redeterminations
- Launch a robust outreach and communication plan for beneficiaries and stakeholders
- Engage community partners, health plans, and the provider community to amplify key messages and to provide assistance with renewals

However, there are anticipated challenges to overcome:

- Large volume of renewals for states to complete
- Workforce challenges and staffing shortages experienced by state Medicaid and CHIP agencies
- The long length of time since many enrollees have had to complete a renewal
- The likelihood of outdated mailing addresses and other contact information for enrollees



Reasons Why Health Insurance Is Important

Because uninsured individuals have worse health outcomes

Because uninsured individuals receive less medical care and less timely care

Because it expands access to care

Because it supports I/T/U facilities

Native Americans have higher death rates, lower life expectancy than any other race!

Outreach Question

What have you done to educate or inform your Tribal community about:

- Medicaid Unwinding?
- The new changes with Medicaid?
- Taking necessary steps to renew Medicaid coverage?
- Alternate health insurance coverage options?

**LEARN ABOUT:
MEDICAID
UNWINDING**





**Renewals Are Coming...
Don't Lose Your Coverage**

Outreach question

How have you contacted your Medicaid enrollees about Medicaid Unwinding?

What is the best way to reach Tribal citizens in your community?

Enrollment Data Question

Medicaid & CHIP Enrollment DATA



Does your facility receive Medicaid enrollment data of Tribal citizens who may be disenrolled from Medicaid from the State Medicaid?

If so, is it useful?

For those of you who don't receive Medicaid enrollment data from your State Medicaid, has your facility requested it?

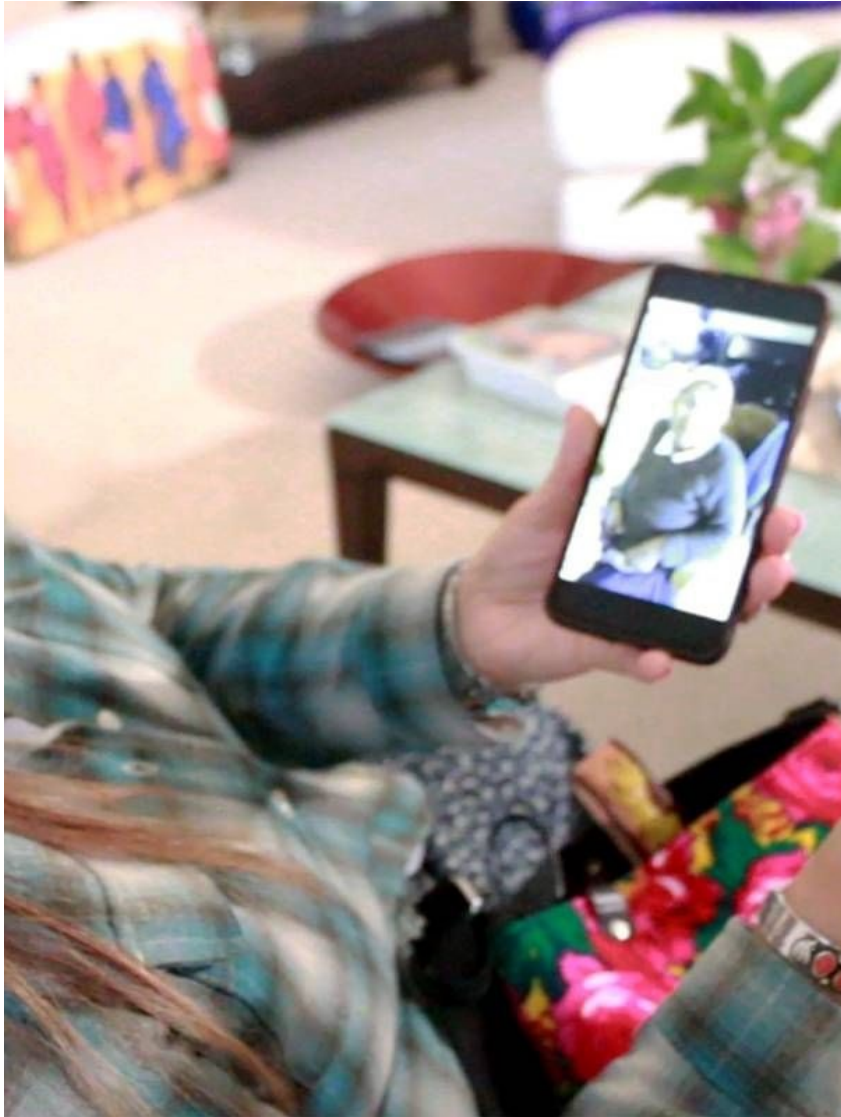
If not, why not?

If the request was made, why has the State Medicaid not shared?

CMCS Informational Bulletin: 11/28/2016

Strategies to Enroll American Indian and Alaska Native Families and Children in Medicaid and CHIP

“State Medicaid agencies have the option to share AI/AN Medicaid enrollment data with Indian health care providers as long as personal health information is protected. This searchable database can be used to target outreach and enrollment efforts, to track patient enrollment status, and to send reminders and contact patients about renewal.”



Communication Question

What kind of work does your Benefits Coordination program do to educate or inform Tribal citizens, other organizations, Tribal leaders, etc?

What kind of virtual communication does your Benefits Coordination program use to reach Tribal citizens?

Outreach and Enrollment Assistance are Key to Helping Tribal Citizens Stay Covered

For Tribal citizens who are enrolled in the Medicaid program, trust their PBCs or Tribal Enrollment Assister to help them understand the Medicaid Unwinding process.

Key Messages:

- You are the person who will help with enrolling in health insurance coverage
- Health insurance coverage covers many services I/T/U facilities do not provide

Thank You

**IHS, tribal, and urban
Indian health centers
take protecting your
health seriously.**



As the world reopens, we will continue to provide trusted, quality care. We're open and ready to serve you.

Kristen Bitsuie

Tribal Health Care Outreach and
Education Policy Coordinator

National Indian Health Board

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