Maximizing Enrollment
Transforming State Health Coverage

Prioritizing Enrollment Simplification:
What States Can Do Now to Make 2014 Easier

Tuesday, April 23, 2013
1:00pm – 2:00pm EDT

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Agenda

Welcome and Introductions
- Alice Weiss, Co-Director, Maximizing Enrollment; Program Director, NASHP

Opportunities for Simplification
- Maureen Hensley-Quinn, Deputy Director, Maximizing Enrollment; Program Manager, NASHP

States' Strategies for Enrollment Simplification
- **Gretel Felton**, Technical Support Division Director, Alabama Medicaid
- **Amy Andrade**, Member and Provider Services Director, Massachusetts Office of Medicaid

Questions and Answers

Reminder: Use the chat feature to submit questions

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Opportunities for Simplification

Maureen Hensley-Quinn, Deputy Director, Maximizing Enrollment/NASHP

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Background

Maximizing Enrollment: Transforming State Health Coverage
- $15 M, 4 year RWJF initiative launched in 2009 as Maximizing Enrollment for Kids
- National Academy for State Policy = National Program Office
- 8 Grantee states – AL, IL, LA, MA, NY, UT, VA, WI

Resources:
- Brief - State Experiences with Express Lane Eligibility: Policy Considerations and Possibilities for the Future
  http://www.statenetwork.org/resource/state-experiences-with-express-lane-eligibility-policy-considerations-and-possibilities-for-the-future/

Websites:
- www.maxenroll.org
- www.statenetwork.org
- www.statereforum.org

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Strategies for Streamlining Enrollment and Renewal Now and in the Future

- Goal = Increase program efficiency
  - Enroll and retain those already eligible for coverage
  - Improve systems using available federal funds
  - Reduce paper documentation
  - Minimize worker caseloads

- State-tested strategies with proven results
  - Express Lane Eligibility
  - "Continuous" Renewal (also known as Administrative Renewal)

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Express Lane Eligibility (ELE) Basics

- Strategy for enrollment and retention simplification

- Used for:
  - Auto-enrollment
  - Auto-renewal
  - Identification

- Authorized under CHIPRA and extended through budget deal until September 2014

- One of the 5 out of 8 strategies states implemented to qualify for CHIPRA performance bonuses

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Snapshot of States' Express Lane Eligibility Programs

State	Express Lane Agency	Target Population	Determination	Eligibility Factor(s) Accepted from ELA	Auto Enrolled
Alabama	SNAP	Children	Initial Enrollment & Renewal	All/Overall determination	No
		Women (19-55 years)	Initial Enrollment & Renewal	All/Overall determination	No
Georgia	WIC	Children	Initial Enrollment	Partial: Income, identity, age, and residency	No
Iowa	Medicaid and CHIP	Children	Transition between Medicaid and separate CHIP	Medicaid denial due to income increase	Yes
	SNAP	Children	Initial Enrollment	All/Overall determination	No
Louisiana	SNAP	Children	Initial Enrollment & Renewal	All/Overall determination	Yes
Maryland	State Income Tax	Children	Initial Enrollment	Partial: Income	No
Massachusetts	SNAP	Adults & Children	Renewal	Partial: Income	Yes
New Jersey	State Income Tax	Children	Initial Enrollment	Partial: Income	No
	Free and Reduced Lunch	Children	Initial Enrollment	Partial: Income	No
New York	CHIP and Medicaid	Children	Transition between Medicaid and CHIP	Medicaid denial due to income increase	Yes
Oregon	SNAP	Children	Initial Enrollment	Partial: Income, Household composition, age, residency	No
	Free and Reduced Lunch	Children	Initial Enrollment	Partial: Income, Household composition, age, residency	No
South Carolina	SNAP and TANF	Children	Renewal	All/Overall determination	Yes

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ELE and the ACA: An Option?

- Streamline enrollment for newly eligible?
  - CBO estimates 11 million will be Medicaid eligible in 2014 (due to expansion to 133% FPL)
    - Mostly low-income adults
  - 43% of uninsured parents with income up to 133% FPL already receive SNAP

- ELE enrollees exempt from MAGI

- Maintain integrated eligibility with sister agencies

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ELE Policy Development Considerations

- Affirmative consent required by CMS to enroll individuals in Medicaid or CHIP coverage
  - In writing, by phone, in person, e-signature, via human service application
  - Applications, forms, notices

- Define overall goal of the strategy by using available data
  - State or national survey data to understand uninsured
  - Enrollment and retention trend data

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ELE Operational Considerations

- System capabilities
  - Legacy system limits automation

- Data sharing plans
  - Memorandums of understanding (MOUs)
  - Relationships between agencies
  - Firewalls

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What is Continuous Renewal?

- Reduce churn and alleviate staff workload
- Strategy to streamline renewal for individuals whose eligibility at low risk of changing
  - Populations states have identified for this strategy include: dual eligibles; those in long term institutional settings, i.e. nursing homes; those receiving social security as only income

- State system auto-renews individual and sends letter advising follow-up only if circumstances have changed

- Grantee state examples: AL, LA, MA, NY, WI

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Considerations and Benefits

Considerations
- Population eligible for continuous renewal?
  - Concerns about casting too wide of a net?
    - Pilot different populations
    - Use a phased approach

Benefits
- Efficiently using staff resources on complicated cases
- Continuity of coverage for vulnerable populations

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States' Lessons Learned

- Using technology yields better enrollment and retention results

- Support for simplification from state leadership aides implementation

- Even integrated Medicaid, CHIP and human service programs can have gaps

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State Strategies for Enrollment Simplification

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What strategies have you developed that help streamline enrollment and improve retention?

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Massachusetts: Simplification Today

- Administrative Renewal:
  - For members in long term care facilities (April 2010).
  - For community elders and disabled adults and children (December 2011).

- Express Lane Renewal:
  - For families receiving both subsidized health benefits (e.g. Medicaid and CHIP) and Supplemental Nutrition Assistance Program (SNAP) benefits (September 2012).

- Paperless Renewal:
  - Members <u>do not</u> have to return their annual eligibility review form if they do not have changes to report to MassHealth.

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Massachusetts: Simplifications in 2014

- Continue Current Renewal Practices

- Maximize "Automatic" Renewals:
  - Use ACA provision to provide "automatic" reviews when the agency has sufficient data to determine eligibility without requiring a response from members.

- Seamless Transition for Current Enrollees:
  - The Commonwealth will also provide a seamless transition to new coverage types in 2014 for certain members by "mapping" from old benefits to new. Members will not need to complete a review form until their next scheduled annual review or change in circumstances.

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Alabama: Simplifications Today

- Eliminated face-to face interview/assets test

- 12 months continuous eligibility for children

- Joint paper and online app with e-signature

- Verification of citizenship through SSA

- Expedited newborn certification

- Express-lane eligibility (ELE):
  - Applications
  - Administrative/ELE renewal process

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> ## How does your state utilize ELE and continuous renewal currently?

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Alabama: ELE Process

- ELE implementation began with renewals in October 2009
  - Minimal programming changes -ELE indicator to keep count of individuals
  - Initially, workers manually retrieved SNAP/TANF information by viewing screens
  - Child's eligibility continued if active on SNAP or TANF screens
  - Client sent in renewal, worker checked screen, and renewed child

- ELE for applications implemented April 2010
  - Workers receive Medicaid application and manually check screens
  - Citizenship must still be documented through SSA match
  - No changes to Medicaid or SNAP application
  - No changes to SNAP work flow
  - Children are Medicaid eligible if active on SNAP or TANF program

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Alabama: ELE Process continued

- ELE enhancements:
  - 1115 waiver approved in April 2012 to allow ELE for family planning adults (Implemented May 2012 for applications and renewals)
  - MOU established to complete auto ELE monthly matches
  - Data fields expanded to include auto ex-parte renewals and to differentiate between use of ELE at application vs. renewal

- Current Auto Renewals
  - Since February 2013; automated ELE matches with SNAP/TANF systems are run monthly before regular renewal packets are sent
  - Households eligible for ELE match must contain a child under 19 or woman receiving family planning services
  - Ex-parte auto-renewals completed monthly for children with non-parent caretakers (these children did not match through ELE)
  - Families receive a letter, but are not required to respond

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Massachusetts: "Continuous" Renewal

- Developing the policy:
  - MA looked at populations with stable circumstances who were not likely to have changes that would affect eligibility from year-to-year

- Criteria:
  - Members selected for administrative renewal have Social Security as their sole source of income and are receiving Medicare benefits

- Administrative reviews in calendar year 2012:
  - 10% of all non-elderly household reviews (~39,000 members per year)
  - 29% of all community elder household reviews (~27,450 members per year)
  - 59% of all long term care household reviews (~12,275 members per year)
  - Almost all children eligible via the state's Kaileigh Mulligan program (also known as the Katie Beckett Program)

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Massachusetts: ELE

- Developing the policy:
  - MA implemented an Express Lane renewal process by identifying low-income families with stable circumstances as verified by SNAP eligibility data
  - MA obtained permission in its 1115 Demonstration Waiver to include parents of children in the Express Lane process.

- Criteria:
  - Families selected for Express Lane have at least one child under age 19, contain members receiving both health coverage and SNAP benefits, and meet the income criteria for the process.

- Express Lane Reviews Since Implementation (Sept 2012):
  - 10% of all non-elderly household reviews (a projected 142,000 members per year).

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How does this policy impact your overall approach to eligibility and enrollment and what is the benefit to the state?

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Massachusetts

- Both Express Lane renewal and administrative review have eased the workload for eligibility staff by taking reviews out of the workflow.

- Timeliness of processing has improved.

- These processes have been very beneficial to MassHealth members because they do not need to return unnecessary paperwork and are less likely to lose benefits for administrative reasons when they are truly still eligible.

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Alabama

- Participation:
  - About 44% of monthly renewals are auto ELE
  - 4% of renewals are auto ex-parte children
  - Over 350,000 individuals have had eligibility determined through ELE in Alabama

- Data from automated match is more accurate

- The state now dedicates more resources to applications, other renewals, and help with other cases, such as Medicare Savings (QMB, SLMB, QI)

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What resources, other than funding, supported your implementation of these policies?

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Alabama Response

- Pre-CHIPRA support for ELE goals in Alabama

- Great relationship with TANF/SNAP officials at the Department of Human Resources
  - Access to TANF and SNAP data established prior to ELE
  - MOU and data sharing agreement was amended

- Contact with other ELE states

- Continuous updates and support of stakeholders (providers, advocates, other agencies)
  - Alabama Arise(advocate group)received grant for ELE early administrative support efforts

- Phased approach to ELE made it easier to obtain programming resources-Next phase is auto-ELE for pending applications

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Massachusetts Response

- Data:
  - MA relied heavily on data to design and implement both the administrative review and Express Lane renewal processes.

- Strong Agency Partner Relationships:
  - MA also has a strong relationship with its sister agency, the Massachusetts Department of Transitional Assistance, which oversees the SNAP program. This existing relationship and access to their data led to the design of an ELE renewal process using SNAP data.

- Leadership Support:
  - MA Executive Office of Health and Human Services leadership strongly encourages streamlining application and renewal processes to benefit both applicants/members and the operational workflow.

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Questions and Answers

Please submit your questions in the chat box on the left

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