Steve Sisolak Governor



Richard Whitley Director

State of Nevada Department of Health and Human Services

COVID-19 Unwinding of the Public Health Emergency (PHE) Medical Care Advisory Committee (MCAC)

Division of Health Care Financing and Policy (DHCFP)

Vanessa Rahme, Project Manager



Helping people. It's who we are and what we do.

The Public Health Emergency Declaration

- The COVID-19 Public Health Emergency (PHE) declaration has now been in place for more than two years since January 2020 and has been renewed 11 times. <u>Public Health Emergency Declarations (hhs.gov)</u>
- In March 2020, federal COVID-19 legislation established the "continuous enrollment condition," which gave states extra federal Medicaid funding in exchange for maintaining enrollment for all individuals, even if they are no longer eligible through the end of the month that the federal COVID-19 PHE ends.
- While the continuous enrollment condition does not apply to CHIP, many states implemented temporary policy changes that had similar impact on CHIP enrollment.
- After the PHE, states will resume normal operations, including restarting full Medicaid and CHIP eligibility renewals and ending coverage of ineligible enrollees – A year-long process known as **unwinding**.



End of The Public Health Emergency Declaration

The Federal Department of Health and Human Services (HHS) and Centers for Medicare & Medicaid Services (CMS) are working closely with states to ensure they are ready when the PHE ends. HHS has committed to 60 days advance notice to states prior to ending the PHE.

On October 13, 2022, Secretary Xavier Becerra renewed the COVID-19 PHE declaration. The assumption is COVID-19 PHE will be extended for a full 90 days, through **January 11, 2023**. With this assumption in mind, key dates going forward are as follows:

- If this is the last renewal, then the 60-day advance notice of the end of the PHE would be issued on **November 12, 2022.**
- If this is the last renewal, then the PHE would end on January 11, 2023.
- If this is the last renewal, then the Medicaid continuous enrollment requirement would expire on **January 31, 2023** and the first date on which a Medicaid coverage termination could be made effective is **February 1, 2023**.
- If this is the last renewal, then the 6.2 percentage point FMAP enhancement will extend through March 31, 2023.



Cross-Agency Coordination

- The Nevada Department of Health and Human Services (DHHS) is the Single State Medicaid Agency that oversees the Division of Welfare and Supportive Services (DWSS) the agency tasked with processing Medicaid eligibility decisions and the Division of Health Care Financing and Policy (DHCFP) the agency responsible for administering the plan.
- Nevada Health Link is the online state-base insurance marketplace operated by Silver State Health Insurance Exchange (SSHIX).
- DWSS, DHCFP and SSHIX are collaborating with other stakeholders and have established feedback loops, coordinated outreach, shared messaging, report progress and triage issues.
- The project is being overseen and directed by Sandie Ruybalid, Deputy Administrator at the request of the Governors office.

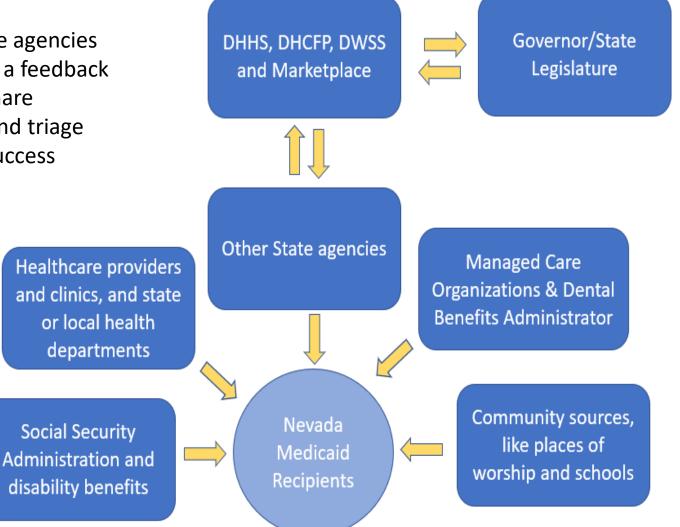






Cross Agency & Stakeholder Coordination

Collaboration with other state agencies and stakeholders to establish a feedback loop, coordinate outreach, share messaging, report progress and triage issues will be crucial to our success





COVID-19 PHE Operational Unwinding Plan

The plan details the activities Nevada will undergo to return to regular Medicaid operations. It is posted publicly and has been shared with CMS as well as stakeholders

<u>Nevada Medicaid Covid-19 Public Health Emergency Operational Unwinding Plan State of</u> <u>Nevada Department of Health and Human Services (nv.gov)</u>

Points of Interest:

- 1135 Flexibilities implemented in response to the PHE What will happen to them upon the end of PHE? (*Pg. 7 and Appendix A*)
- How are renewals being conducted? (Pg. 14 & 15)
- Auto Renewal (Ex-parte) (Pg. 14 & 15)
- Disenrollment Estimates (Pg. 19)
- Renewal Workload (Pg. 32 & 33) & Table 1

Program	22-Sep	22-Oct	22-Nov	22-Dec	23-Jan	23-Feb	23-Mar	23-Apr	23-May	23-Jun	23-Jul	23-Aug
Medicaid/CHIP	48234	59619	45163	52195	45524	49789	57910	26679	22898	22396	20859	17934
MAABD			9649									
Total	56164	66114	54812	67456	56485	63012	71231	35838	29823	29984	29256	26401



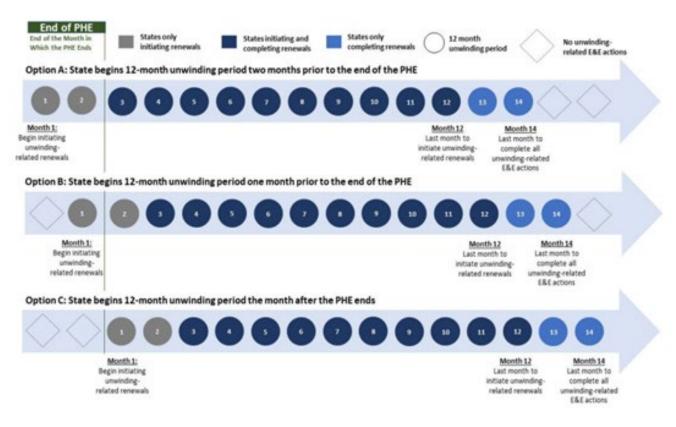
Keeping Nevadans Insured

Key Strategies

- Ensure Nevada Medicaid recipients update their contact information
- Automate Medicaid renewals (Ex-Parte) reducing coverage loss due to procedural reasons
- Smoothly transition those no longer eligible for Medicaid to our state-base insurance marketplace

Renewal Approach

- Complete renewals within the 14 months
 - Nevada chose Option C and will begin the 12-month unwinding period the month after the PHE ends

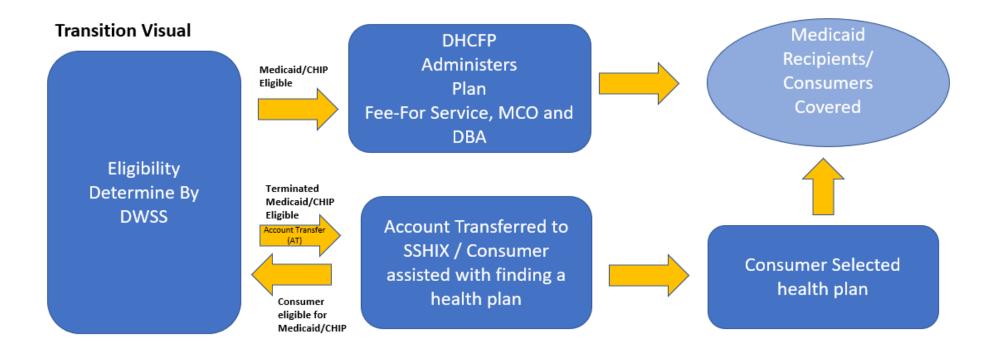




Silver State Health Insurance Exchange

The Silver State Health Insurance Exchange (SSHIX) is the state agency that operates the online Marketplace known as Nevada Health Link.

SSHIX Mission: To increase the number of insured Nevadans by facilitating the purchase and sale of health insurance that provides quality health care through the creation of a transparent, simplified marketplace of qualified health plans.





Silver State Health Insurance Exchange

Ensuring a smooth transition and accessing affordable health insurance by:

- Assessing the current data received electronically from DWSS as part of Account Transfer (AT) process.
- Working with DWSS to obtain contact information for Exchange referrals that were denied / terminated for Medicaid.
- Conducting outreach to consumers with contact information.
- Connecting consumers to one of the representatives from Nevada who can assist the consumer in enrolling in a qualified health plan.
- Following up as needed to help consumers who started an application but did not complete enrollment.
- Further details can be located on pg. 27 of the Operational Plan: <u>Nevada Medicaid Covid-19 Public Health</u> <u>Emergency Operational Unwinding Plan State of Nevada Department of Health and Human Services</u> (nv.gov)





Phase I - Communications

Plan & Educate

Primary Focus: Encourage Medicaid recipients to provide the Division of Welfare and Supportive Services (DWSS) with updated contact information such as: name, address, phone number, and email address.

PHASE 1: Objective					
PLAN	EDUCATE				
Objective: States and partners engage in operational planning and develop coordinating mechanisms	Objective: Medicaid enrollees are informed of coming changes				
Primary Audience: Providers, MCOs, and other community organizations that work with Medicaid enrollees	Primary Audience: Navigators, assisters, MCOs; enrollees who will need to take action to stay enrolled				
PHASE 1: Communication/Messaging					
PLAN	EDUCATE				
Update your contact information. Make sure Medicaid has the correct mailing address, phone, and email contacts to reach you with important updates about your health insurance	Get ready. Medicaid rules are changing. Here's what you need to know about upcoming changes to Medicaid eligibility and what you can do to prepare				



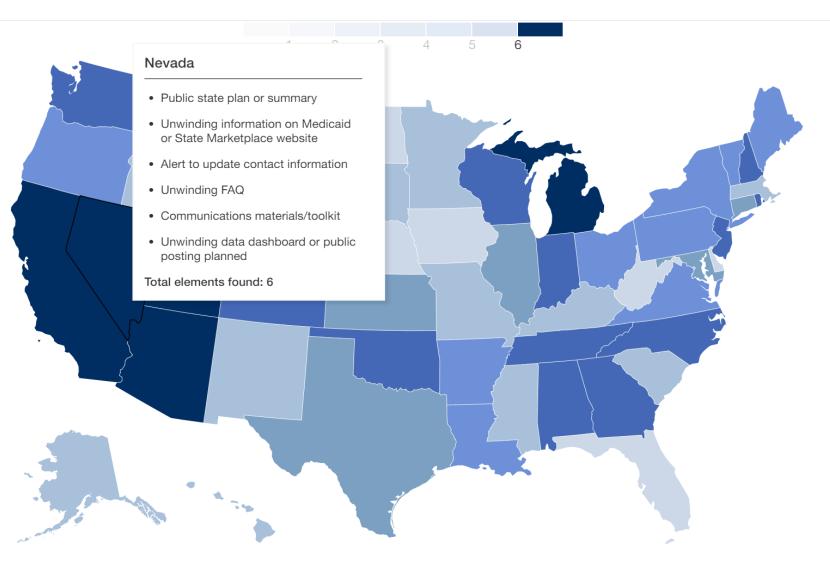
Accomplishments to Date

- Approval of American Rescue Plan Act (ARPA) funding and vendor contract to upgrade the Division of Welfare and Supportive Services (DWSS) eligibility system to automate the Medicaid renewal process (Exparte)
 - This allows for the electronic verification of data to auto enroll without needing to return paperwork
- Simplified updating contact information experience with the Update my Address Webform
 - Does not require a log in or registration and automatically emails the form to DWSS for processing
- Successfully leveraging Managed Care Organizations, Dental Benefits Administrator, Nevada Health Link and community partners to amplify our communication efforts to recipients to update their contact information
- Gained CMS approval for a waiver under section 1902 (e)(14)(A) authority to allow DWSS to update contact
 information received from the Managed Care Organizations without having to first reach out to the
 recipient to reverify the information
- Nevada is among 6 states to provide all 6 key documents or information elements (posted publicly) in preparation for the unwinding for the Medicaid continuous coverage protection at the end of the public health emergency

50-State Unwinding Tracker – Center For Children and Families (georgetown.edu)



50-State Unwinding Tracker by Georgetown University





Challenges



- Uncertainty of when the PHE will end
 - \circ A moving target making it hard to plan resources and timing of systems changes
- Inability to use text messaging to perform outreach to Medicaid recipients without their expressed consent
- CMS may revert to original April 2020 interpretation of the Families First Coronavirus Response Act (FFCRA), which requires Medicaid agencies to maintain amount, scope and duration of benefits instead of a tiered coverage system
- On August 31, CMS released a new proposed rule, "<u>Streamlining the Medicaid,</u> <u>Children's Health Insurance Program, and Basic Health Program Application, Eligibility</u> <u>Determination, Enrollment, and Renewal Processes</u>."
 - The proposed rule seeks to strengthen existing eligibility, enrollment, and renewal operational processes to close gaps and support states in preparing for the end of the Medicaid continuous coverage requirement. Comments on the proposed rule are due no later than November 7, 2022
 - ✓ A heavy-lift operationally if required to implement during the unwinding period with limited and strained resources



Communication Resources Available

State Agencies, Providers and Community Partners can locate customizable messaging materials on the DHCFP webpage: <u>MemberOutreach (nv.gov)</u>

• Please check the website regularly to ensure you have the most up to date information

Update contact information using the webform: <u>https://dhcfp.nv.gov/UpdateMyAddress/</u>

Public documents can be located on our COVID-19 webpage: <u>covid19 (nv.gov)</u>

- 50-State Unwinding Tracker
- Managed Care Organizations & Dental Benefits Administrator FAQs
- COVID-19 PHE Operational Unwinding Plan

Provider Web Announcements (WA)

Updates to DHCFP or Nevada Medicaid websites and COVID-19 Unwind are posted on <u>Nevada Medicaid (nv.gov</u>)

Medicaid Listserv

• Medicaid sends notifications direct to your email regarding news, initiatives and public meetings

Sign up here: https://dhcfp.nv.gov/Resources/NevadaMedicaidUpdate/NevadaMedicaidUpdate/





Questions?



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Acronyms

Acronym	Description
ARPA	American Resue Plan Act
AT	Account Transfer
CHIP	Children's Health Insurance Program
CMS	Centers for Medicare & Medicaid Services
DBA	Dental Benefits Administrator
DHCFP	Division of Health Care Financing and Policy
DHHS	Department of Health and Human Services
DWSS	Division Welfare and Supportive Services
FAQ	Frequent Asked Questions
FFCRA	Families First Coronavirus Response Act
HHS	Federal Department of Health Human Services
MCAC	Medical Care Advisory Committee
МСО	Managed Care Organization
PHE	Public Health Emergency
SSHIX	Silver State Health Insurance Exchange
WA	Web Announcement

