

# Unwinding Continuous Medicaid

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# Federal Background

- Families First Coronavirus Response Act (FFCRA) of 2020
  - Increased the federal share of most Medicaid spending
  - Requires states to keep people on Medicaid, not disenroll
- American Rescue Plan Act (ARPA) of 2021
  - Expanded and enhanced ACA Marketplace subsidies
  - Very low premiums with low deductibles

# Federal PHE vs State PHE

- Medicaid continuation was tied to the federal declaration of PHE until the Consolidated Appropriations Act
- Enhanced FoodShare benefits were tied to the state declaration of PHE until the Consolidated Appropriations Act

# Consolidated Appropriations Act

## Consolidated Appropriations Act (Dec 2022/Jan 2023)

- Decoupled continuous Medicaid from the federal declaration of PHE
- Stopped FoodShare/SNAP additional benefits as of Feb. 2023
- States given 12-14 months to remove people from Medicaid

# WI Background

- WI Department of Health Services (DHS) has been planning for this for years.
- As part of the anticipated unwinding, states had to submit a detailed plan to CMS. CMS reviews, edits, approves
- WI DHS has been having monthly stakeholder meetings with partner agencies

# Wisconsin process

- May 2023—special group of ppl needed to re-apply or lose coverage 5/31/23 (90,000 ppl)
- June 2023 started first group of ppl for typical renewals. Renewals go through May 2024.
- 80,000 renewals per month!
  - Plus regular volume of new applications and other renewals

# Wisconsin process

- Each person or couple has a designated renewal month
- Do not renew early or late
- Watch mail and read notices carefully
- Some administrative renewals

# Renewal timelines

Renewal month	"Just right" renewal window	Status
June 2023	May 15, 2023 – June 16, 2023	Your renewal is now late. You may be able to renew up to 90 days after your renewal month. <a href="#">Learn more.</a>
July 2023	June 12, 2023 – July 18, 2023	Your renewal is now late. You may be able to renew up to 90 days after your renewal month. <a href="#">Learn more.</a>
August 2023	July 10, 2023 – August 17, 2023	Your renewal is now late. You may be able to renew up to 90 days after your renewal month. <a href="#">Learn more.</a>
September 2023	August 14, 2023 – September 15, 2023	Your renewal is now late. You may be able to renew up to 90 days after your renewal month. <a href="#">Learn more.</a>
<b>October 2023</b>	<b>September 11, 2023 – October 18, 2023</b>	<a href="#">→ RENEW NOW</a>
November 2023	October 16, 2023 – November 16, 2023	<a href="#">📌 Sign up for renewal reminders</a>
December 2023	November 13, 2023 – December 18, 2023	<a href="#">📌 Sign up for renewal reminders</a>
January 2024	December 11, 2023 – January 18, 2024	<a href="#">📌 Sign up for renewal reminders</a>
February 2024	January 15, 2024 – February 16, 2024	<a href="#">📌 Sign up for renewal reminders</a>
March 2024	February 12, 2024 – March 18, 2024	<a href="#">📌 Sign up for renewal reminders</a>
April 2024	March 11, 2024 – April 17, 2024	<a href="#">📌 Sign up for renewal reminders</a>
May 2024	April 15, 2024 – May 16, 2024	<a href="#">📌 Sign up for renewal reminders</a>



# Renewal timelines

- Renewals are due between 15-18<sup>th</sup> of the month (“sweet spot”) to ensure processing by end of the month
- If renewal is late, request retroactive Medicaid coverage up to 3 mo.
- Note: QMB, FamilyCare, & IRIS generally cannot be retroactive.

# Premiums & Work Requirements Return

Premiums & work requirements were on hold during PHE. Per CMS, these will return in **January 2024**:

- MAPP premiums
- MAPP work requirements (need verification)

\*Premium & work requirements come back in January 2024 for new enrollees and continually enrolled members. Exception is for people who have their renewal in Feb/March/April/May 2024.

# Premiums & Work Requirements Return

- See Ops Memo 23-35 dated 9/22/23
- In October, DHS started sending out letters & making calls to people on MAPP regarding premium & work req'mts returning.
- Some issues with MA deductible getting approved rather than MAPP as the deductible program is the default

# Medicaid divestment penalties

- Divestment penalties were not imposed for members with continuing eligibility. (New members did have penalties on the front end.)
- Divestment penalty periods will be imposed at the member's renewal date
- See Ops Memo 23-08 dated 3/17/23

# Medicaid Appeal Rights

Occasionally the local income maintenance consortium will incorrectly deny, calculate, or terminate benefits. You can try to resolve the issue informally by calling the agency and talking to a staff person at the consortium. If that is not successful, you will have to file for a fair hearing through the Division of Hearings and Appeals.

Division of Hearings and Appeals  
4822 Madison Yards Way 5<sup>th</sup> Floor North  
Madison, WI 53705-5400  
Phone: (608) 266-3096  
FAX: (608) 264-9885  
Email: [DHAMail@wisconsin.gov](mailto:DHAMail@wisconsin.gov)

**Note: for Medicaid determinations, there is only a **45 calendar day** window for appeals!  
No good cause late appeals.**

# Medicare & Medicaid

Dual eligibles

# Medicare enrollment during PHE

- Some people delayed Medicare enrollment during the PHE due to having Medicaid coverage
- Important to get people into Medicare ASAP to ensure coverage and avoid late enrollment penalty.
- Refer to ADRC or Medigap helpline

# Medicare drug subsidy

- Due to being on Medicaid during the PHE, more people will be deemed eligible for the Extra Help/Low Income Subsidy Part D drug subsidy.
  - Lower costs for copays/coinsurance for Part D-covered medications
  - No Part D plan deductible
  - No Part D premium (if low cost plan)

Dual eligibles must have a Part D plan to get drugs covered (or use LINET).



# Loss of Medicaid

- Triggers 63 day guaranteed issue into a Medicare supplement!
  - No health screening
  - Cannot be turned down
- Need a denial letter from Medicaid/Forward Health
- Refer to Medigap helpline, ADRC, or private insurance agent.

FoodShare or SNAP

# FoodShare

- Members were maxed out on FS benefits for their household size each month from mid-2020m through Feb 2023. This was called the “Emergency Allotment”
  - Ex: Jim has \$1,200 of income from SS. He receives \$30/mo in FS benefits usually, but during the pandemic he received \$240/mo (max benefit HH of 1)
- This benefit ended in February 2023 per the Consolidated Appr. Act
- (Additional 15% FS benefit was provided by WI state for limited time in 2021)

# FoodShare

- Benefits remain on Quest card and expire 12 months later if unused
- If a person is on both FS and MA, states should **align** their renewals for the same month.

# FoodShare

- A lot of food insecurity. Grocery prices have gone up and people came to rely on the increased FS benefits
- Refer people to food pantries, local agencies, Feeding America, etc.
- Refer to agency to ensure current FS benefit is correct (depends on income, household size, medical expenses, shelter expenses, etc.)

# FoodShare Work Requirements

- Returned October 1, 2023—*phased back in*
- Newly eligible for FS—work req't right away
- Ongoing FS—work req't in September **or subsequent renewal month** between Oct 23- May 24.

# FoodShare Work Requirements

## 2023 Fiscal Responsibility Act Age Limit Changes

- ABAWD was previously ages 18-49
- Starting 9/1/23, changed to 18-50
- Starting 10/1/23, that changed to 18-52
- Starting 10/2/24, changes to 18-54

# FoodShare Work Requirement--exemptions

New, additional FS **work exemptions**:

- People experiencing homelessness
- Veterans
- Children in foster care at age 18—exempt until age 25

*\*verification of FS work exemption is no longer required, unless questionable*



# Additional Funding/Quality Assurance Measures

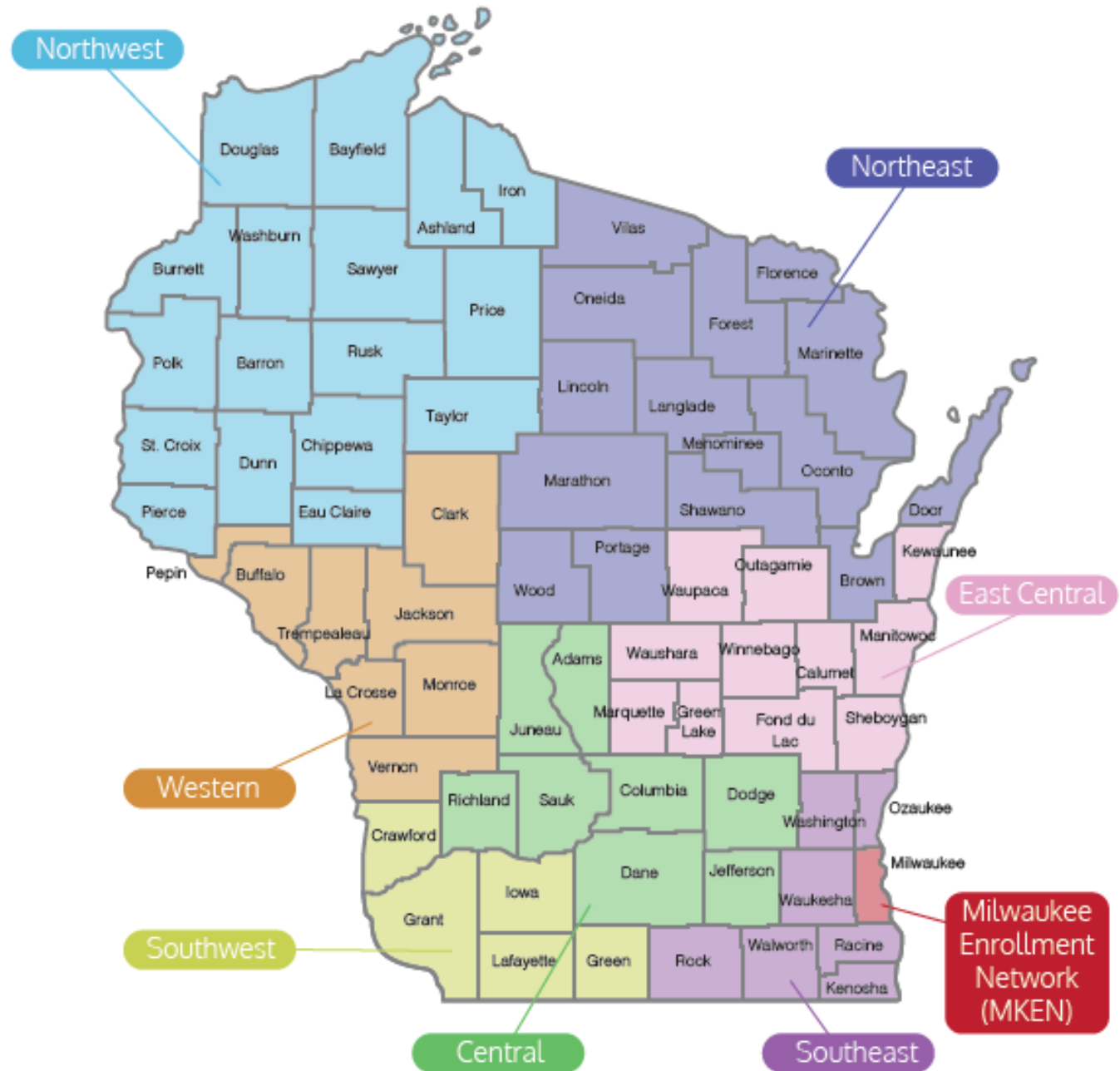
- WI DHS gave the Medicaid agencies an additional \$2 million in ARPA funds to help with equipment improvements, hiring additional staff, trainings, and staff overtime.
- WI DHS established a staffing pool to fill in when any particular Medicaid agency is low on staff or struggling with numbers.
- WI DHS hired 2 Medicaid Unwinding Coordinators, an LTE trainer

# Additional Funding/Quality Assurance Measures *cont'd*

- Income Maintenance staff are working over-time; many are new
- Genysis—on hold call wait feature
- WI DHS funded re-establishment of the Regional Enrollment Networks

# WI Regional Enrollment Networks 2022-2023

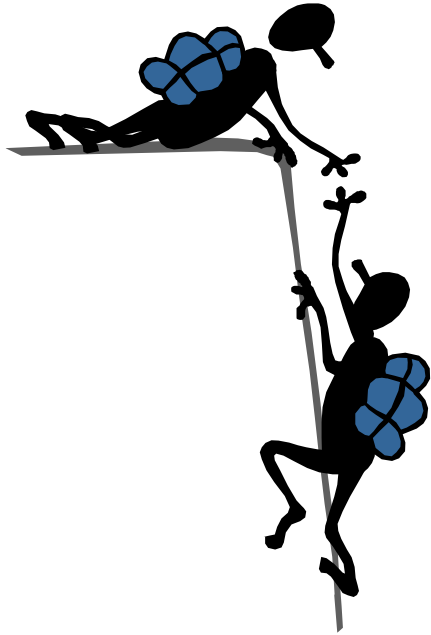
Latino= statewide



# WI Regional Enrollment Networks

- Groups of professionals to help coordinate unwinding
- Troubleshoot problems
- Share messaging
- Best practice strategies

Reach out to Covering Wisconsin to join a REN.



# Resources

# WI DHS State Unwinding Toolkits

<https://www.dhs.wisconsin.gov/covid-19/unwindingtoolkit.htm>

<https://www.dhs.wisconsin.gov/covid-19/forwardhealth-medicaid.htm>

State of WI Medicaid Renewal data on DHS website:

<https://www.dhs.wisconsin.gov/medicaid/renewal-data.htm>

# Resources

KFF <https://www.kff.org/medicaid/issue-brief/10-things-to-know-about-the-unwinding-of-the-medicare-continuous-enrollment-provision/>

CMS

<https://www.medicare.gov/resources-for-states/coronavirus-disease-2019-covid-19/unwinding-and-returning-regular-operations-after-covid-19/index.html>

# Resources

- Nationwide data from KFF:

<https://www.kff.org/report-section/medicaid-enrollment-and-unwinding-tracker-overview/>

- CMS letter to states

<https://www.medicaid.gov/sites/default/files/2023-08/state-ltr-ensuring-renewal-compliance.pdf>

Press Release from CMS (8/30/23)

• <https://www.cms.gov/newsroom/press-releases/cms-takes-action-protect-health-care-coverage-children-and-families>



# Resources—Ops Memos

- MAPP Operations Memo 20-12—suspension of work & premium requirements during PHE

<https://www.dhs.wisconsin.gov/dms/memos/ops/dms-ops-2020-12.pdf>

- MAPP Operations Memo 23-35—reinstatement of MAPP premiums & work requirements

<https://www.dhs.wisconsin.gov/dms/memos/ops/dms-ops-2023-35.pdf>

- Ending of Temporary Health Care Policies Related to COVID-19 (divestment) Operations Memo 23-08 dated March 17, 2023

<https://www.dhs.wisconsin.gov/dms/memos/ops/dms-ops-2023-08.pdf>

# Contact Medicare or Medicaid

## **Medicare-24/7**

- 1 (800) MEDICARE
- 1 (800) 633-4227
- TTY/TDD 1 (877) 486-2048

## **Medicaid**

- Medicaid member services

# Disclaimer

- WI DHS makes the official determinations on eligibility and continuous Medicaid, FoodShare, and SeniorCare benefits. This presentation is simply my understanding of the current policies.
- Information changes quickly and this information may become out of date without notice.

# Referrals

- Please do **NOT** refer potential clients or the general public to GWAAR or the presenter.
- Refer people with questions to their local Aging & Disability Resource Center or Income Maintenance Consortium.