Continuous Coverage Unwind: Update from HCPF

November 13, 2023

Rachel Reiter, HCPF Policy, Communication & Administration Office Director
Ralph Choate, Medicaid Operations Office Director

Thank You - SB 22-081 Funding: HCPF Outreach Tactics

- PSA Campaign
  - Radio & TV spots broadcast on 281 stations across CO
  - 47,750 spots aired from April - Sept 2023 (valued over $1.7mil)
  - PSAs focus on Updating Contact Information, Renewal Awareness & Transitions in Coverage
    - Seeing reductions in "whereabouts unknown" & sign ups for texting/e-coms!
- Printed materials for partners
  - Counties, homeless shelters, foodbanks, festivals, School Health Services
- Co-branded mailers to over-income households with transitional coverage information
  - Over 37,000 mailers sent from May- Oct 2023

Potential for 2024:
- Expand mailers to include procedural denials
- Dollar Store Campaign

September Renewal Data

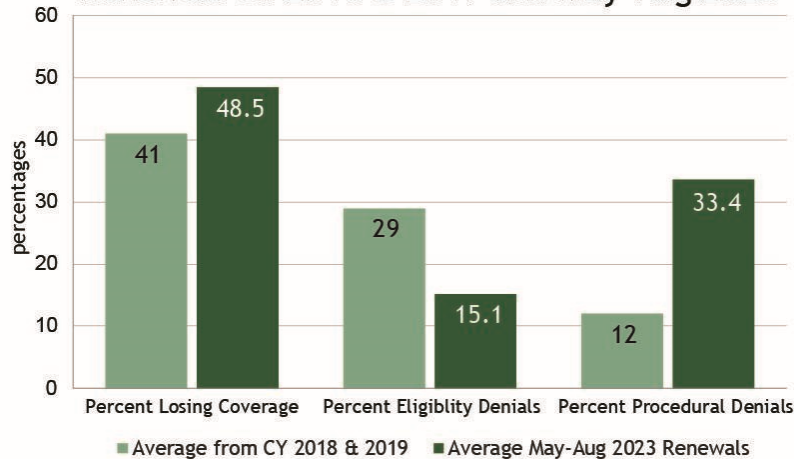Colorado implemented two projects that have impacted the September Unwind Data.

1) A 60-day extension for Long Term Care members
2) Ex parte temporary extension until a short-term fix was implemented mid-October 2023.

These two projects resulted in an **increase in pending renewals** and a **decrease in procedural terminations**. We expect our data to normalize in November.
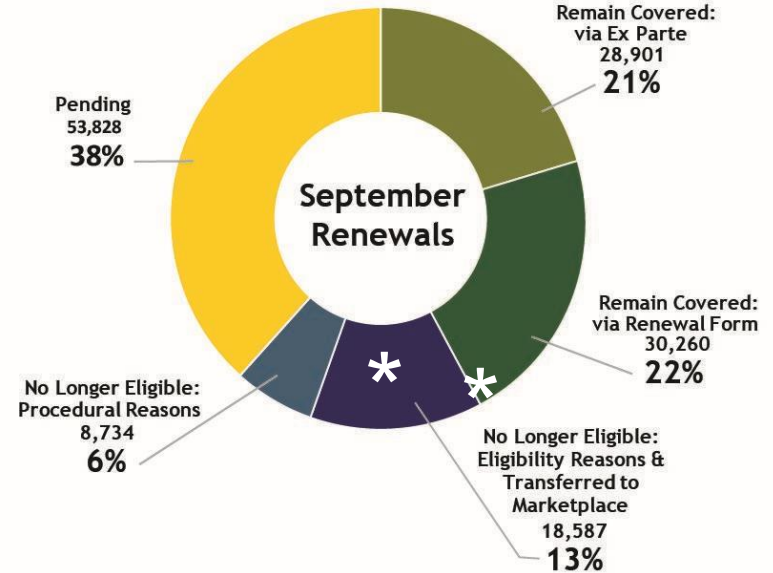
COLORADO
Department of Health Care
Policy & Financing

Historical Comparison

Renewals CY 2018 & 2019 and May-Aug 2023*

Bar chart showing:
- Percent Losing Coverage: Average from CY 2018 & 2019 = 41, Average May-Aug 2023 Renewals = 48.5
- Percent Eligiblity Denials: Average from CY 2018 & 2019 = 29, Average May-Aug 2023 Renewals = 15.1
- Percent Procedural Denials: Average from CY 2018 & 2019 = 12, Average May-Aug 2023 Renewals = 33.4

y-axis: percentages (0–60)

Legend: ■ Average from CY 2018 & 2019 ■ Average May-Aug 2023 Renewals

*September data not included

NOTE: Sept and Oct will have unusually high numbers of "pending" given system changes related to ex parte. Cohort data will normalize in November's cohort.

Donut chart — September Renewals:
- Pending 53,828 — 38%
- Remain Covered: via Ex Parte 28,901 — 21%
- Remain Covered: via Renewal Form 30,260 — 22%
- No Longer Eligible: Eligibility Reasons & Transferred to Marketplace 18,587 — 13% *
- No Longer Eligible: Procedural Reasons 8,734 — 6%

COLORADO
Department of Health Care
Policy & Financing

Based on pre-pandemic data, on average about half of those losing coverage become eligible for Medicaid again within two years.

# New LTC Outreach & Reinstatements

- Outreach during 60 day extension to LTC members
  - ➢ Go Live was 10/16/2023, with 20 contracted agents
  - ➢ Initial list included 1,406 members for outreach
    - ▪ 100% complete - outreach made to every member identified
    - ▪ 53% Voicemail - members remain on the list for follow up attempts
    - ▪ 10% Renewal Already Complete/25% Incorrect Number/11% Did Not Need Help/14% Escalated to County
- Ex parte reinstatements - expected to return approx 9-10K to coverage
  - ➢ special edition newsletter & FAQs posted, member noticing started
  - ➢ Process should be complete by Nov. 30

What we need to mitigate this open enrollment: C4H dip in Medicaid app processing performance

C4H: Medicaid Application Processing Timeliness
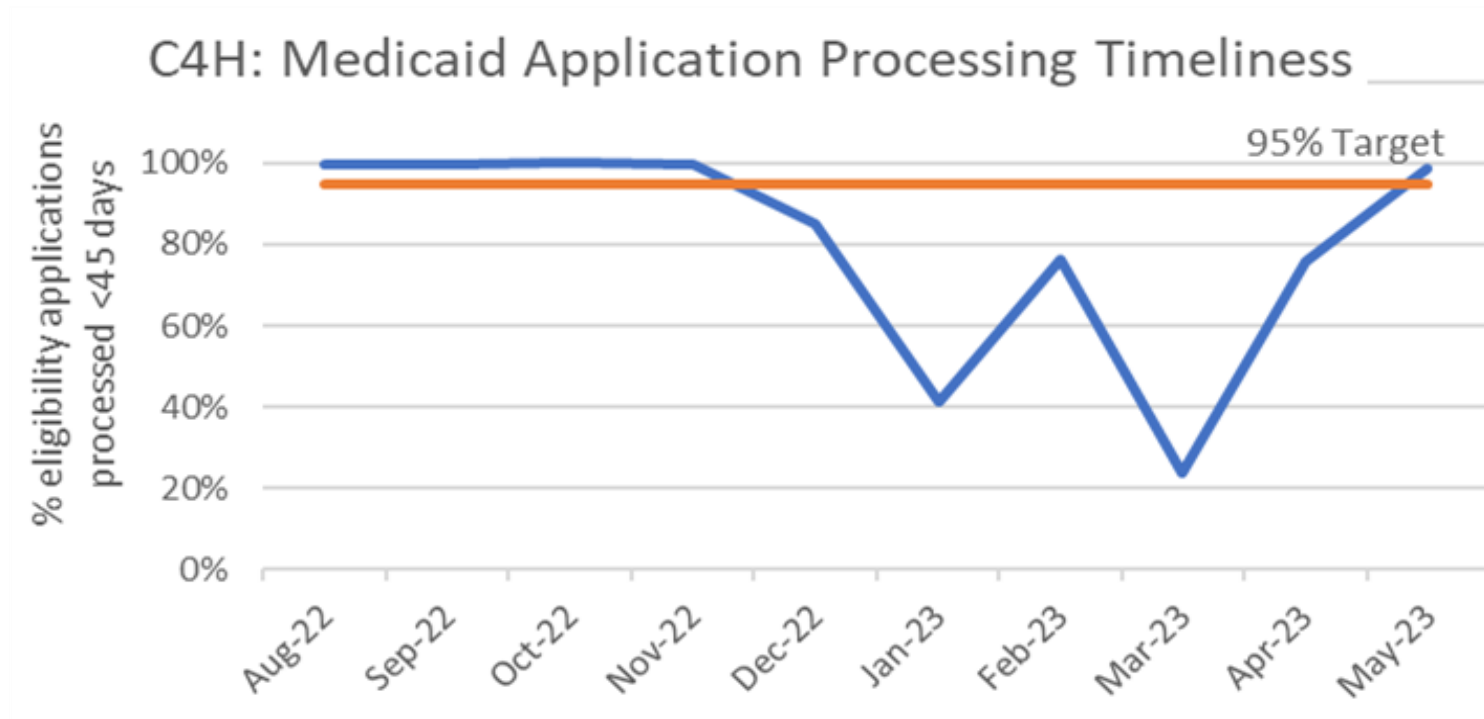
What we need to mitigate this open enrollment: C4H dip in app processing performance

Timeliness vs. Application Month - Thru October 2023
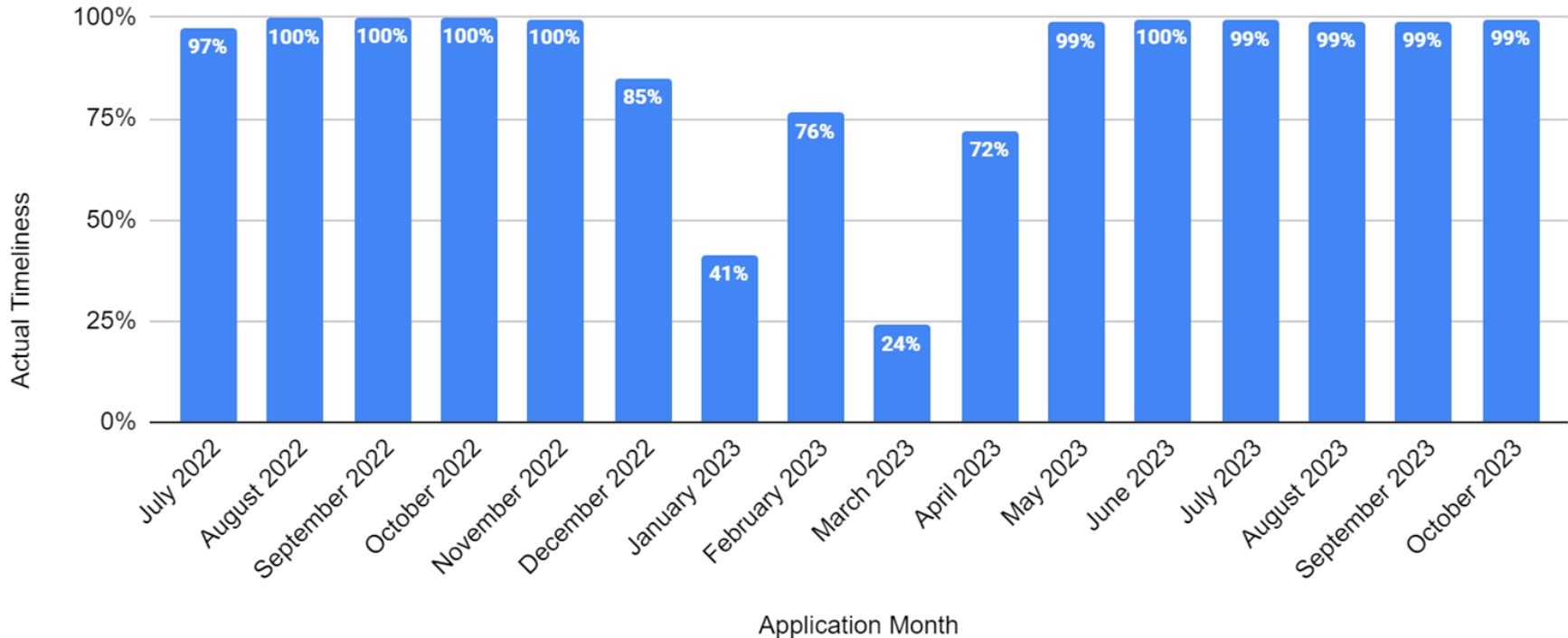
CBMS Programs: Example Metrics

- Monthly # apps received, authorized, pending
- Daily broken out by program
- Examples of additional monitoring
  - Medicaid member and provider call centers & county call centers & speed to answer
  - Member surveys
  - Complaints & escalations tracking

For New Applications: How long it takes to make a determination

In the past 30 days, 51% of applications had a determination made within 5 days (8/19-9/17).

	# Days it takes for a determination to be made								
	0 - 1	2 - 5	6 – 10	11 – 15	16 – 30	31 – 45	46 – 59	60 +	Total
Medical Assistance	23,468	3,620	7,421	3,171	6,137	3,357	827	682	48,683

- 48% of medical assistance applications had an eligibility determination made within 1 day

- 56% of medical assistance applications had an eligibility determination made within 5 days

- 97% of medical assistance applications had an eligibility determination made within 45 days

- Standard is that 95% of applications receive a determination within 45 days
  - 1,509 (3%) of applications took more than 45 days for an authorization
  - Of those 1,509, 199 (13%) were Non-MAGI
    - 8% of applications authorized were Non-MAGI
  - Of those 1,509, 50 (3%) were LTC and HCBS
    - 2% of all applications authorized were LTC and HCBS

Medicaid Members
Culture of Continuous Improvement

- Vendor partner transparency: member/provider service dashboards, including Medical Assistance Sites, RAEs, CMAs, counties, etc.
- Contractual language to ensure this member/provider service shared goal is memorialized in all vendor contracts
- For Eligibility, continue to improve member satisfaction in application and renewal processing (processing automation, CBMS investments, correspondence improvements, PEAK investments, JAI implementation, call center performance, app. turnaround time, etc)

COLORADO
Department of Health Care
Policy & Financing

What do we believe that means for C4 partners?

- Invites a focus on consistent service experience, across all MA servicers
  - ➢ Including during open and/or special enrollment periods
- Timely entering of applications into CBMS to ensure optics into potential service issues
- Access to the Overflow Processing Center to assist
- Future Data Insights/Opportunity: Member access to coverage measured in 1-5 days to approval, not just benchmarked at 45
- Ongoing discussions & collaboration

COLORADO
Department of Health Care
Policy & Financing