

ClaimAid

Indiana Medicaid after the Public Health
Emergency – A Closer Look



Unwinding the Medicaid Provisions of the Public Health Emergency

Expiration of the Public Health Emergency

The Consolidated Appropriations Act of 2023 separated the **Medicaid provisions** included in FFCRA from the federal declaration of Public Health Emergency.



Unwinding the Medicaid Provisions of the Public Health Emergency

PHE Provisions and Impact on Medicaid Enrollment

The bulk of the increase in Medicaid enrollment was seen in adult coverage. Adult enrollment increased by 38.4% while the rate of increase of enrollment for children was 17.5%.



The **Family First
Coronavirus Response
Act** (FFCRA)

Unwinding the Medicaid Provisions of the Public Health Emergency

Response to COVID-19 Pandemic

The Families First Coronavirus Response Act, passed into law March 18, 2020.

- Medicaid recipients continuously enrolled.
- Cost sharing provisions for members were suspended.



The **Family First
Coronavirus Response
Act** (FFCRA)

Important Dates

April 2023

- Continuous Enrollment Ends
 - Redeterminations
 - Patient Verification Request

July 2023

- Cost-Sharing Begins
 - HIP
 - Fast Track
 - POWER Account
 - MED Works
 - Premiums for Disabled individuals 150-350% FPL.
 - Hoosier Healthwise
 - Package C Premiums, 158-250% FPL Children.

Unwinding the Medicaid Provisions of the Public Health Emergency

IHCP March 2020

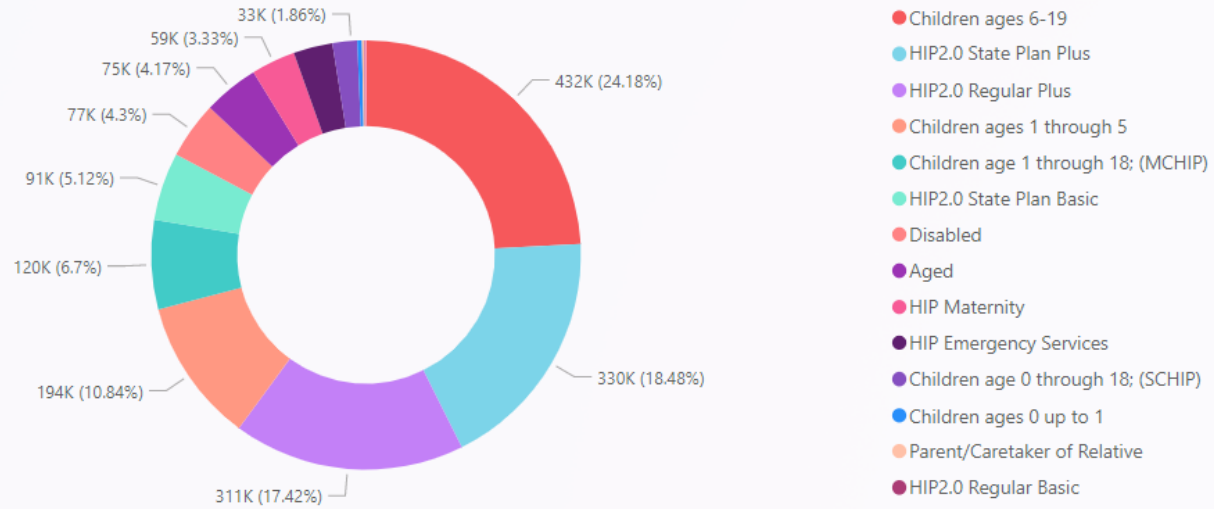
- Total = 1,474,664
 - HHW – 607,463
 - HCC – 91,057
 - HIP – 452,603
 - FFS – 323,603

IHCP January 2023

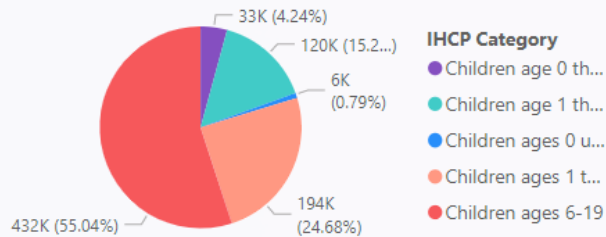
- Total = 2,185,960
 - HHW – 885,271
 - HCC – 102,028
 - HIP – 846,490
 - FFS – 352,171

Unwinding the Medicaid Provisions of the Public Health Emergency

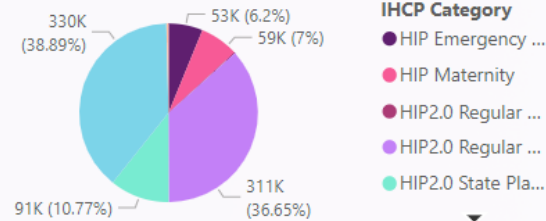
Sum of Total Enrollment by Category by IHCP Category



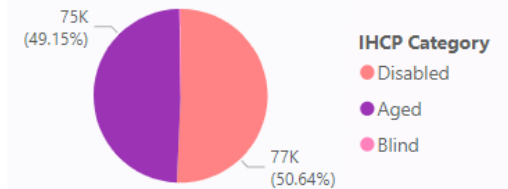
Sum of Total Enrollment by Category by IHCP Category



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Sum of Total Enrollment by Category by IHCP Category



Topics

Marketplace Updates

CMS and Indiana

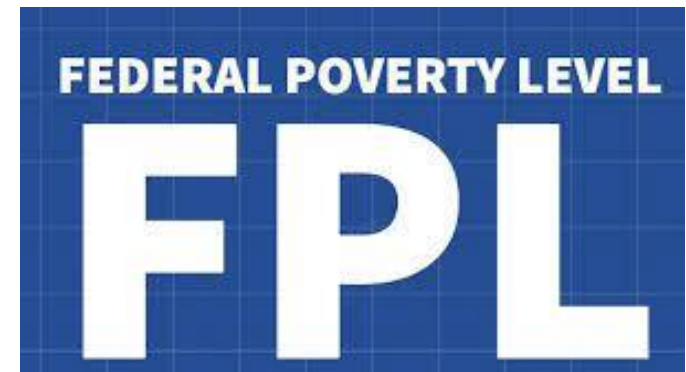
Unwinding the PHE

**How to Prepare for the Return to
Normal Processing**

Marketplace Updates

Expanded Marketplace Enrollment Periods

- Low Income Special Enrollment Period (SEP) created in 2021 as part of the American Rescue Plan.
- SEP allowing patients with income up to 150% FPL, to switch to a Silver tier plan or to a different plan within the Silver tier multiple times per year.



Marketplace Updates

Unwinding Special Enrollment Period

The end of the Continuous Enrollment provisions of the Public Health Emergency (PHE) set for March 31, 2023, creates a SEP.



The screenshot shows the HealthCare.gov website with a quiz titled "See if you qualify for a Special Enrollment Period (SEP)". The quiz asks: "Did you or anyone in your household lose qualifying health coverage more than 60 days ago but since January 1, 2020 OR do you expect anyone in your household to lose coverage in the next 60 days?". Below the question are two buttons: "YES" and "NO". The second question is: "Did any of the following apply to you or anyone in your household in the past 60 days?". Under this question, it lists "Changes in household size:" followed by two buttons: "YES" and "NO", and the text "Got married".

Marketplace Updates

Expanded Marketplace Enrollment Periods

Applicants must still meet the regular criteria for the Advanced Premium Tax Credits and Cost Sharing Reductions.

The screenshot shows the HealthCare.gov website interface. At the top left is the logo "HealthCare.gov" and at the top right are links for "Español" and "Log in". The main heading reads "See if you qualify for a Special Enrollment Period (SEP)". Below this is a dark blue box containing a quiz question: "Did you or anyone in your household lose qualifying health coverage more than 60 days ago but since January 1, 2020 OR do you expect anyone in your household to lose coverage in the next 60 days?". There are two buttons, "YES" and "NO", with the "NO" button selected. Below the question is another question: "Did any of the following apply to you or anyone in your household in the past 60 days?". Underneath this is the text "Changes in household size:" followed by "YES" and "NO" buttons, with "Got married" listed as an option.

Marketplace Updates

Eased Restrictions

For the 2023 coverage year, health plans can no longer refuse to renew coverage for enrollees who have fallen behind on their premium or whose coverage has lapsed due to nonpayment.

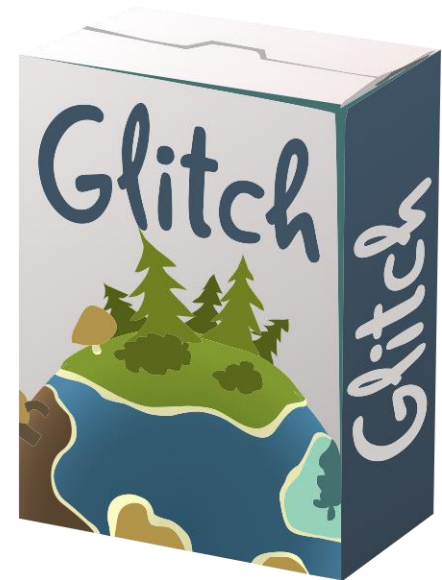


Marketplace Updates

Fixing the “Family Glitch”

Now the affordability of health coverage is based on the **employee only cost for the employee** and affordability for **family coverage will be based on the cost of the family plan.**

6 million people now have access to Marketplace affordability features!



CMS and Indiana

Unwinding the PHE

CMS and Unwinding the PHE

CMS Guidelines

States were given **14 months** to review the eligibility of those enrolled in state coverage.



CMS and Unwinding the PHE

CMS Guidelines

States must begin renewal activities with an ex parte review. If the member is found to be eligible based on this information, coverage is to be granted for another 12 months.



Indiana and Unwinding the PHE

Redetermination Process

Indiana FSSA has identified that approximately 75% of those enrolled in Indiana Health Coverage Programs (IHCP) have continued to meet all eligibility requirements during the PHE. For these members, eligibility can be approved for an additional 12 months.



Indiana and Unwinding the PHE

Annual Redetermination

When FSSA cannot verify continued eligibility through the ex parte process, the member will need to complete the redetermination verification.

These are the members who are at risk of losing IHCP coverage.



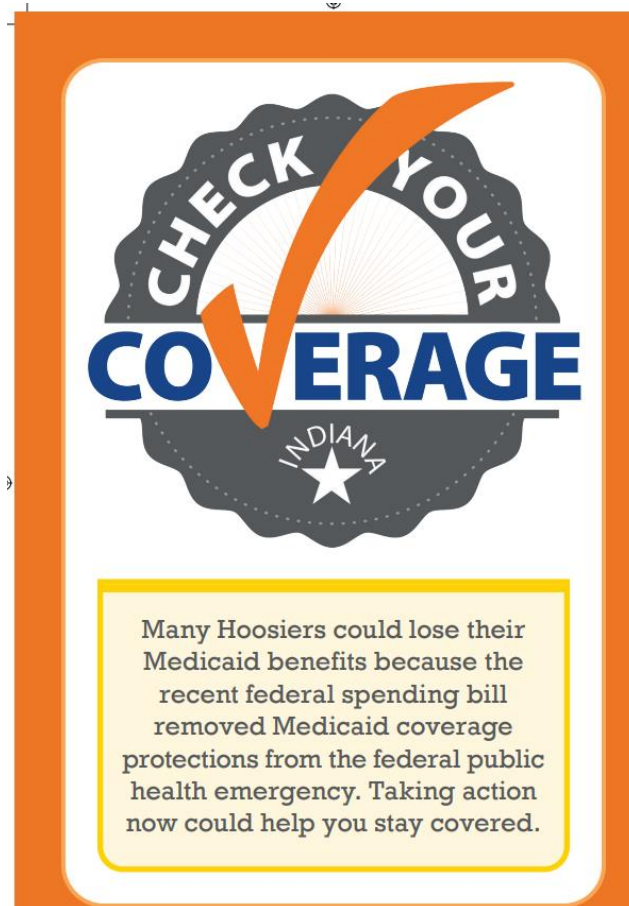
Indiana and Unwinding the PHE

Communication with Members

FSSA began the process of reaching out to IHCP members early this year by sending out postcards.

Information has also been made public on the [Indiana Medicaid for Members](#) website.

It is anticipated that the first disenrollments will be effective 4/30/2023.



Indiana and Unwinding the PHE

Impact on Effective Dates for New Applications

In addition to reviewing eligibility for those already enrolled in IHCP coverage, FSSA is also returning to normal **application processing** procedures.

Under Public Health Emergency rules, the effective date of IHCP coverage is dependent on the date of application.



Indiana and Unwinding the PHE

Return to Cost Sharing

FSSA has announced that the return to normal cost sharing requirements will begin July 2023. Members will begin to be notified of this change June 2023.



Indiana and Unwinding the PHE

Options for those losing IHCP coverage

Members who face losing IHCP coverage will have options. In addition to enrolling in employer-based coverage, those who qualify for Marketplace coverage will have expanded enrollment windows to access this coverage.



Indiana and Unwinding the PHE

Options for those losing IHCP coverage

HIP Workforce Bridge

HIP Workforce Bridge program provides outgoing HIP members an account containing up to \$1000 for members to use for healthcare expenses related to commercial insurance.



Indiana and Unwinding the PHE



HIP Workforce Bridge

Allowable expenses include:

- Premiums
- Deductibles
- Copayments
- Coinsurance
- Premiums and cost sharing for Marketplace plans
- HIP covered services during any waiting period for commercial coverage to start such as
 - Prescriptions
 - Office visits
 - Urgent care

Indiana and Unwinding the PHE

HIP Workforce Bridge

- ❑ Outgoing HIP members will start the Workforce Bridge program in conditional status. Members will be sent a letter containing instructions on how they may “opt-in” to the program.
- ❑ Members will have 45 days to “opt-in”.
- ❑ There are a limited number of Workforce Bridge slots each fiscal year.
- ❑ The account will remain active for the member for 12 months or until the funds in the account have been exhausted.
- ❑ Enrollment in the Workforce Bridge program will end if the member becomes eligible for any other IHCP category.



How to Prepare for the Return to Normal Processing

How to Prepare for the Return to Normal Processing

What we anticipate will happen

FSSA estimates that as many as 500,000 Hoosiers are at risk of losing the Indiana Health coverage, they have come to rely on for nearly 3 years.

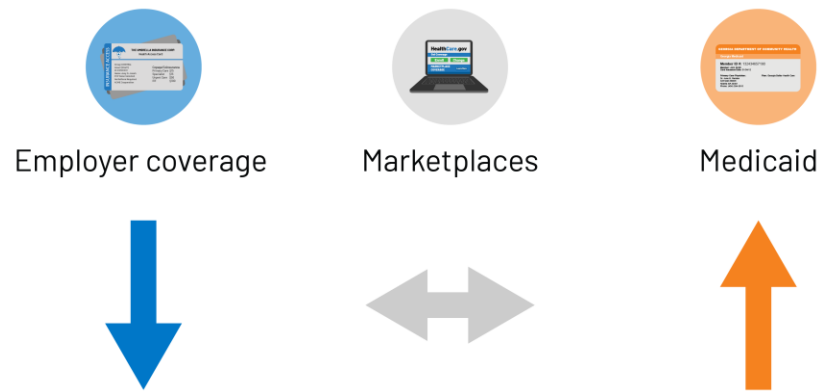


How to Prepare for the Return to Normal Processing

What we anticipate will happen

With the continuous enrollment period, many who may have qualified for employer coverage did not choose to enroll in that coverage because the comprehensive free IHCP coverage was available.

How Has The Pandemic Affected Health Coverage in the U.S.?



How to Prepare for the Return to Normal Processing

What we anticipate will happen

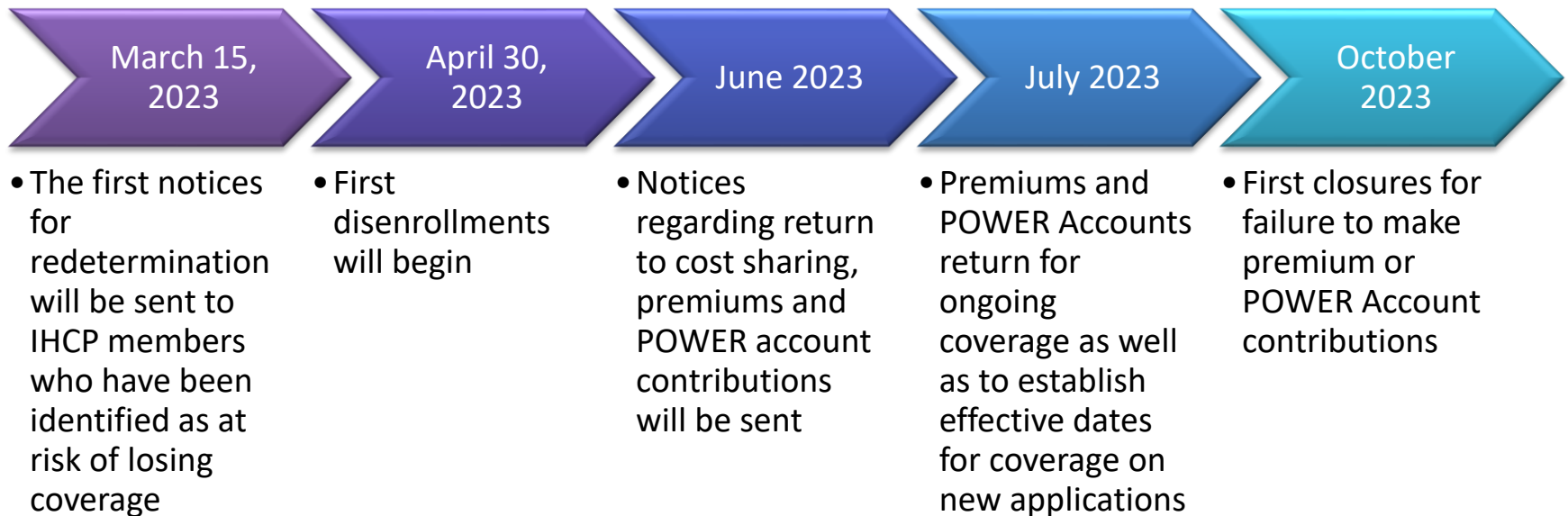
For those that will still qualify for IHCP programs, the return to cost sharing may prove to be an unwelcome burden for members who have not experienced this for nearly 3 years.



How to Prepare for the Return to Normal Processing

What we anticipate will happen

Key dates in the timeline for these changes are expected to be



How to Prepare for the Return to Normal Processing

Educating the Patient

10%



20%



80%



Studies show that people remember 10% of what they hear, 20% of what they read and 80% of what they see.

How to Prepare for the Return to Normal Processing

Educating the Patient

IHCP Cost Sharing

- Copays will start to be required
- Premiums or POWER Account contributions may be needed to keep IHCP coverage

Loss of Coverage

- Special Enrollment for employer-based coverage may have a limited time to enroll
- Marketplace coverage will have extended Special Enrollment Periods

Unexpected Costs of Commercial Coverage

- Higher premiums
- Deductibles
- Copays and Coinsurance

How to Prepare for the Return to Normal Processing

Assisting with HIP Contributions and Marketplace Premiums

While not all organizations can assist with these payments for everyone, establishing criteria to assist patients with recognized need will protect those most vulnerable to losing health coverage as well as provide financial protection for healthcare organizations.

Thank You!

Questions!