



Virginia Medicaid Updates: House Appropriations Committee October 16, 2023

Cheryl Roberts, JD, DMAS Director Sarah Hatton, Deputy of Administration



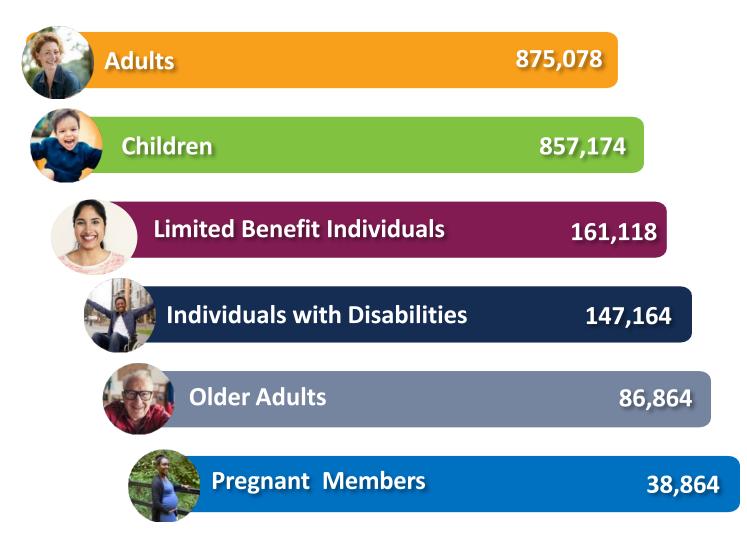
Agenda

- ■Agency Background and Updates
- Medicaid Unwinding Briefing
- □ Reimbursing Legally Responsible Individuals (LRIs)



Who Do We Cover?

Medicaid plays a critical role in the lives of more than 2.1 million Virginians





Impact of "Unwinding"



In March 2023, Virginia began Medicaid eligibility redeterminations for over 2.1 million members. **October 2023** – we have completed 50% of the redeterminations.



Preparations, execution and ongoing modifications for this work are a joint HHR effort in close collaboration with the Department of Social Services (DSS) and Local Department of Social Services (LDSS). The work is closely monitored by CMS.



DMAS expects members to transition off the Medicaid program due to no longer meeting program requirements.



If Medicaid members need information or assistance on renewal – call Cover Virginia (833-5CALLVA)



Medicaid Enrollment in the Commonwealth

The end of the continuous coverage requirement in the Commonwealth presents the single largest health coverage event since the first open enrollment of the Affordable Care Act (ACA). This event is also known as unwinding.



Historically, the
Commonwealth has
experienced churn,
which is enrollees who
reapply and re-gain
coverage shortly after
being terminated.



From March 2020
through March 1, 2023,
the Commonwealth
experienced an
increase of over
630,000 enrollees (a
41% increase in
enrollment growth).



Enrollment growth has been the fastest among non-elderly, non-disabled adults, and slower among children and aged, blind, and disabled (ABD) eligibility groups.



Post continuous
coverage, roughly 14% of
the state's total
Medicaid enrollees may
lose coverage, and up to
4% of members may lose
and regain coverage
within 1-6 months of
closure. The national
average for loss is
around 20%.



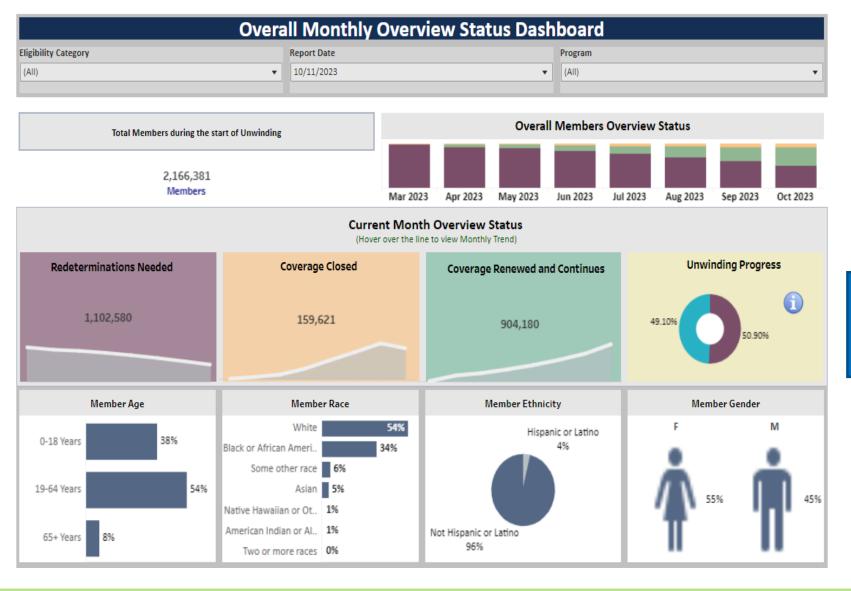
Ongoing Unwinding Activities

Preparation began for eventual unwinding of the continuous coverage requirements during the summer of 2020. The system improvements, communication and outreach, and stakeholder collaboration planning continued for almost three years.

- Health and Human Resources Secretary John Littel convened an unwinding taskforce in January of 2022. The taskforce includes
 representatives from the Department of Medical Assistance Services, the Department of Social Services, the Department of
 Planning and Budget, and staff from the House Appropriations and Senate Finance and Appropriations Committees. The group
 meets monthly to discuss progress, hear updates and challenges, and make recommendations.
- DMAS convened an Ambassador Workgroup in March 2023 which consists of a variety of stakeholders to include providers, free clinics, member advocates, navigator groups, and other stage agencies such as VDSS, DARS, and DBHDS. The Ambassador Workgroup continues to meet regularly to receive feedback and insight from those who encounter Medicaid members.
- Member outreach continues through all modalities for both individuals enrolled in a managed care plan and those enrolled in fee
 for service. Individuals are contacted through all modalities applicable to include phone, text, email, and mail. Messages begin
 two months prior to the individual's renewal due date.
- Direct calls are made by the Cover Virginia vendor to certain high-risk populations enrolled in fee for service to offer assistance
 with completing the renewal process. This group includes those receiving community-based care or in nursing facilities,
 individuals who are blind or vision impaired identified through the Department of Blind and Visually Impaired, and individuals who
 have attempted to have prescriptions for major health conditions refilled whose claims were denied.
 - Direct calls have resulted in a 40% success rate of individuals completing the redetermination process.
- Ongoing collaboration with the Virginia's Insurance Marketplace (VIM). Through the end of 2023, all individuals found ineligible for ongoing Medicaid coverage will continue to be referred to the Federal Marketplace. Beginning January 1st for plan year 2024, all individuals determined ineligible for ongoing coverage will be automatically referred to Virginia's new State based Exchange

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Unwinding Data



As of 10/11/2023 – 159,621 members were closed, and 904,180 members were renewed with ongoing coverage.

Members
Determined as of 10/11/2023*

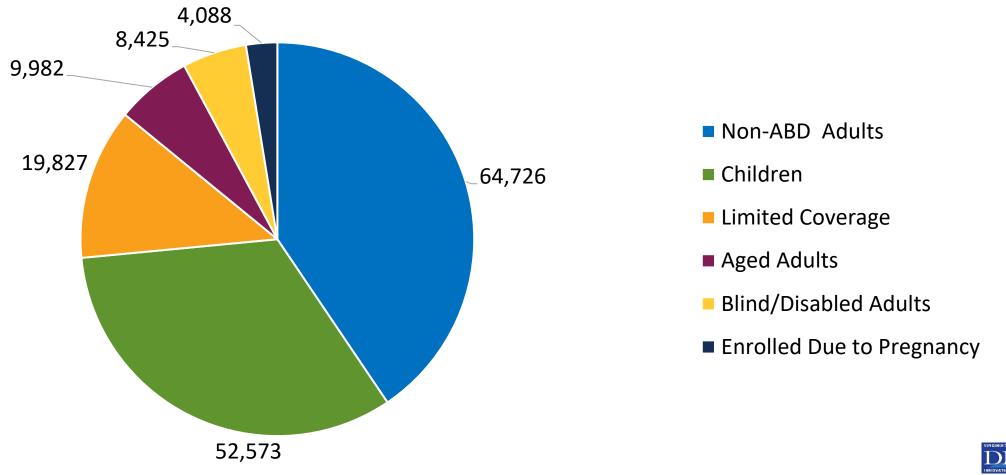
Completed by Member

100,000

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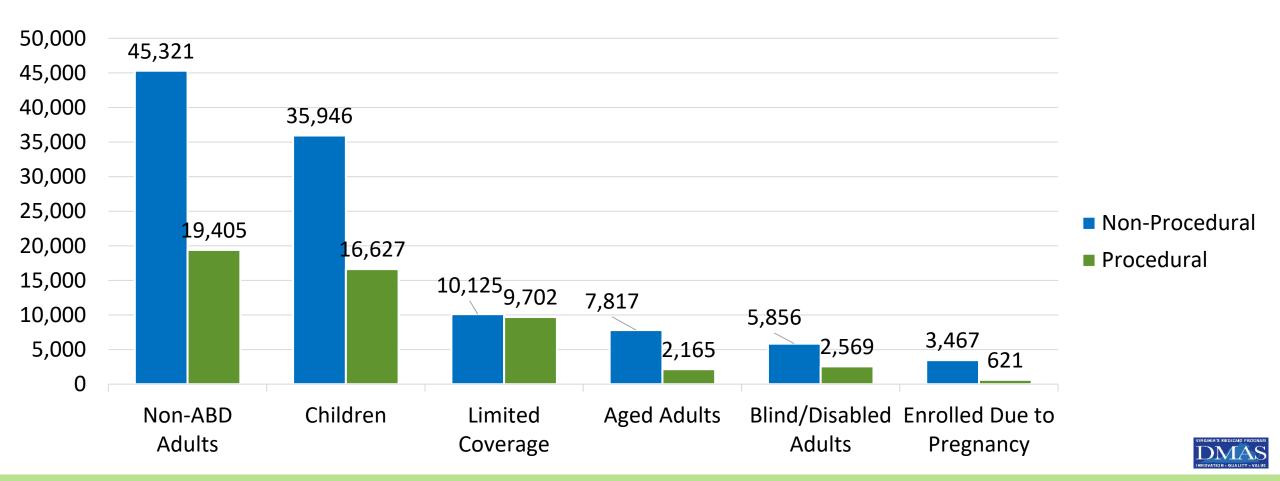
Top Closures by Eligibility Grouping: Closures through 10/11/2023

The highest closures are occurring among non-Aged, Blind, or Disabled (ABD) adults that are between the ages of 19-64, followed by children, and then those in limited coverage groups to include Medicare Savings Plans (MSPs), Plan First, Incarcerated Coverage, and those enrolled in Emergency Medicaid.



Procedural vs. Non-Procedural Closures by Eligibility Grouping: Closures through 10/11/2023

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Information and Resources

- Member and Stakeholder Resources and Material can be found on the Cover Virginia, Cubre Virginia, and DMAS
 websites. The Return to Normal Enrollment page on each site contains toolkits, information, and resources for members,
 providers, and other stakeholders. to learn more about Virginia's preparation and important updates.
 - DMAS Website: https://www.dmas.virginia.gov/covid-19-response/
 - Cover Virginia Website: https://coverva.dmas.virginia.gov/return-to-normal-enrollment/
 - Cubre Virginia Website: https://cubrevirginia.dmas.virginia.gov/return-to-normal-enrollment/
- **Virginia's Unwinding Plan** can be found on the DMAS site on the COVID-19 page, describing the collaboration with internal and external stakeholders to cover all areas in preparation to return to normal enrollment.
 - The plan can be found at: https://www.dmas.virginia.gov/media/5948/dmas-unwinding-operational-plan.pdf
- The Renewal Status Dashboard can be found on the DMAS site under the Data tab that tracks the progress toward redetermining Virginia's Medicaid population on a monthly basis.
 - The dashboard can be found at https://www.dmas.virginia.gov/data/return-to-normal-enrollment/eligibility-redetermination-tracker/
- Legislator Resources and Information can be found on the DMAS website at: https://www.dmas.virginia.gov/about-us/legislative-office-resources/
 - New dashboards are available which provide enrollment data by Virginia State House and Senate districts as well as Congressional districts.

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Thank you to all partners across the Commonwealth who are working to support the efforts to ensure a smooth transition back to normal processing.































Reimbursing Legally Responsible Individuals (LRIs)

- In response to the needs to the parents, DMAS requested and receive federal approval.
- The original pandemic-related flexibility to allow payment to LRIs expires on November 10, 2023. During the pandemic, approximately 1,600 families took advantage of this flexibility; there are 24,000 individuals using consumer direction overall.
- Safeguards were developed to meet Federal and State requirements while considering the needs of the Medicaid members and the integrity of the program. The safeguards were developed in concert with stakeholders, advocates, and feedback received from public comment.
- DMAS communicated with providers, members, and families beginning September 9, 2023, regarding the upcoming changes. Training was provided for providers during the week of September 25th and for members/families during the week of October 2nd

