



# Medicaid Check-In 2023

Maryland Department of Health, Office of Health Care Financing



# Overview

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- The Families First Coronavirus Response Act (FFCRA) provided an enhanced Federal Medical Assistance Percentage (FMAP) of 6.2% to states that met Maintenance of Eligibility Requirements (MoE) during the PHE. FFCRA MoE provisions required states to extend continuous eligibility (CE) to all participants through the end of the PHE.
- **These requirements have now changed. The PHE and the CE requirement that was part of the MoE are no longer linked.**
- The [Consolidated Appropriations Act, 2023](#) became law on December 29, 2022. The legislation amended certain provisions of FFCRA and **decouples** the CE requirement from the PHE.
- CE requirements that were part of the MoE will now sunset on **April 1, 2023**, at which time states may begin unwinding procedures.
  - Maryland will continue standard redetermination mailings in April 2023, with the first disenrollments for participants who no longer qualify for coverage occurring at the end of May 2023.
- President Biden announced that the national PHE will end on May 11, 2023. Maryland's disaster SPAs, 1135 waivers, and Appendix K authorities remain tied to the PHE.

# Unwinding Redeterminations Overview

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- Maryland Medical Assistance enrollment grew substantially during the national public health emergency (PHE):
  - During the COVID-19 public health emergency, Marylanders who were enrolled in Medicaid continued to be covered, even if they were no longer eligible.
    - 1,415,631 participants in February 2020 up to 1,773,143 participants in February 2023
  - Starting in April 2023, Maryland will begin making Medicaid eligibility reviews again. Not everyone will be up for renewal at the same time. These renewals will take place over 12 months.
- Medicaid Check-In Campaign: Statewide outreach and communication strategy, March 2023-April 2024
  - Key partners: MDH, Managed Care Organizations (MCOs), Maryland Health Benefit Exchange (MHBE), Maryland Department of Human Services (DHS), and Chesapeake Regional Information System for our Patients (CRISP), providers, grassroots organization.

# Who does this impact?

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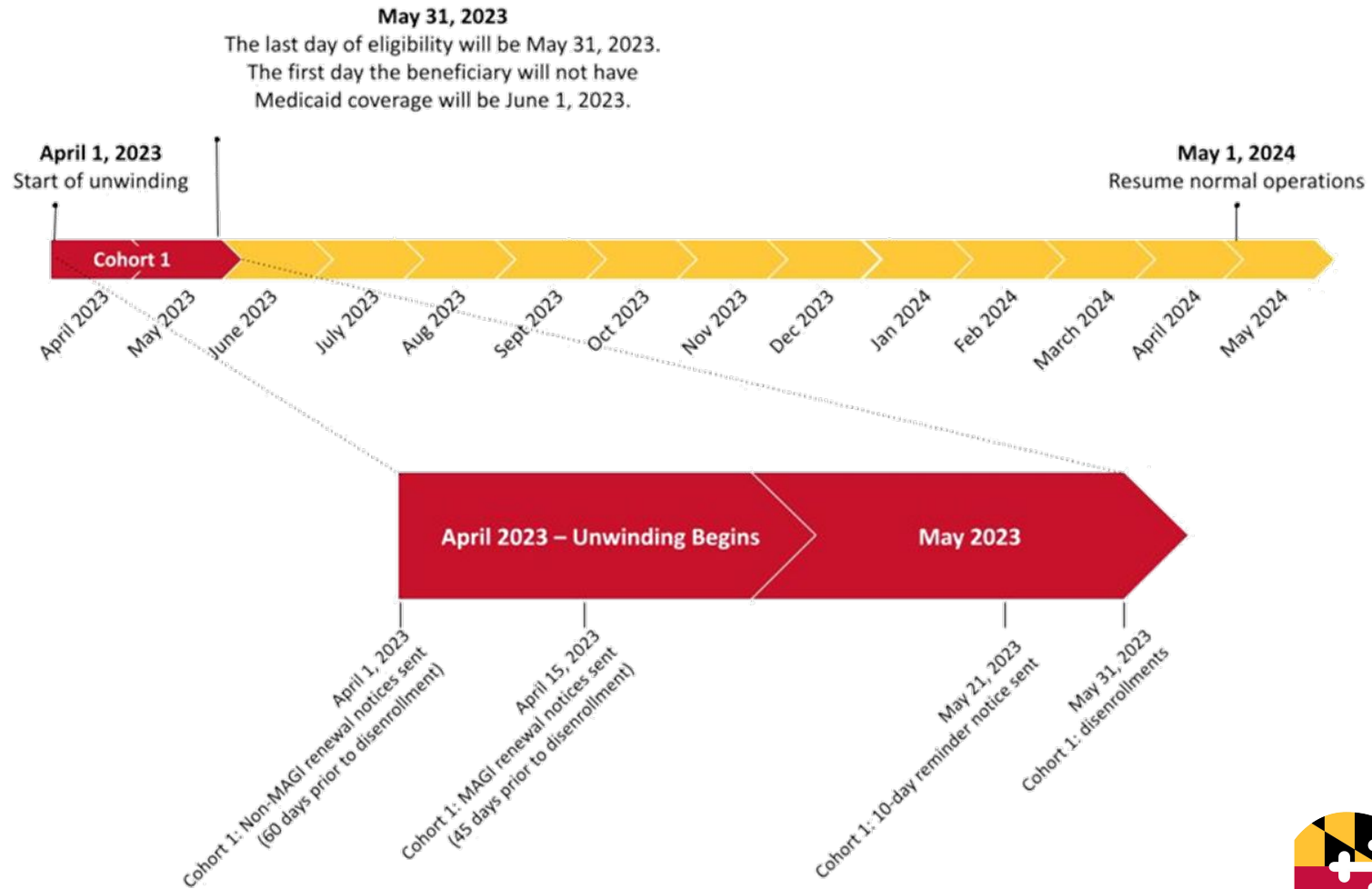
- Nearly all enrollees will have their coverage renewed in the next 12 months, including:
  - Participants who get their Medicaid/MCHP coverage through Maryland Health Connection;
  - Participants who qualify on the basis of being aged, blind, or disabled, or who are enrolled in a Home- and Community-Based Services Program and apply using MyMDThink;
  - Full dual eligibles enrolled in Medical Assistance/Medicare;
  - Partial dual eligibles, including those enrolled in the Qualified Medicare Beneficiary (QMB) and the Specified Low-Income Medicare Beneficiary (SLMB) programs.
- Note: The Supplemental Security Income (SSI) population is exempt and will not be following the redetermination process.

# Checking Redetermination Dates

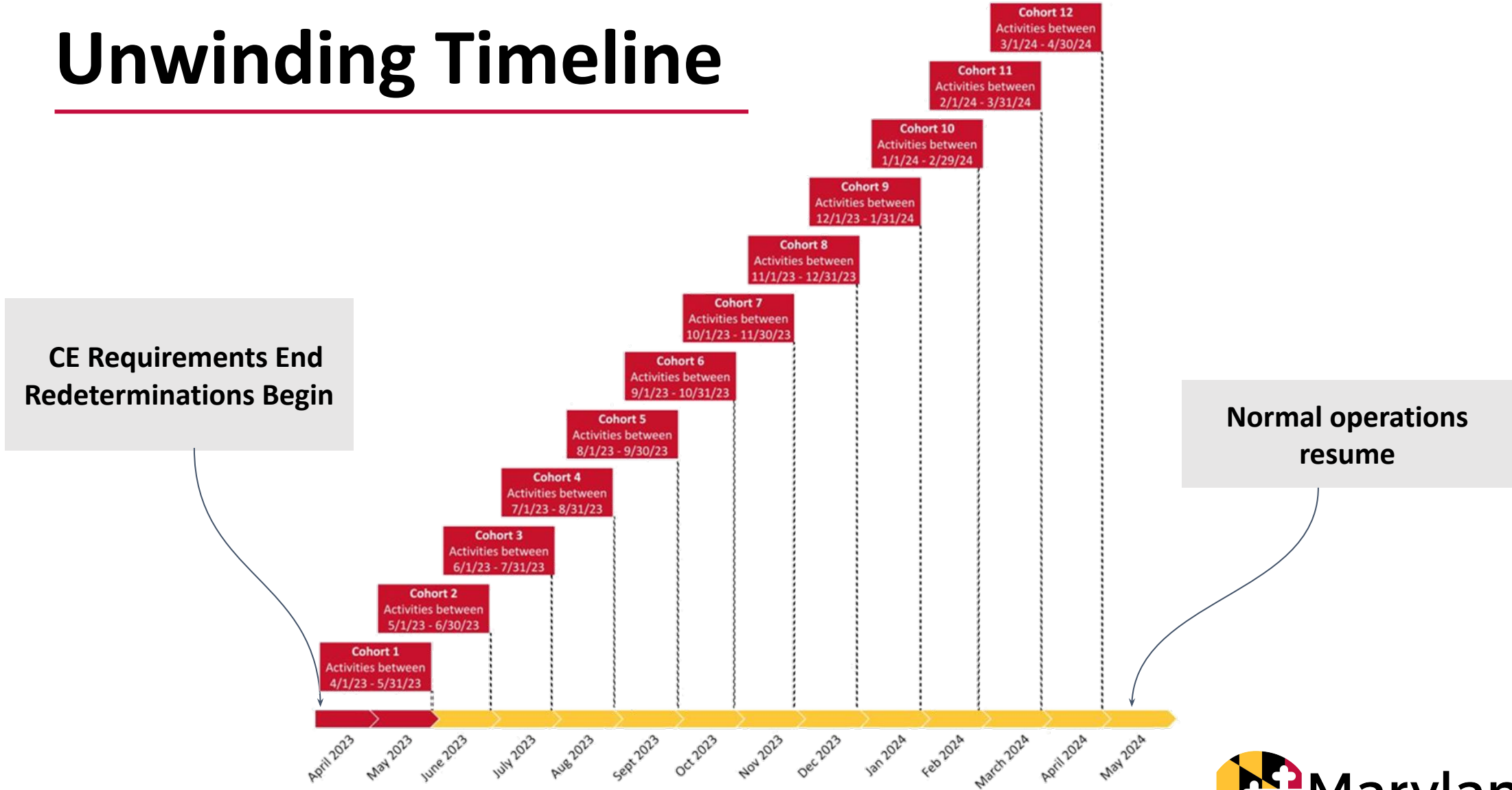
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- Eligibility Verification System ([EVS](#))
  - Updates underway to incorporate participant redetermination date;
  - Information can either be access online ([www.emdhealthchoice.org](http://www.emdhealthchoice.org)) or by phone (1-866-710-1447).
- MDH/CRISP partnership to provide redetermination information participating CRISP providers via a monthly managed file transfer (MFT) via CRISP. The file will include information for the current month + the next three cohorts at a given time. Tentative timelines:
  - Currently in a beta test phase with select FQHCs
  - End of May: expansion to all interested FQHCs
  - End of June: expansion to all interested CRISP participants
- Additional information will be included on the MDH Medicaid Check-In [Provider Page](#) once available.

# Zoomed In Timeline



# Unwinding Timeline



# Post-Redetermination: *MCO Outreach and Reconsideration Period*

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- An individual may be disenrolled from Medicaid coverage for failure to complete their redetermination.
  - MCOs will conduct targeted outreach to such individuals for 120 days following disenrollment.
  - If, during this time, an individual comes back into the system, and is found eligible for coverage, they will be re-enrolled automatically in the MCO plan they were last enrolled in. This coverage will begin 10 days from the date of the eligibility decision.
  - Any services rendered during the period after disenrollment and prior to re-enrollment in an MCO plan are eligible for fee-for-service reimbursement.
- Note: Maryland Health Connection (MHC) is implementing “easy enrollment” into qualified health plans (QHPs) for individuals who lose Medicaid coverage. Individuals will receive information on how to opt-in to QHP coverage.
- The 120 day reconsideration period is also available for non-MAGI participants.



# Statewide Medicaid Check-In Campaign

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- **General Timeline:**

- Winter 2022-January 2023: Focus Groups to develop Medicaid Check-In Campaign themes and creative approach based on feedback from Medicaid participants representing a variety of ages, race/ethnicities, genders, and geographic distribution
- March 2023: Pre-launch Campaign
- April 12, 2023-April 30, 2024: Launch Campaign

- **Key Objectives:**

- **Encourage Medicaid participants to update their information**
  - **Generate awareness of the redetermination process statewide using an integrated mix of vehicles that reflect the audience's media preferences**
- The campaign will be presented in English and Spanish with statewide distribution plans allocated in accordance with enrollment. Hispanic media will also be leveraged to reach primarily Spanish-language portions of the audience.



# Medicaid Check-In, Launch Campaign

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- A 12-month integrated media plan aimed at encouraging enrollees to keep their contact information current and educating them on the process for renewing.
- Campaign strategies:
  - Paid Search;
  - Paid Social Media (Facebook and Instagram);
  - Digital Media (display banners, streaming TV/radio, apps);
  - TV;
  - Radio;
  - Outdoor of Home (OOH) – Outdoor boards and transit advertising;
  - Location-based media;
  - Prominent display of campaign information on MDH, MBHE, and DHS websites and dissemination of information through social media, public meetings and webinars, and other venues;
  - Providers serving the Medicaid population will be engaged through deployment of a dedicated MDH web page, provider toolkit, webinars, and other resources;
  - Other direct outreach strategies alongside the Medicaid Check-In Campaign to reach Medicaid participants.

# Coordination with DHS for Fee-for-Service Participants

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- DHS Local Departments of Social Services resumed in-office presence in August 2021.
  - Assistance to walk-in customers is available.
  - Age, Blind and Disabled Redeterminations may also be submitted via the myMDTHINK Consumer Portal at <https://mymdthink.maryland.gov/home/#/>.
- DHS has already resumed redeterminations, similar to the process implemented in MHBE.
- The agency is also hiring additional staff to support eligibility determination activities and outreach on Medicaid and associated programs.
- DHS is partnering with MDH to co-brand on marketing materials under development with the communications firm, GKV.
- Protocols in place to insure warm handoffs between systems.
  - Call centers (DHS, MDH, MHBE) will be prepared to redirect individuals as appropriate to ensure they can reapply for coverage through the appropriate application platform.
  - Information will also be available to consumers on all three websites.

# How Can I Help?

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Get the word out to participants! The Medicaid Check-In [Provider Toolkit](#) has materials for you to use - you can...

- Make sure your case managers know about the upcoming changes and how they can assist participants;
- Alert participants and talk about what is going to happen;
- Post a Medicaid Check-In flyer in your clinic at the front desk and in each examination room;
- Post on social media directed to participants;
- Share the Participant [Information](#) website link with participants;
- Send an email to participants - it could include information about the Medicaid Check-In or an attachment/picture of one of the flyers;
- Highlight the Medicaid Check-In in participant or stakeholder newsletters;
- Let others you work with and stakeholders know about the Medicaid Check-In.

*Be on the lookout: Medicaid recently sent a memo with important information for participants*

# myMDTHINK

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- myMDTHINK is the online portal waiver participants use to apply for Medicaid/waiver programs.
- Not all participants have a myMDTHINK account set up.
- Having a myMDTHINK account is beneficial because all mailed participant notices will also be emailed to participants and appear in their portal.
- DHS has a “How to Guide” as well as a [video](#) to assist participants in creating a new account.
  - The “How to Guide” will be added to the MDH participant [webpage](#).

# Additional Resources

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Check out these webpages for more information and additional resources to get the word out to Medicaid participants:

- Campaign Landing Page: <https://www.marylandhealthconnection.gov/checkin/>
- Participant Information: <https://health.maryland.gov/mmcp/Pages/MedicaidCheckIn-participants.aspx>
  - Also will include the myMDTHINK “How to Guide”
- Provider Toolkit Information and Materials:  
<https://health.maryland.gov/mmcp/Pages/MedicaidCheckIn-providers.aspx>
- [How to Register a New Account](#) - myMDTHINK video
- **Additional suggestions for FAQs** can be directed to the Medicaid Innovation, Research, and Development team for consideration in future updates. Please send to [mdh.medicaidcheckin@maryland.gov](mailto:mdh.medicaidcheckin@maryland.gov).