



Georgia Department
of Human Services



GEORGIA DEPARTMENT *of*
COMMUNITY HEALTH

Plan for Unwinding Continuous Medicaid Coverage

August 2022



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Stay Covered.

Overview

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- Federal Guidance
- Communication Strategies
- Plan for Unwinding Continuous Medicaid Coverage
- Relevant Considerations
- Communications Strategy

Background

- The U.S. Congress passed the Families First Coronavirus Response Act (FFCRA) in March 2020 in response to the COVID-19 pandemic.
- FFCRA gave states a temporary 6.2% Federal Medical Assistance Percentage (FMAP) increase if states ensured continuous coverage for individuals on Medicaid on or after March 18, 2020 through the end of the month in which the federal public health emergency (PHE) expires.
- As of July 20, 2022, the federal PHE is set to expire on October 13, 2022 unless renewed by the Biden Administration. The PHE has been renewed multiple times over the course of the pandemic, but each renewal cannot exceed ninety days.

Federal Guidance

- The [Centers for Medicare and Medicaid Services has issued guidance](#) to states to prepare for federal PHE expiration, which will require all states to redetermine eligibility for their Medicaid enrollees. See 42 C.F.R. 435.916.
- Guidance has evolved at [Medicaid.gov](#) for how states should conduct Medicaid redeterminations, address workforce and technology challenges, notify individuals that their coverage may end, and offer opportunities for supplying more information or appealing a decision.
- Currently, states have twelve months total to conduct redeterminations once the federal PHE ends. In Georgia, the Department of Community Health and Department of Human Services will jointly reevaluate **roughly 2.6 million** individuals for Medicaid eligibility.

Federal Guidance

- According to CMS guidance, states must initiate Medicaid redeterminations no later than one month after federal PHE expiration and complete the entire process within a maximum of fourteen months.
- For planning purposes, Georgia is preparing to reinstate the Medicaid redetermination process November 1, 2022. Unless federal guidance changes, Georgia must complete all Medicaid redeterminations, pending eligibility actions, disenrollments, and appeals by January 1, 2024.

What is PHE Unwinding?

- Due to changes in federal law throughout the COVID-19 pandemic, Medicaid members in all states received continuous coverage, even if their eligibility status changed.*
- Once the Biden Administration terminates the federal public health emergency (PHE), the federal government will require all states, including Georgia, to redetermine Medicaid eligibility for all current members.
- If a Medicaid member is still eligible, their coverage will be renewed. Individuals who are no longer eligible for Medicaid may qualify for other programs. This redetermination process occurs as part of the federal PHE unwinding process.

* Exceptions were for individuals who moved out of state or voluntarily terminated enrollment.

Current Landscape

In Spring 2022, Georgia took steps to strategically prepare for federal PHE expiration amid evolving federal guidance and timelines.

Spring 2022

- Launched “Go Paperless” initiative to encourage Medicaid members to opt into email notifications & update Gateway account: <https://gateway.ga.gov/access/>
- Planned outreach to Medicaid recipients, including press releases, text messages, robocalls, social media posts, etc.
- Engaged a public relations firm to conduct an aggressive, statewide campaign.
- Retained Change & Innovation Agency to review current constraints and leverage technology improvements for more efficient workflow & user-friendliness.

Current Landscape

Georgia is furthering preparations this Summer, including the following efforts.

Summer to Winter 2022

- Facilitating training sessions to prepare staff on processing Medicaid redeterminations, notification, and appeals.
- Hosting job fairs and hiring new staff for Medicaid redeterminations.
- Working with the Office of State Administrative Hearings concerning appeals volume.
- Developing statewide information campaign.

*Plans are subject to change based on federal guidance and state strategies.

Plan for Unwinding Continuous Medicaid Coverage

- Per current CMS guidance, states must select one of the following four risk-based approaches:
 - Option 1: Population-Based Approach – Prioritizes cohorts of beneficiaries most likely to have become eligible
 - Option 2: Time or Age-Based Approach – Prioritizes based on length of time the action has been pending
 - Option 3: Hybrid Approach – Combines the population- and time-based approaches
 - Option 4: State-Developed Approach – Ensures pending actions are handled appropriately to prevent improper terminations, mitigate churn, and provide smooth transitions to healthcare.gov

Plan for Unwinding Continuous Medicaid Coverage

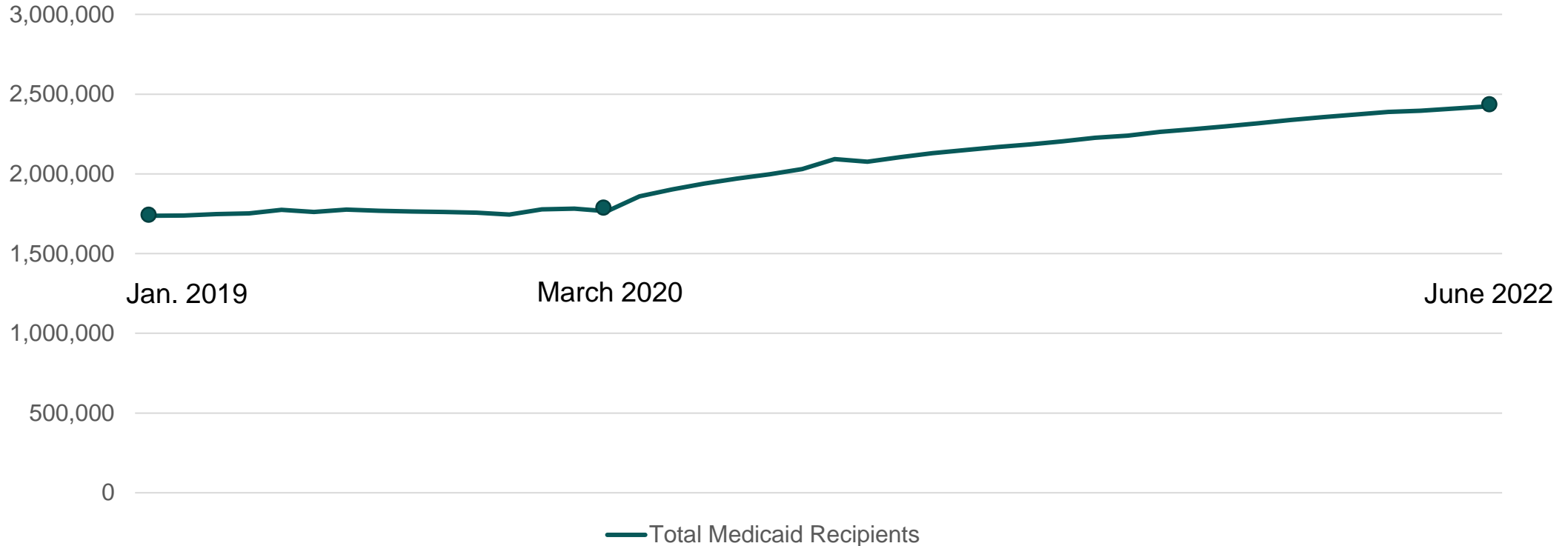
- Georgia has selected Option #4: State-Developed Approach.

Georgia's Approach

- The state-developed approach ensures pending actions are handled appropriately to prevent improper terminations, mitigate churn, and provide smooth transitions to healthcare.gov

Plan for Unwinding Continuous Medicaid Coverage

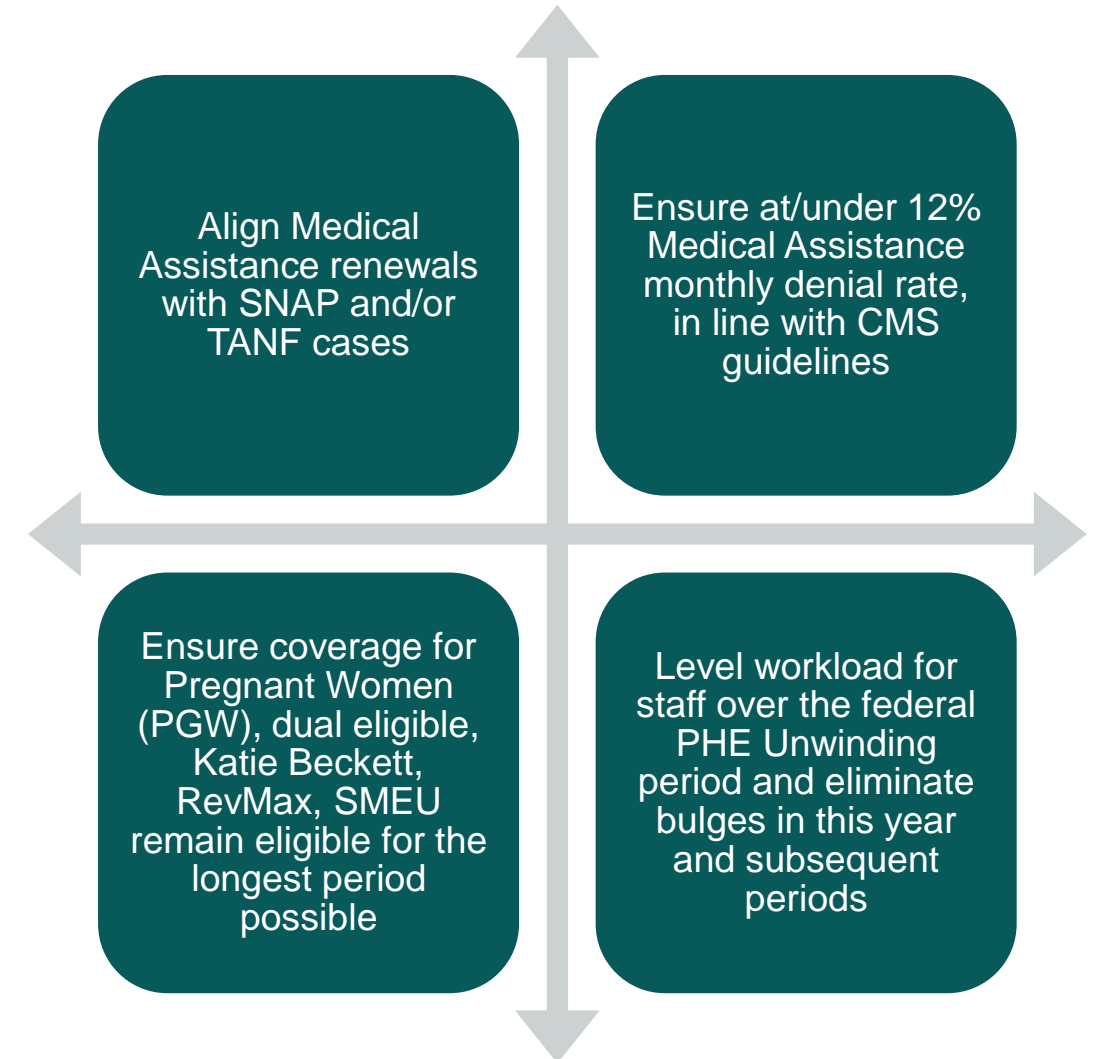
- The below chart indicates total Medicaid members in Georgia from January 2019 to June 2022. Total Medicaid members have steadily increased since the beginning of the federal PHE in March 2020.



*March 2020 and prior application data was as of COB 4/20/2020 and beginning with April 2020, all monthly application data is as of cob on the last day of the reporting month.

Plan for Unwinding Continuous Medicaid Coverage

- The Georgia Department of Human Services (GDHS) unwinding approach staggers Medicaid redeterminations for continuous coverage over multiple months, until all redeterminations conclude, targeting four metrics.



Relevant Considerations

- GDHS is focused on four key areas to prepare for additional demands related to the redetermination period.



Improving Technology

- Improving technology and implementing system enhancements



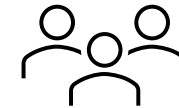
Creating Efficiencies

- Reducing workload burdens, including leveraging robotic processing automation (RPA)



Expanding Resources

- Increasing staff numbers to meet increased demand related to redetermination



Increasing Touchpoints

- DHS plans to open 158 offices across the state this fall to allow more face-to-face interactions with enrollees ahead of the federal PHE expiration

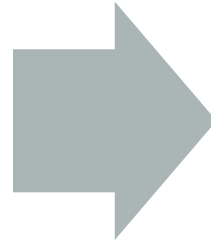
Communications Strategy

- Communications related to unwinding continuous Medicaid coverage will occur in two phases.

Phase 1:

Updated Contact Information

- Phase 1 leverages the time before redetermination deadlines begin. The primary goal is to capture updated contact information for members to ensure timely notification for redetermination.



Phase 2:

Redetermination

- Phase 2 will begin when the federal PHE expires and the federal government requires Medicaid determination nationwide. Efforts will center on education and guidance so members avoid any gaps in care.

Communications Strategy

Phase 1: Updated Contact Information

- In Phase 1, GDHS is focused on increasing the number of emails and updated, accurate contact information for its Medicaid members in advance of redetermination.

Key Messages

- If you are a Medicaid member in Georgia, you have the right to receive uninterrupted health benefits, if eligible.
- Through your Gateway account, make sure your contact information is up-to-date, including phone number, address, job or income, and number of people in your household.
- Members are also encouraged to go paperless and select the email communication option for the fastest alerts about your coverage.

Communications Strategy

Phase 1: Updated Contact Information

- In Phase 1, GDHS will leverage various communications channels to reach Medicaid members in Georgia.

Digital Marketing

- Find the fastest, most frictionless methods to capture contact info via a mobile-first strategy
- Ex: Email, SMS, social media

Paid Media

- Use paid real-world media to reinforce the upcoming deadline and capture contact information
- Ex: Billboards, TV ads

Communications

- Disseminate statewide press release and pitches to key markets about importance of initiative
- Ex: Press releases, media interviews

Messengers

- Engage partners to help disseminate messages to members
- Ex: Health providers, advocacy groups

Communications Strategy

Phase 2: Redetermination

- Marketing and communications efforts in Phase 2 will focus on education and awareness, leveraging many of the same distribution channels as Phase 1. Efforts in this phase will include FAQs and step-by-step informational videos.

Digital Marketing

- “Close the loop” from initial contact with automated repeat reminders
- Ex: Microsite, email, SMS, social media

Paid Media

- Leverage “almost too late” thematic creative refresh on many of the same paid media placements
- Ex: Billboards, TV ads

Communications

- Disseminate instructional materials to answer common questions and explain the redetermination process
- Ex: Press releases, infographics, how-to videos

Messengers

- Engage partners to help disseminate messages and instructional materials to members
- Ex: Health providers, advocacy groups

*The redetermination process does not guarantee any person’s eligibility for Medicaid or other available coverage.



Contact Information

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or

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