

Surviving the Unwinding Part IV:

Finishing Strong in the Home Stretch and
Preparing for the Future

May 21, 2024



Welcome & Introductions

***Oxiris Barbot, MD, President &
CEO, UHF***

Agenda

9:45 AM	Registration
10:15 AM	Welcome & Introductions
10:25 AM	Dashboard Update, Lessons Learned and Finishing Strong
11:00 AM	Leveraging Flexibilities for Future Success
11:30 AM	State Variation in Medicaid and CHIP Unwinding
12:00 PM	Lunch Break
12:15 PM	Update: Medicaid Eligibility Modernization Project
12:40 PM	Questions and Discussions

Dashboard Update

*Sonia Sekhar, Deputy Director,
NYSOH Marketplace*

State Update on Unwinding

More Than Three Fourths Through the Unwind

- As of March, New York is **more than three fourths** of the way through the PHE Unwind process.
- For **NY State of Health** enrollees, we have initiated **5,056,931 renewals**.
 - 4,145,820 or 82% renewed, including 79% of adults and 91% of children.
 - 911,111 or 18% did not complete their renewal, including 10% **terminated due to not coming back and renewing when they needed to**, and 8% who may have started but did not complete their renewals.
 - 102,785 or 2% are ineligible (Included in the renewed count).
- We have sent over 7.5 million consumer emails, nearly 4.5 million text messages, and over 3.7 million consumer notices.
- NY State of Health call center has answered over 4.5 million calls, with wait times averaging 1 minute 47 seconds.

NYS PHE Unwind Data

November Cohort Highlights

Total number in Cohort: **624,268**

Renewed their coverage: **75%**

Renewed through NYSOH: 75%

Renewed through LDSS: 74%

Renewal Broken Down by Program

Medicaid: 76%

Child Health Plus: 83%

Essential Plan: 67%

AGE DATA

Renewal outcomes are broken down by age in the tables shown here.

November 2023 Cohort NY State of Health		
Age Group	Renewal Complete	Completion Rate
00-17	103,397	83%
18-25	46,689	69%
26-34	63,010	67%
35-44	58,508	73%
45-54	49,534	77%
55-64	50,649	82%
65+	13,498	69%
Total	385,285	75%



SNAPSHOT

As of November 30, 2023, overall **75%** (468,319) of the 624,268 individuals included in the November 2023 Cohort have **renewed** their coverage across NY State of Health (75%) and the Local Departments of Social Services (LDSS) (74%). This includes individuals enrolled in Medicaid, Child Health Plus, and Essential Plan with November 30th renewal dates.

Data within this report reflects renewal status, demographics, and program transitions for individuals in the November 2023 Cohort as of November 30, 2023.

Because New York permits late renewal, data in this report does not provide final outcomes for the November 2023 Cohort. Renewal completion rates are expected to rise over the next month. Additionally, the Department of Health is unable to track enrollment in coverage outside of NY State of Health or LDSSs. For example, a significant number of individuals are estimated to have gained health coverage through an employer, meaning that individuals who do not come back to renew should not be assumed to be uninsured.



New York State Public Health Emergency UNWIND DASHBOARD

November 2023

Tracking the COVID-19 Public Health Emergency Unwind of the Medicaid Continuous Coverage Requirement

INTRODUCTION

Under the Families First Coronavirus Response Act's continuous coverage requirement, New York State Medicaid (MA), Child Health Plus (CHPlus) and Essential Plan (EP) members have not had to renew their health insurance since early 2020. The Consolidated Appropriations Act of 2023 requires states to begin the process of redetermining enrollees in April 2023. This process is also referred to as the "unwind."

New York State began sending renewal notices in the early spring to enrollees in Medicaid, CHPlus, and EP with June 30, 2023 coverage end dates. This process will continue each month until every renewal cycle of enrollees, referred to as a cohort, has had their eligibility redetermined.

NOTE: Unless otherwise noted, data included in this report only includes individuals processed through the NY State of Health Marketplace. Due to limitations in data maintained in the Welfare Management System, individuals processed through LDSSs are not reflected here except for in the Renewal Tracking Section and the Transitions Section. Data in this document shows individuals, not households or cases.

PHE UNWIND - November Renewal Tracking

November 2023 Cohort

Total renewed: (N= 468,319)

Total renewed: 75%

PHE Unwind - November Renewal Tracking

Renewal Cohort Renewal Complete

LDSS 69,334

Downstate 62,415

LDSS 42,417

Rest of State 20,621

NY State of Health 512,517

385,285

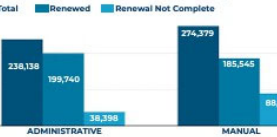
TOTAL 624,268

468,319

Renewal Completed by Program (%) NY State of Health and LDSS Data



NY State of Health Renewal Type (Administrative vs Manual)



Customer Service Center November 2023

Type	Total
Calls Received	635,297
Call Center Wait Time	59s
Abandoned Call Rate	2.9%

NYS PHE Unwind Data

November Cohort Highlights Continued

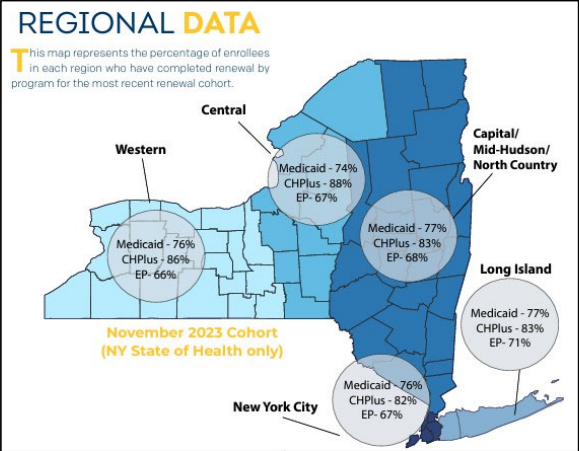
November 2023 Cohort (NY State of Health only)		
Race	Renewal Complete	% Renewal Complete
African	1,234	67%
American Indian/Alaskan Native	1,780	65%
Asian Indian	8,269	73%
Bangladeshi	1,950	88%
Black/African American	47,107	71%
Burmese	67	81%
Chinese	20,647	84%
Filipino	1,593	70%
Guamanian/Chamorro	213	80%
Haitian	612	67%
Jamaican	862	75%
Japanese	565	77%
Korean	2,267	75%
Middle Eastern/North African	1,204	76%
Native Hawaiian	85	71%
Other	34,648	75%
Other Asian	11,550	76%
Other Pacific Islander	765	72%
Pakistani	365	82%
Samoan	57	70%
Taiwanese	58	78%
Unknown	136,619	75%
Vietnamese	761	77%
White	126,047	76%
Total*	399,325	75%

RACE AND ETHNICITY DATA

NY State of Health enrollees have the option of selecting their race, ethnicity, or both.

November 2023 Cohort (NY State of Health only)		
Hispanic	Renewal Complete	% Renewal Complete
Yes	96,688	75%
No	218,861	75%
Unknown	69,736	75%
Total	385,285	75%

* NOTE: Individuals are able to select one or more race categories, including "Don't know" and "Choose not to answer," so some individuals may be counted in more than one category.



LANGUAGE DATA

Individuals enrolling through NY State of Health must select their preferred written language on their application. The application data informs which language members receive their notices in, and NY State of Health's overall language access strategy, which includes enrollment assistants who offer assistance in nearly 60 languages. NY State of Health's Customer Service Center is able to provide assistance in any language, and NY State of Health has consumer education materials in 26 languages.

November 2023 Cohort (NY State of Health only)		
Written Language	Renewal Complete	% Renewal Complete
Albanian	62	70%
Arabic	317	71%
Bengali	262	83%
Burmese	126	75%
Chinese	13,733	87%
English	294,715	74%
French	436	71%
French Creole	89	65%
Greek	15	71%
Haitian Creole	339	69%
Hindi	26	68%
Italian	50	69%
Japanese	49	77%
Karen	52	81%
Korean	800	80%
Nepali	54	69%
Polish	115	77%
Russian	3,335	78%
Somali	1	9%
Spanish	70,474	78%
Swahili	3	75%
Tagalog	11	65%
Tigrinya	2	67%
Traditional Chinese	87	92%
TWI	1	100%
Urdu	45	83%
Vietnamese	58	78%
Yiddish	28	88%
Total	385,285	75%

NYS PHE Unwind Data

November Coverage Transitions

- Most members are remaining in the program they were in prior to renewal.
- This does not capture transitions to non-NYSOH coverage, like employer sponsored coverage.

TRANSITIONS

This section displays the number of individuals who remained in their prior program or enrolled in other programs within the Marketplace or LDSSs, where the data are available. Additional information on the eligibility levels for each program is available in the Appendix on page 14.

Data reflects enrollment changes within New York State public programs; this data does not reflect individuals who transition to Employer Sponsored Insurance (ESI) or other coverage outside of the Marketplace, have moved out of state, or are no longer seeking coverage in New York for some other reason.

November 2023 Cohort (NY State of Health and LDSS data)

Program Transitions for those Completing Renewals (N= 468,319)

Program Type (prior to renewal)	Program Type (post-renewal)							Total
	CHPlus	Essential Plan	Medicaid	QHP APTC without CSR	QHP APTC with CSR	QHP Full Pay	Ineligible	
CHPlus (17,153)	87%	0%	12%	0%	0%	0%	1%	100%
Essential Plan (52,503)	0%	63%	20%	9%	4%	2%	2%	100%
Medicaid (398,663)	5%	8%	80%	3%	1%	<1%	3%	100%

NYS PHE Unwind Data

December Cohort Highlights

Total number in Cohort: **764,726**

Renewed their coverage: **78%**

Renewed through NYSOH: 78%

Renewed through LDSS: 79%

Renewal Broken Down by Program

Medicaid: 79%

Child Health Plus: 90%

Essential Plan: 70%

AGE DATA

Renewal outcomes are broken down by age in the tables shown here.

December 2023 Cohort (NY State of Health only)		
Age Group	Renewal Complete	Completion Rate
00-17	143,709	86%
18-25	57,870	71%
26-34	74,862	69%
35-44	72,744	76%
45-54	61,534	79%
55-64	65,636	84%
65+	8,755	68%
Total	485,110	78%



SNAPSHOT

As of December 31, 2023, overall **78%** (597,861) of the 764,726 individuals included in the December 2023 Cohort have renewed their coverage across NY State of Health (78%) and the Local Departments of Social Services (LDSS) (79%). This includes individuals enrolled in Medicaid, Child Health Plus, and Essential Plan with December 31st renewal dates.

Data within this report reflects renewal status, demographics, and program transitions for individuals in the December 2023 Cohort as of December 31, 2023.

Because New York permits late renewal, data in this report does not provide final outcomes for the December 2023 Cohort. Renewal completion rates are expected to rise over the next month. Additionally, the Department of Health is unable to track enrollment in coverage outside of NY State of Health or LDSSs. For example, a significant number of individuals are estimated to have gained health coverage through an employer, meaning that individuals who do not come back to renew should not be assumed to be uninsured.



New York State Public Health Emergency UNWIND DASHBOARD

December 2023

Tracking the COVID-19 Public Health Emergency Unwind of the Medicaid Continuous Coverage Requirement

INTRODUCTION

Under the Families First Coronavirus Response Act's continuous coverage requirement, New York State Medicaid (MA), Child Health Plus (CHPlus) and Essential Plan (EP) members have not had to renew their health insurance since early 2020. The Consolidated Appropriations Act of 2023 requires states to begin the process of redetermining enrollees in April 2023. This process is also referred to as the "unwind."

New York State began sending renewal notices in the early spring to enrollees in Medicaid, CHPlus, and EP with June 30, 2023 coverage end dates. This process will continue each month until every renewal cycle of enrollees, referred to as a cohort, has had their eligibility redetermined.

NOTE: Unless otherwise noted, data included in this report only includes individuals processed through the NY State of Health Marketplace. Due to limitations in data maintained in the Welfare Management System, individuals processed through LDSSs are not reflected here except for in the Renewal Tracking Section and the Transitions Section. Data in this document shows individuals, not households or cases.

PHE UNWIND - December Renewal Tracking

December 2023 Cohort

Total renewed: (N= 597,861)

Total renewed: 78%

PHE Unwind - December Renewal Tracking

Renewal Cohort Renewal Complete

LDSS 96,369

Downstate 88,130

LDSS 47,064

Rest of State 24,621

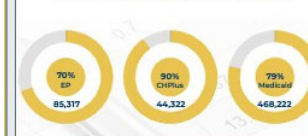
NY State of Health 621,293

485,110

TOTAL 764,726

597,861

Renewal Completed by Program (%) NY State of Health and LDSS Data



NY State of Health Renewal Type (Administrative vs Manual)



Customer Service Center December 2023

Type	Total
Calls Received	640,884
Call Center Wait Time	1m 49s
Abandoned Call Rate	5.2%

NYS PHE Unwind Data

January Cohort Highlights

Total number in Cohort: **575,836**

Renewed their coverage: **78%**

Renewed through NYSOH: **78%**

Renewed through LDSS: **77%**

Renewal Broken Down by Program

Medicaid: **79%**

Child Health Plus: **85%**

Essential Plan: **68%**



SNAPSHOT

As of January 31, 2024, overall **78%** (447,460) of the 575,836 individuals included in the January 2024 Cohort have renewed their coverage across NY State of Health (78%) and the Local Departments of Social Services (LDSS) (77%). This includes individuals enrolled in Medicaid, Child Health Plus, and Essential Plan with January 31st renewal dates.

Data within this report reflects renewal status, demographics, and program transitions for individuals in the January 2024 Cohort as of January 31, 2024.

Because New York permits late renewal, data in this report does not provide final outcomes for the January 2024 Cohort. Renewal completion rates are expected to rise over the next month. Additionally, the Department of Health is unable to track enrollment in coverage outside of NY State of Health or LDSSs. For example, a significant number of individuals are estimated to have gained health coverage through an employer, meaning that individuals who do not come back to renew should not be assumed to be uninsured.



New York State Public Health Emergency UNWIND DASHBOARD

January 2024

Tracking the COVID-19 Public Health Emergency Unwind of the Medicaid Continuous Coverage Requirement

INTRODUCTION

Under the Families First Coronavirus Response Act's continuous coverage requirement, New York State Medicaid (MA), Child Health Plus (CHPlus) and Essential Plan (EP) members have not had to renew their health insurance since early 2020. The Consolidated Appropriations Act of 2023 requires states to begin the process of redetermining enrollees in April 2023. This process is also referred to as the "unwind."

New York State began sending renewal notices in the early spring to enrollees in Medicaid, CHPlus, and EP with June 30, 2023 coverage end dates. This process will continue each month until every renewal cycle of enrollees, referred to as a cohort, has had their eligibility redetermined.

NOTE: Unless otherwise noted, data included in this report only includes individuals processed through the NY State of Health Marketplace. Due to limitations in data maintained in the Welfare Management System, individuals processed through LDSSs are not reflected here except for in the Renewal Tracking Section and the Transitions Section. Data in this document shows individuals, not households or cases.

AGE DATA

Renewal outcomes are broken down by age in the tables shown here.

January 2024 Cohort (NY State of Health only)		
Age Group	Renewal Complete	Completion Rate
00-17	105,525	84%
18-25	46,358	72%
26-34	57,937	71%
35-44	56,998	76%
45-54	45,896	79%
55-64	43,323	83%
65+	6,019	63%
Total	362,056	78%

PHE UNWIND - January Renewal Tracking

January 2024 Cohort

Total renewed:(N= 447,460)

Total renewed: 78%

PHE Unwind - January Renewal Tracking

Renewal Cohort Renewal Complete

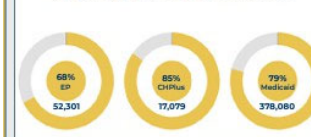
LDSS 69,555
Downstate 65,497

LDSS 40,722
Rest of State 19,907

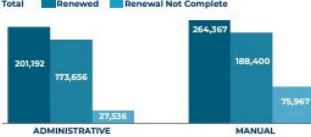
NY State of Health 465,559
362,056

TOTAL 575,836
447,460

Renewal Completed by Program (%) NY State of Health and LDSS Data



NY State of Health Renewal Type (Administrative vs Manual)



Customer Service Center January 2024

Type	Total
------	-------

Calls Received	718,252
----------------	---------

Call Center Wait Time	3m 05s
-----------------------	--------

Abandoned Call Rate	10.7%
---------------------	-------

NYS PHE Unwind Data

February Cohort Highlights

Total number in Cohort: **613,723**
Renewed their coverage: **79%**
Renewed through NYSOH: 80%
Renewed through LDSS: 77%
Renewal Broken Down by Program
Medicaid: 80%
Child Health Plus: 85%
Essential Plan: 74%



SNAPSHOT

As of February 29, 2024, overall **79%** (485,288) of the 613,723 individuals included in the February 2024 Cohort have renewed their coverage across NY State of Health (80%) and the Local Departments of Social Services (LDSS) (77%). This includes individuals enrolled in Medicaid, Child Health Plus, and Essential Plan with February 29th renewal dates.

Data within this report reflects renewal status, demographics, and program transitions for individuals in the February 2024 Cohort as of February 29, 2024.

Because New York permits late renewal, data in this report does not provide final outcomes for the February 2024 Cohort. Renewal completion rates are expected to rise over the next month. Additionally, the Department of Health is unable to track enrollment in coverage outside of NY State of Health or LDSSs. For example, a significant number of individuals are estimated to have gained health coverage through an employer, meaning that individuals who do not come back to renew should not be assumed to be uninsured.

New York State Public Health Emergency UNWIND DASHBOARD

February 2024

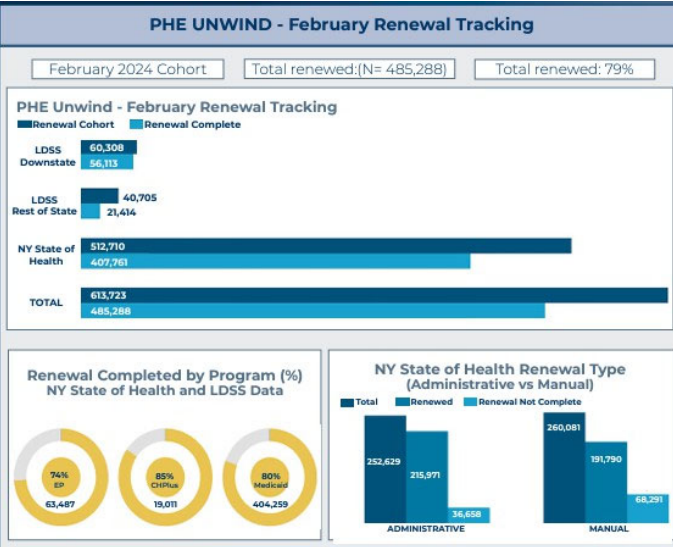
Tracking the COVID-19 Public Health Emergency Unwind of the Medicaid Continuous Coverage Requirement

INTRODUCTION

Under the Families First Coronavirus Response Act's continuous coverage requirement, New York State Medicaid (MA), Child Health Plus (CHPlus) and Essential Plan (EP) members have not had to renew their health insurance since early 2020. The Consolidated Appropriations Act of 2023 requires states to begin the process of redetermining enrollees in April 2023. This process is also referred to as the "unwind."

New York State began sending renewal notices in the early spring to enrollees in Medicaid, CHPlus, and EP with June 30, 2023 coverage end dates. This process will continue each month until every renewal cycle of enrollees, referred to as a cohort, has had their eligibility redetermined.

NOTE: Unless otherwise noted, data included in this report only includes individuals processed through the NY State of Health Marketplace. Due to limitations in data maintained in the Welfare Management System, individuals processed through LDSSs are not reflected here except for in the Renewal Tracking Section and the Transitions Section. Data in this document shows individuals, not households or cases.



AGE DATA

Renewal outcomes are broken down by age in the tables shown here.

February 2024 Cohort (NY State of Health only)		
Age Group	Renewal Complete	Completion Rate
00-17	113,280	86%
18-25	51,958	76%
26-34	64,197	72%
35-44	65,532	78%
45-54	54,534	81%
55-64	51,582	84%
65+	6,678	66%
Total	407,761	80%

Customer Service Center February 2024

Type	Total
Calls Received	666,533
Call Center Wait Time	3m 18s
Abandoned Call Rate	11.7%

NYS PHE Unwind Data

March Cohort Highlights

Total number in Cohort: **626,589**
Renewed their coverage: **75%**
Renewed through NYSOH: 75%
Renewed through LDSS: 76%
Renewal Broken Down by Program
Medicaid: 76%
Child Health Plus: 86%
Essential Plan: 71%

AGE DATA

Renewal outcomes are broken down by age in the tables shown here.

* NOTE: This does not include the subset of the 65+ population who were referred to their LDSS to complete their renewal.

March 2024 Cohort (NY State of Health only)		
Age Group	Renewal Complete	Completion Rate
00-17	108,725	81%
18-25	46,796	69%
26-34	59,720	67%
35-44	62,722	74%
45-54	54,430	79%
55-64	52,161	83%
65+*	6,743	55%
Total	391,297	75%



SNAPSHOT

Overall, **75%** (472,209) of the 626,589 individuals included in the March 2024 Cohort have renewed their coverage across NY State of Health (75%) and the Local Departments of Social Services (LDSS) (76%). This includes individuals enrolled in Medicaid, Child Health Plus, and Essential Plan with March 31st renewal dates.

Data within this report reflects renewal status, demographics, and program transitions for individuals in the **March 2024 Cohort**.

Because New York permits late renewal, data in this report does not provide final outcomes for the March 2024 Cohort. Renewal completion rates are expected to rise by the end of April. Additionally, the Department of Health is unable to track enrollment in coverage outside of NY State of Health or LDSSs. For example, a significant number of individuals are estimated to have gained health coverage through an employer, meaning that individuals who do not come back to renew should not be assumed to be uninsured.



New York State Public Health Emergency UNWIND DASHBOARD

March 2024

Tracking the COVID-19 Public Health
Emergency Unwind of the Medicaid
Continuous Coverage Requirement

INTRODUCTION

Under the Families First Coronavirus Response Act's continuous coverage requirement, New York State Medicaid (MA), Child Health Plus (CHPlus) and Essential Plan (EP) members have not had to renew their health insurance since early 2020. The Consolidated Appropriations Act of 2023 requires states to begin the process of redetermining enrollees in April 2023. This process is also referred to as the "unwind."

New York State began sending renewal notices in the early spring to enrollees in Medicaid, CHPlus, and EP with June 30, 2023 coverage end dates. This process will continue each month until every renewal cycle of enrollees, referred to as a cohort, has had their eligibility redetermined.

NOTE: Unless otherwise noted, data included in this report only includes individuals processed through the NY State of Health Marketplace. Due to limitations in data maintained in the Welfare Management System, individuals processed through LDSSs are not reflected here except for in the Renewal Tracking Section and the Transitions Section. Data in this document shows individuals, not households or cases.

PHE UNWIND - March Renewal Tracking

March 2024 Cohort

Total renewed:(N= 472,209)

Total renewed: 75%

PHE Unwind - March Renewal Tracking

Renewal Cohort Renewal Complete

LDSS 67,256

Downstate 59,966

LDSS 39,599

Rest of State 20,946

NY State of Health 519,734

391,297

TOTAL 626,589

472,209

Renewal Completed by Program (%) NY State of Health and LDSS Data

71% EP
54,795

86% CHPlus
15,664

76% Medicaid
401,750

NY State of Health Renewal Type (Administrative vs Manual)

Total Renewed Renewal Not Complete

193,460

164,121

29,339

326,274

227,776

99,098

ADMINISTRATIVE

MANUAL

Customer Service Center March 2024

Type	Total
Calls Received	697,210
Call Center Wait Time	5m 45s
Abandoned Call Rate	18.6%

NYS PHE Unwind Data

March Coverage Transitions

- Most members are remaining in the program they were in prior to renewal.
- The percent of people transitioning from Medicaid to the Essential Plan increased. This is due to New York's recently approved 1332 Waiver which expands income eligibility for the Essential Plan to 250% of FPL, effective April 1, 2024.
- This does not capture transitions to non-NYSOH coverage, like employer sponsored coverage.

TRANSITIONS

This section displays the number of individuals who remained in their prior program or enrolled in other programs within the Marketplace or LDSSs, where the data are available. Additional information on the eligibility levels for each program is available in the Appendix on page 15.

Data reflects enrollment changes within New York State public programs; this data does not reflect individuals who transition to Employer Sponsored Insurance (ESI) or other coverage outside of the Marketplace, have moved out of state, or are no longer seeking coverage in New York for some other reason.

March 2024 Cohort (NY State of Health and LDSS data)								
Program Transitions for those Completing Renewals (N= 472,209)								
Program Type (prior to renewal)	Program Type (post-renewal)							Total
	CHPlus	Essential Plan	Medicaid	QHP APTC without CSR	QHP APTC with CSR	QHP Full Pay	Ineligible	
CHPlus (15,664)	88%	0%	11%	0%	0%	0%	1%	100%
Essential Plan (54,795)	0%	73%	20%	4%	1%	<1%	1%	100%
Medicaid (401,750)	6%	12%	79%	1%	0%	0%	2%	100%

Leveraging Flexibilities for Future Success

*Gabrielle Armenia, Director,
Division of Eligibility &
Marketplace Integration, DOH*

Approved e14 Waivers

New York has submitted & received approval for waivers to grant flexibility throughout the Public Health Emergency Unwind

- 1** **100% FPL**
Renew Medicaid Eligibility for Individuals with Income at or below 100% FPL and No Data Returned
- 2** **Enrollment Broker Contact Info**
Partnering with Enrollment Brokers to Update Beneficiary Contact Information
- 3** **Fair Hearing**
Extended Timeframe to Take Final Administrative Action on Fair Hearing Requests
- 4** **MCO Contact Info**
Partnering with Managed Care Plans to Update Beneficiary Contact Information
- 5** **Non-MAGI SNAP**
Renewal for Individuals Based on Non-MAGI Eligibility
- 6** **SNAP CHIP**
Renewal for Individuals Based on SNAP Eligibility (CHIP)
- 7** **Zero Income**
ExParte Renewal for Individuals with No Income and No Data Returned
- 8** **Resource Test**
Waiver of the resource test at renewal and change in circumstances
- 9** **Duals & individuals over 65 in NY State of Health**
Allowing 65 and/or Medicare eligibles to remain in NY State of Health by waiving SSI budgeting
- 10** **Fixed Income**
Ex Parte for fixed social security or pension income that is below the Ex Parte eligibility level

Received written approval

CMS has also approved the following 2 waivers for New York without a formal letter:

Verbal approval

Non-MAGI Eligibility During the Unwind

Areas of non-compliance

**Conducting ex parte renewals
for the non-MAGI population**

**Ability to submit renewal
forms through all required
modalities for the non-MAGI
population**

Mitigation Strategies

- Strategy 1: Holding procedural terminations
- Strategy 3: Streamlining income determinations
- Strategy 4: Streamlining asset determinations
- Strategy 6: Enhancing availability and accessibility of other renewal submission modalities
- Strategy 7: Enhancing outreach and in-person assistance
- Strategy 8: Additional policy changes to support retention

Updates on Continuation of Unwinding Flexibilities

CMS issued an information bulletin on December 18, 2023, related to maintaining children's coverage. In that bulletin, CMS notified states that they could continue unwinding-related section 1902 (e) (14) (A) waiver authority through December 31, 2024.

CMS issued further guidance on May 9, 2024. In an effort to establish and update income and eligibility determination systems that maximize states' ability to ensure that eligible individuals retain coverage, CMS further extended these unwinding-related section 1902(e)(14)(A) waivers through June 30, 2025.

Automatic Renewal of Existing e14 Waivers

- All waivers will be automatically extended through June 30, 2025, unless we notify CMS we want to discontinue any of those.
- There are two exceptions which relate to the following e14s:
 - Zero income
 - 100% FPL

Zero Income and 100% FPL e14 Waivers

- The Zero dollar and 100% FPL strategies were designed to permit a single Ex Parte renewal based on verified information from the individual's most recent income determination combined with use of all available electronic income data sources.
- CMS believes allowing a second Ex Parte renewal for such individuals is critical for states to process applications in a timely manner. However, states must meet some additional conditions in order to continue these two flexibilities.

Must take steps to confirm continued state residency of the individual for example, through utilization review;

Must check financial data sources in accordance with its verification plan. If no information is returned, the state may consider income verified;

The state must take appropriate steps to review the non-financial components of eligibility consistent with the state's existing policies and procedures outlined in its verification plan; and

The state must notify individuals whose eligibility is renewed using this strategy they must notify the state if any of the information use to complete the renewal is inaccurate.

Regulatory Exception to Timely Determinations

- States may continue to use the timeliness exception to delay procedural disenrollments through June 30, 2025, as long as they continue to meet the conditions set forth in regulations.
- This will prevent large volumes of procedural terminations for individuals who remain eligible.
- As such, unwinding-related renewals activities will continue outside of the official unwind period, particularly outside of NY State of Health.

State Variation in Medicaid and CHIP Unwinding: Where NY Fits In

***Danielle Holahan, Executive Director,
NYSOH Marketplace***

***Matthew Buettgens, Senior Fellow,
Urban Institute***



May 21, 2024

New York and Unwinding Trends Nationwide

Matthew Buettgens, Jessica Banthin, Jameson Carter, and Jason Levitis



Overview

- About our Analysis
- Net Disenrollment Rates by State
- Net Disenrollment and State Policy Choices
- Conclusions
- Next Steps

State Variation in Medicaid and CHIP Unwinding for Children and Adults as of November 2023

Analyses of Enrollment Relative to Earlier Projections and Key Policy Choices

Matthew Buettgens, Jameson Carter, Jessica Banthin, Jason Levitis

www.urban.org

Projections of Medicaid Enrollment During the Continuous Coverage Requirement

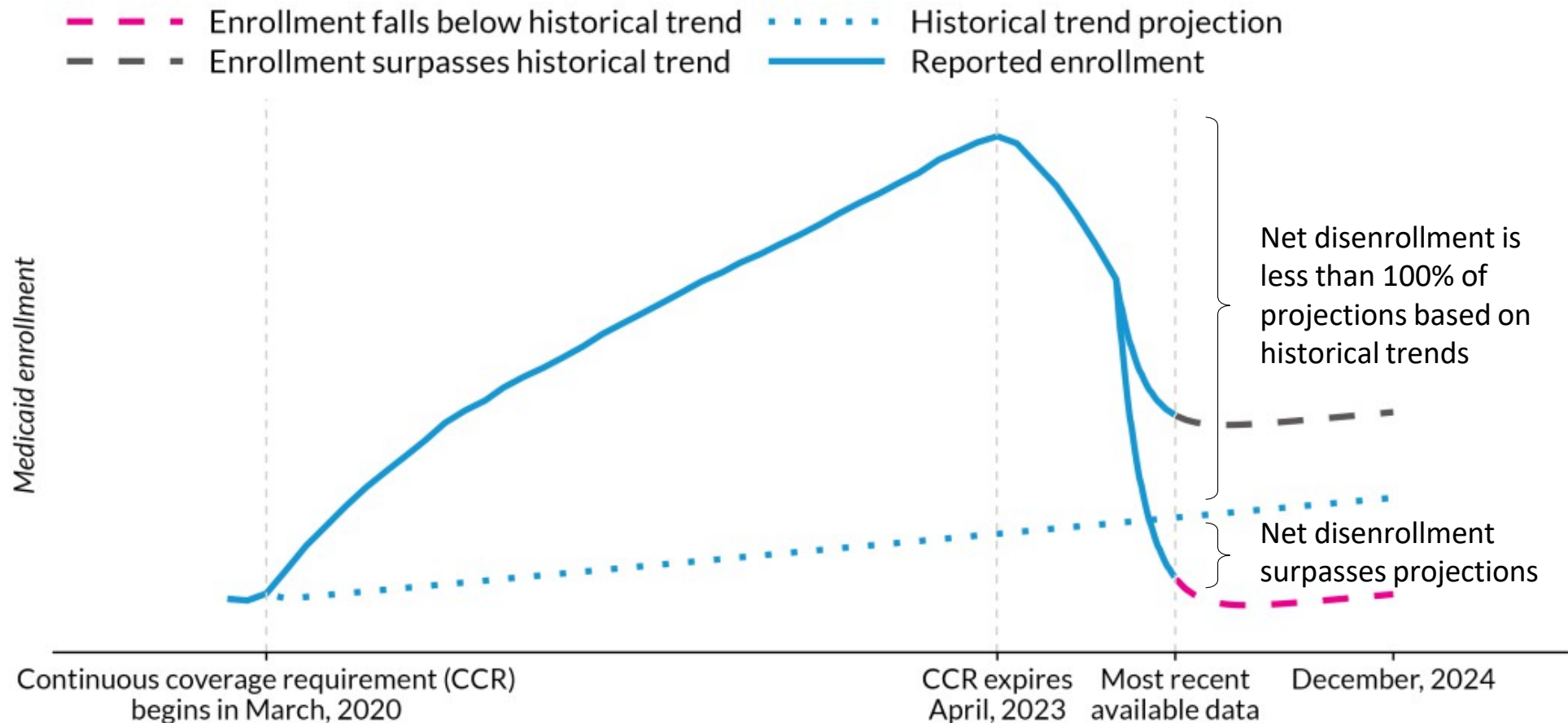
- In a series of reports from September 2021 to December 2022, based on monthly enrollment data, we were able to project the growth in Medicaid enrollment due to the continuous coverage requirement fairly accurately, by state.
- In Dec 2022, we estimated that 14.8 million people would be disenrolled from Medicaid/CHIP over the 14 months nationwide following the expiration of the CCR.
- We found that rates of growth during the continuous coverage requirement varied by state. It follows that states are likely to see different rates of net disenrollment during the unwinding even if following similar procedures.
- We estimated that, in the absence of state policies permanently reducing churn or otherwise increasing enrollment, Medicaid enrollment would eventually return to the pre-COVID trend (based on historical growth in each state).

New Analysis of Net Disenrollment During the Unwinding

- We calculate net disenrollment as the difference in Medicaid/CHIP enrollment from its peak just before a state reported disenrolling people to November 2023, the latest month at the time of analysis for which consistent data were available for virtually all states.
- The reported disenrollment data under the Consolidated Appropriations Act overstate enrollment changes because they do not count new enrollment and do not accurately represent the final disposition of enrollees in many states. Currently, KFF reports 16.9 million people disenrolled, compared with net disenrollment of 10.3 million based on the latest state enrollment data.
- Our previous projections were for Medicaid only. For this work we revise to include both Medicaid and CHIP enrollment.
- We compare a state's net disenrollment to the total net disenrollment we projected. If reported net disenrollment is greater than the projection, a state's enrollment has fallen below our estimate of the long-term pre-COVID trend. The analysis is preliminary since few states have completed unwinding.

How were these projections computed?

An example detailing two potential unwinding scenarios



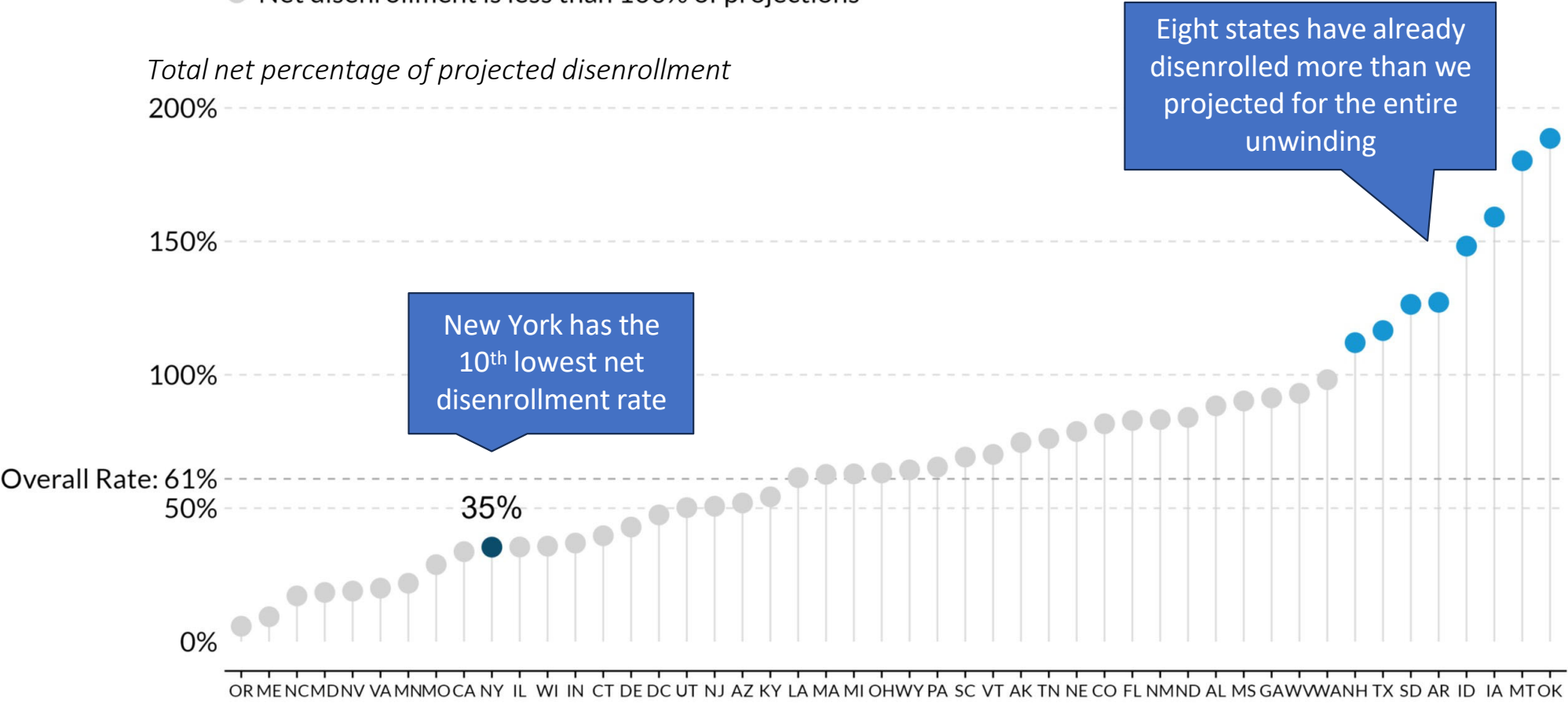
The Essential Plan

- To be comparable across states, our analysis only included Medicaid and CHIP.
- New York's Essential Plan extended comprehensive, highly affordable coverage to those with incomes up to 200% FPL (Now 250% FPL with the waiver in April). Some other states provide additional premium subsidies and, more rarely, cost sharing reductions, but New York's program is currently the most generous in this income range.
- EP is an essential part of reducing coverage losses due to the unwinding, but is outside the scope of this analysis.

Net Disenrollment Rates by State

How does New York compare to other states?

- Net disenrollment is greater than 100% of projections based on historical trends ● New York
- Net disenrollment is less than 100% of projections



How do children and adults in New York compare?

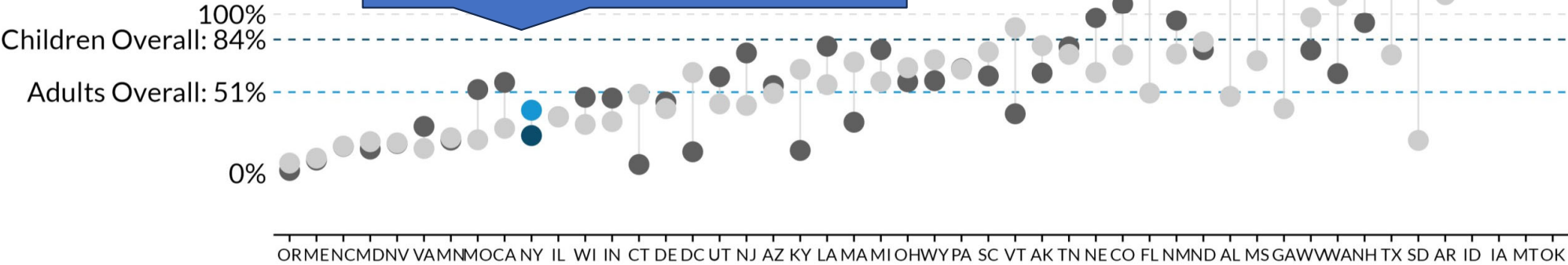
- Adult disenrollment
- Child disenrollment
- Adult disenrollment: New York
- Child disenrollment: New York

Total net percentage of projected disenrollment

300%

In 12 states, child disenrollment already exceeds our projections for the entire unwinding.

30 states with the lowest overall net disenrollment have similar rates for adults and children. Some, like New York, have lower rates for children.



Net Disenrollment and State Policy Choices

State policy choices that we looked at

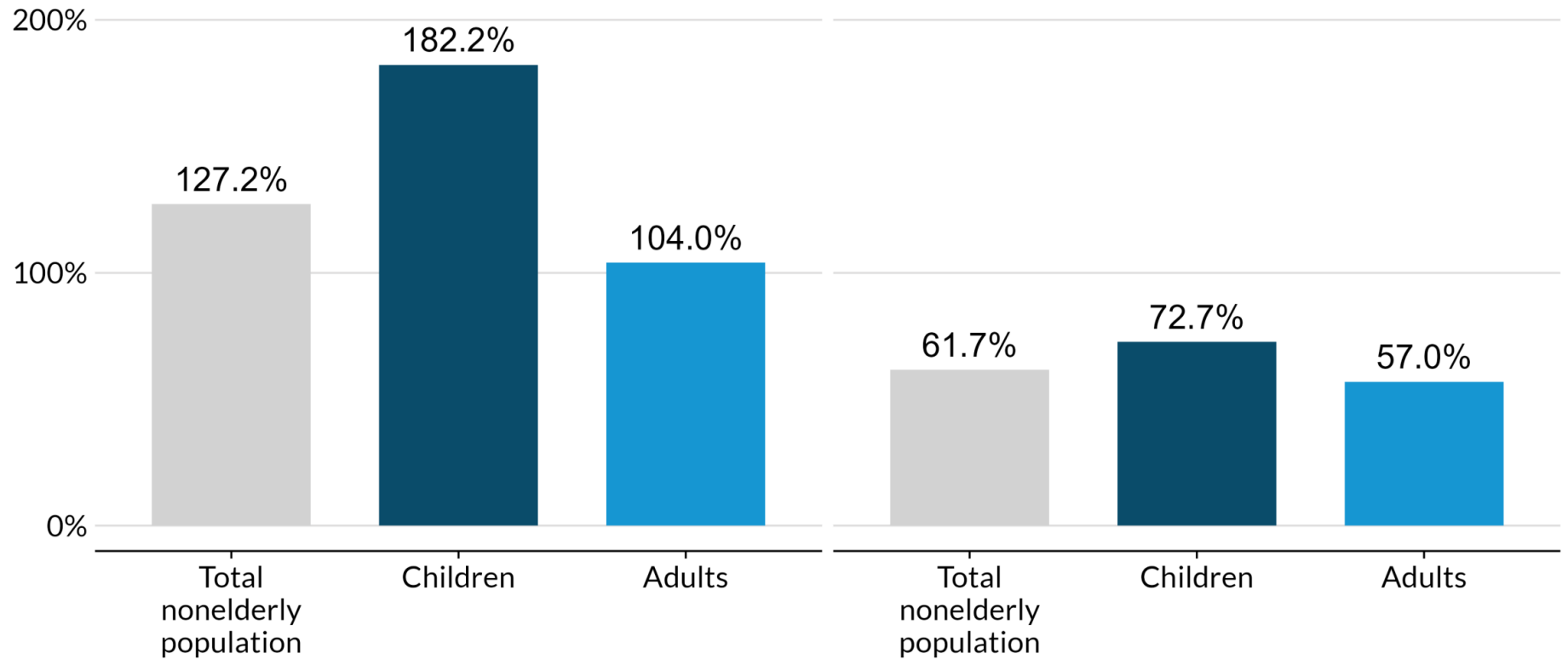
- Most states, including New York, planned to take 12-14 months, but six states planned to complete unwinding more quickly.
- Seventeen states, not including New York, identified people most likely to be ineligible and prioritized processing them.
- Section e 14 waivers: CMS allowed states to seek optional flexibilities to streamline the redetermination process during the unwinding
 - New York has 10 waivers; the average is 7.7.
 - 7 of New York's Waivers are designed to facilitate *ex parte* renewal. The average among all states is 4, and 41 states have fewer *ex parte* waivers.
 - 2 waivers are about updating contact information. Many states have a similar number, and states with 2 contact waivers have widely divergent disenrollment.
 - The remaining waiver extends the fair hearing timeframe.

State intentions for unwinding timeline vs. total net percentage of projected disenrollment

*Total net percentage of
projected disenrollment*

Timeline less than 12 months
(n=6)

Timeline 12 to 14 months
(n=42)

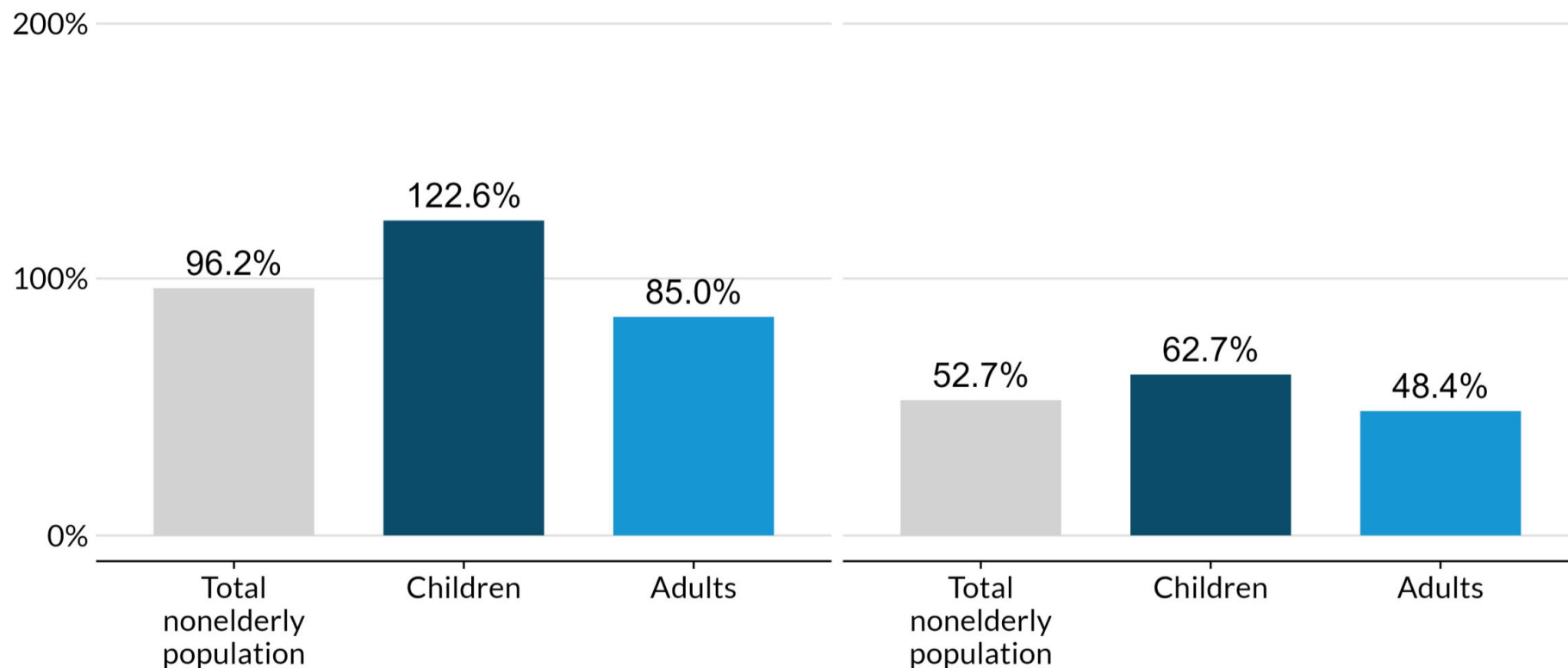


State prioritization of 'likely ineligible' vs. total net percentage of projected disenrollment

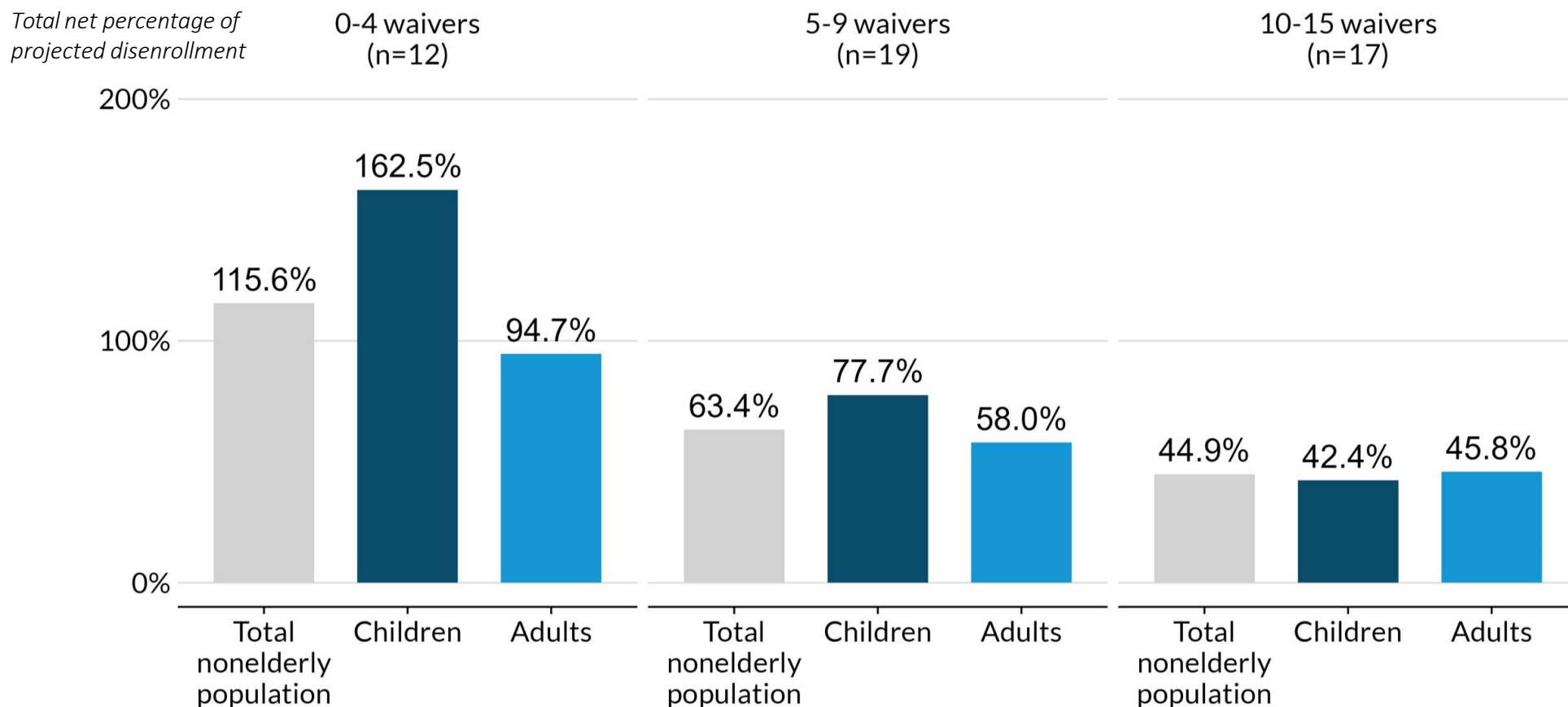
Total net percentage of
projected disenrollment

States prioritizing likely ineligible
(n=19)

States not prioritizing likely ineligible
(n=29)



Waiver intensity vs. total net percentage of projected disenrollment



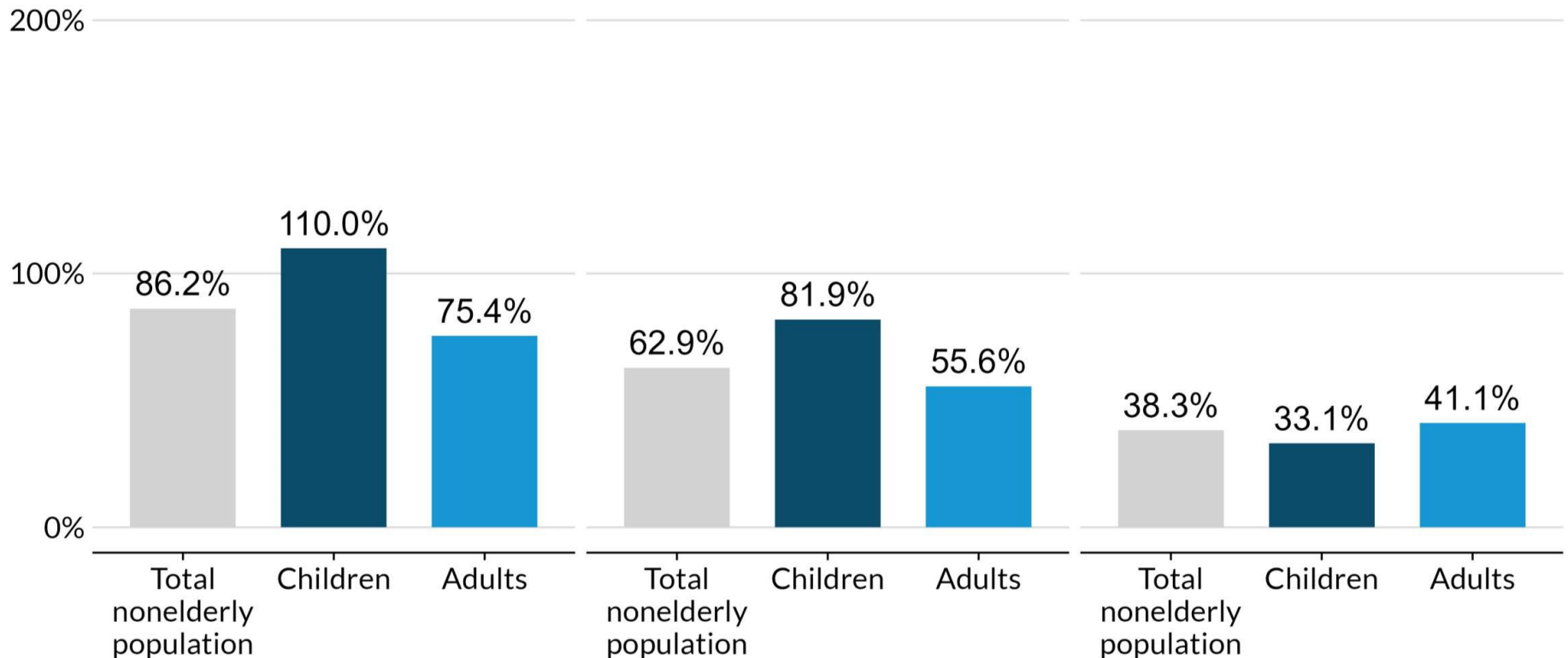
Ex-parte waiver intensity vs. total net percentage of projected disenrollment

Total net percentage of
projected disenrollment

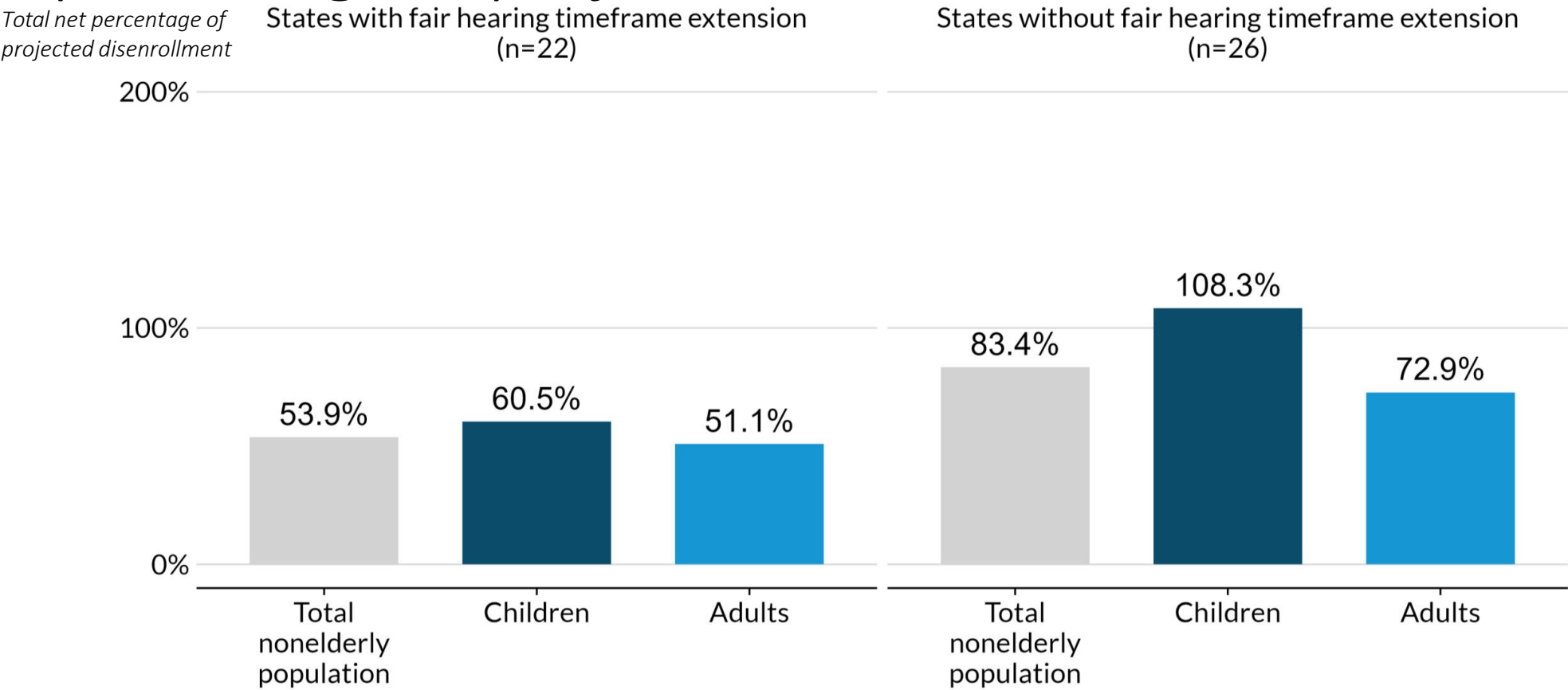
0-3 waivers
(n=25)

4-6 waivers
(n=13)

7-9 waivers
(n=10)



Fair hearing timeframe extension vs. total net percentage of projected disenrollment



Conclusions

- New York has the 10th lowest net disenrollment rate overall. Some states with lower rates either started disenrollment much later (Oregon) or announced major pauses in the process (North Carolina and Maine).
- New York has seen lower child net disenrollment than adult net disenrollment. This contrasts sharply with some other states that have seen disproportionately large child disenrollment.
- New York has sought and obtained more waivers than most states. In particular, New York's waivers have focused on the *ex parte* process, with the state having more *ex parte* waivers than 41 states. States with more of these waivers have notably lower net disenrollment on average than states with fewer waivers.

Next steps in our nationwide analysis

- Results will be periodically updated as more data become available.
- We are looking more closely at individual state decisions, particularly individual Section e 14 waivers.
- There is considerable interest from many states in making some of these waivers permanent. The impact of a permanent waiver may be larger than what has been seen during the unwinding, as there is greater incentive to invest in administrative improvements using federal matching funds. We plan future analysis of the potential impact of some key waivers.

LUNCH BREAK

Surviving the Unwinding Part IV:

Finishing Strong in the Home Stretch and
Preparing for the Future

May 21, 2024



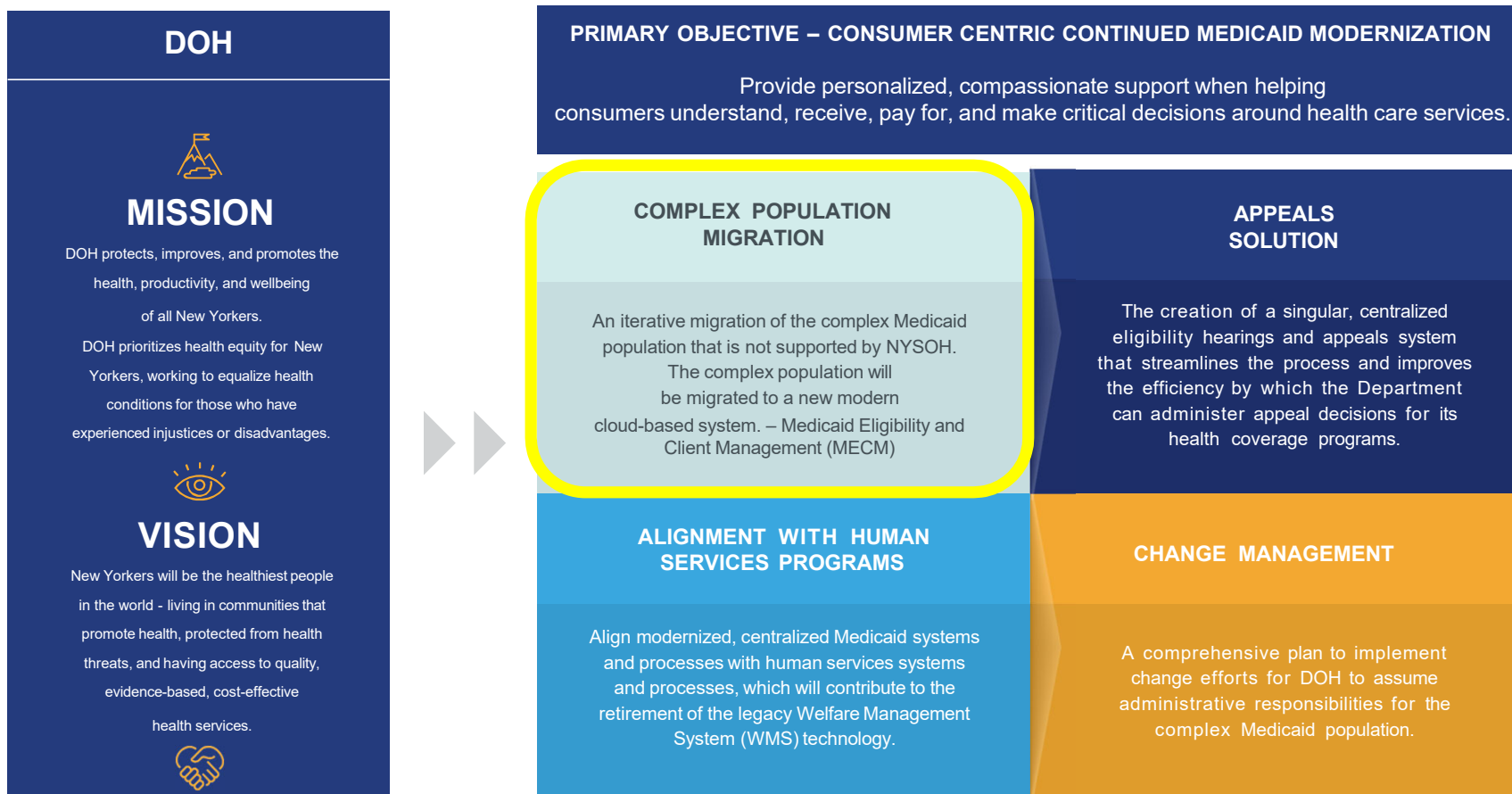
Update: Medicaid Eligibility Modernization Project

***Sara Oberst, Deputy Director,
Division of Eligibility &
Marketplace Integration, DOH***

Update: Medicaid Eligibility Modernization Project

Project Updates

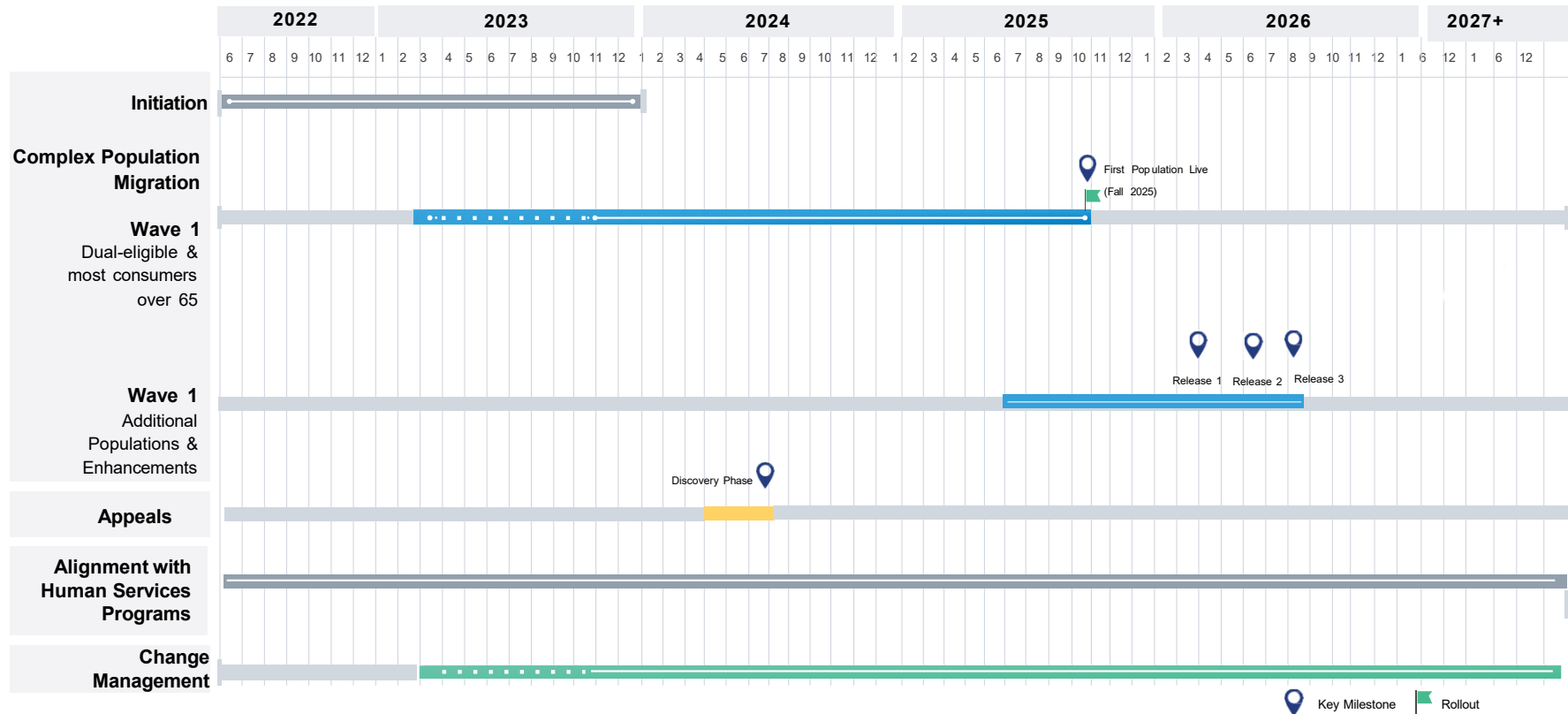
The continued modernization of Medicaid will further DOH's mission, vision, and values by enhancing the way New Yorkers access health care.



CONTINUING MEDICAID MODERNIZATION - ROADMAP*

The modernization of New York's Medicaid program began in 2023 and will continue until all Medicaid consumers are out of WMS. During this time, DOH will work with all parties to facilitate a smooth transition.

As of May 2024



*Dates are tentative pending completion of project initiation.

PRIMARY TRANSFORMATION OBJECTIVE → CONSUMER-CENTRICITY

Provide personalized, compassionate support when helping consumers understand, receive, pay for, and make critical decisions around health care services.



Department of Health

Update: Medicaid Eligibility Modernization Project

*Path to Achieving
Consumer Centricity*

Modernizing Personal Touch

- **Goal:** to continue to provide a personal experience members and applicants are familiar with when working with the LDSS while bringing populations into a modern, centralized system.
- Coalescing around strategies that build on the existing NYSOH model, align with goals of other human services programs, and leverage modern technology:
 - No Wrong Door/Warm Hand-off
 - Personalized Proactive Outreach
 - On Demand Individualized Support

No Wrong Door/Warm Hand-off

Definition:

- **No Wrong Door** describes the effort to provide an interoperable and consistent consumer experience and offer accurate, timely, and compassionate support for consumers seeking assistance through any channel.
- **Warm Handoffs** describe the seamless, real-time transitions of consumer information between systems and workforces to aid in receipt and retention of benefits.

Tenets:

- **Increase the number of channels** available for consumers seeking Medicaid benefits to **maximize enrollment** opportunities.
- Prioritize solutions/system features that enable consumers to relay case information only once and encourage proactive follow-up from workers to **reduce administrative burden**.
- Provide the same high-quality service and information regardless of the channel/door used to access support, preventing lapses and inconsistencies in service to consumers and delivering a **streamlined consumer experience every time**.
- Validate and acknowledge the successful transfer of relevant information, updates, and case details across entities to **encourage collaboration between stakeholders**.

Personalized Proactive Outreach

Definition:

- Personalized Proactive Outreach refers to the timely and specific outreach from the State to existing members through one or more mediums based on a consumer-specific need and/or at critical, predicted milestones throughout the Medicaid lifecycle with the goal of minimizing lapses in coverage.

Tenets:

- **Reduce administrative burden** for Medicaid workers by prioritizing system features that reduce worker tasks and consumer churn.
- **Capitalize on systems** ability to conduct outreach to consumers by digital channels first and adopt innovative tools and technologies (i.e., Chatbots, Gen AI, etc.) as outreach mechanisms.
- Conduct outreach in a manner that is culturally and linguistically appropriate, promotes equity, and meets the needs of consumers at their most critical moments in the Medicaid lifecycle to emphasize **consumer-centricity**.

On Demand Individualized Support

Definition:

- The commitment to providing immediate assistance (either from a human or technological perspective) at a consumers' time of need throughout any stage in the application or change/renewal process.

Tenets:

- Offer **easily accessible** healthcare services to all consumers that are tailored to individual consumer needs and preference.
- **Engage community organizations** and existing local support avenues to enhance a holistic experience for consumers seeking support.
- Use multiple avenues of communication to **educate and inform consumers** on available benefits and how they can find support (i.e., informational campaigns, workshops, one-on-one consultations).

NY MECM Focus Groups

Purpose: to better understand the opinions and preferences of Assistors and Consumers regarding the application and notices and to socialize new notice structure with advocates.

Plan:

- Post-design and pre-implementation
- ~12 total focus groups
 - 6 on application
 - 6 on notices
- Mixture of ROS and NYC locations
- First focus groups in fall 2024 (tentative)

Results: observations/feedback will be used to inform application screens and notice language where practicable

Innovative Application Features

Breadcrumbs show the applicant where they've been and where they are going

The screenshot shows the 'nystateofhealth' application interface. At the top, there's a header with the logo, 'SUPPORT & RESOURCES', 'LIVE HELP', language options ('ESPAÑOL', 'EN'), and a user profile 'ANNA GARDENER'. Below the header is a horizontal breadcrumb trail with steps: Start, Account Holder, People, Household Information, Tax, Income, Other Health Care, and Finish. The 'People' step is currently active. Below the trail, the section is titled 'People in Your Home'. There's a 'Back to Previous Page' link. Underneath, there are two tabs: 'People In Your Home' (selected) and 'Additional Details'. A message box states: 'Your income and family size help us decide which programs you qualify for. Please tell us about everyone in your family, even if they are not looking for health care coverage. Everyone does not have to live at the same address to apply on the same application. Be sure to tell us about:'. A user profile icon is visible in the bottom right corner.

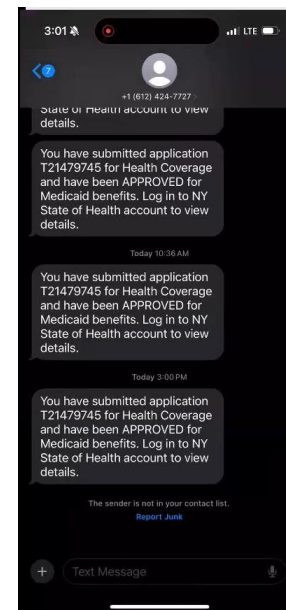
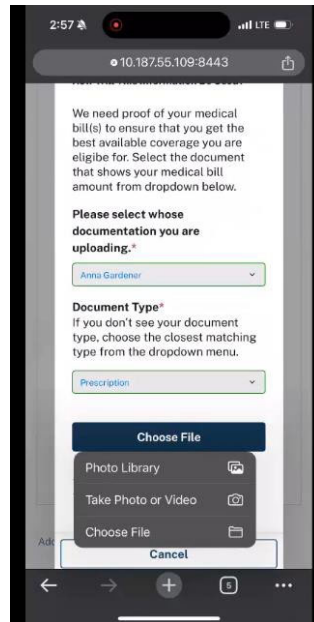
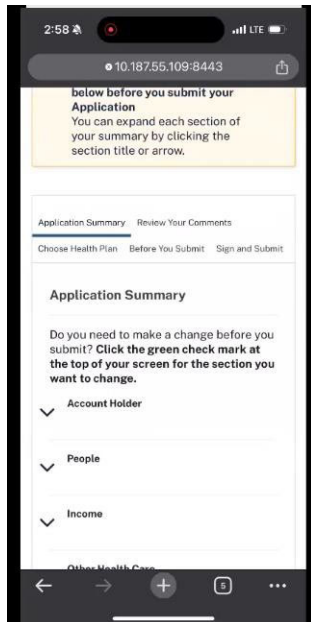
Nudges to ensure collection of accurate information to reduce documentation

The screenshot shows a section of the application with a table of employment information. Above the table, a message says: 'Take a look at the table below to make sure the information you entered is correct. Click Edit if you would like to make a change to any of the information displayed for a household member or if you need to add another record. Once you are satisfied that the information is correct, click Next. The information you provided will be used to determine what program you qualify for in MECM.' The table has columns: Name, Employer, Start Date, How Often, and Amount. It contains one row for 'Anna Gardener, 73 F' at 'Walmart' with a 'Monthly' payment of '\$130.00'. There are 'Edit' and 'Remove' links for this entry. Below the table is an 'Add Another Employment' button. At the bottom, there's a section for 'Add comments to your Application' with 'Save & Exit' and 'Next' buttons. A notification nudge (a light blue box with a bell icon) says: 'We found a difference with your Income information reported from an external agency. Please click 'Edit' to review & confirm your employment information.' Below the nudge, it says 'Walmart - \$500 Monthly'. A user profile icon is visible in the bottom right corner.

Name	Employer	Start Date	How Often	Amount
Anna Gardener, 73 F	Walmart		Monthly	\$130.00

Innovative Application Features Cont.

Device agnostic allowing applicants to apply on their phones and other devices



Questions & Answers

*All Panelists & Amanda
Lothrop, Medicaid Chief
Operating Officer, DOH*

Wrap up & Close

***Oxiris Barbot, MD, President &
CEO, UHF***

Acknowledgements

This event was hosted with support from Oxiris Barbot, Giovanna Braganza, Alex Brandes, Amy Lin, Peter Newell, Sharen Whitely Privetté, Sam Rios, Joey Rodriguez, Chad Shearer, and Alexis Simonetti of United Hospital Fund.

This event was hosted in collaboration with the New York State Department of Health. Special thanks to Gabrielle Armenia, Danielle Holahan, Amanda Lothrop, Sarah Oberst, and Sonia Sekhar at the Department.



Thank you for attending!

