



CABINET FOR HEALTH
AND FAMILY SERVICES

Public Health Emergency Unwinding Update

Monthly Stakeholder Meeting
May 2023

Renewal Caseload Planning

All individuals requiring renewal will be distributed across a 12-month period, based on the state's renewal distribution plan



May – June – July – August – September – October – November – December – January – February – March – April

Priority: May-October

Medicare-eligible population will be prioritized in the first 6 months to enroll in Medicare

Priority: June

Special circumstance population (over 14K beneficiaries) will be prioritized in June

Priority: July - ongoing

QHP-eligible population will be engaged starting June 2023 for the duration of the renewal process

May and June Priorities

Members 65+ transitions to Medicare

Follow up on cases without responses

Outreach to individuals eligible to enroll in QHP

Ongoing messaging and communications

Unwinding Baseline Data – April 8, 2023

Total beneficiaries enrolled in March 2023 **1,711,650**

Total pending applications received from March 2020 – March 2023 **2,438**

Total Medicaid fair hearings pending >90 days in March 2023 **575**

Renewal Cases Data Updates as of 5/15/23

May Renewals

**72,430 Medicaid Renewals
due 5/31/2023**

**49,500
Passive Cases**

**22,930 Active
Cases**

3,201 Active Renewals Completed for May

Determined Eligible	2,288
Transitioned to QHP/APTC	239
Eligibility Terminations	913

60% of cases were passively renewed in May

June Renewals

**73,019 Medicaid Renewals
due 6/30/2023**

**55,923
Passive Cases**

**17,096 Active
Cases**

444 Active Renewals Completed for June

Determined Eligible	363
Transitioned to QHP/APTC	33
Eligibility Terminations	81

52% of cases were passively renewed in June

Outreach to Medicaid Members as of 5/15/23

Outreach to Medicaid Members

40,026 active renewal notices mailed in total (May: 22,930 & June: 17,096)

44,997 passive renewal Requests for Information (RFI) mailed (May: 19,890 & June 25,107)

57,187 email messages sent relative to renewals



- **2,575 cases undeliverable by mail. All have been acted on.**
- **69k outreach calls have been conducted**
- **21,738 calls have been received related to renewals**

9,239 Alert Calls Made

9,457 Alert Messages Left

4,408 Contacts Led to Updates

20,423 Nudge Messages Left

*Alerts notify active renewal of upcoming renewal

*Nudges are sent when member response requires additional information or member has not responded


Reporting to CMS

May Data Report available on the KY PHE website:

<https://medicaidunwinding.ky.gov>

Also available:

- Baseline data report
- Monthly data update
- PHE Flexibilities Tracker
- February System Artifacts Report (and May update)
- February Renewal Redistribution Report

 Unwinding Monthly Report Report Refresh Date : 5/9/2023 9:00 AM		
FROM DATE: 04/01/2023		TO DATE: 04/30/2023
APPLICATION PROCESSING	NUMBER	STATE NOTES/ADDITIONAL
1. Total pending applications received between March 1, 2020 and the end of the month prior to the state's unwinding period (1a + 1b)	2,438	
1a. Pending MAGI and other non-disability applications (2a+3a)	1,995	Unduplicated count of individuals pending. Even if more than one type of assistance is pending the individual only contributes 1 to the total in this metric.
1b. Pending disability-related applications (2b+3b)	443	Unduplicated count of individuals pending. Even if more than one type of assistance is pending the individual only contributes 1 to the total in this metric.
2. Of those applications included in Monthly Metric 1, the total number of applications completed as of the last day of the reporting period (2a+2b)	1,856	
2a. Completed MAGI and other non-disability related applications as of the last day of the reporting period	1,522	Individuals will appear in metric 2 & 3 twice if they have a completed application for one Type of Assistance (TOA) and are pending eligibility for another Type of Assistance (TOA)
2b. Completed disability-related applications as of the last day of the reporting period	334	Individuals will appear in metric 2 & 3 twice if they have a completed application for one Type of Assistance (TOA) and are pending eligibility for another Type of Assistance (TOA)
3. Of those applications included in Monthly Metric 1, the total number of applications that remain pending as of the last day of the reporting period (3a+3b)	607	
3a. Pending MAGI and other non-disability applications as of the last day of the reporting period	492	Individuals will appear in metric 2 & 3 twice if they have a completed application for one Type of Assistance (TOA) and are pending eligibility for another Type of Assistance (TOA)
3b. Pending disability-related applications as of the last day of the reporting period	115	Individuals will appear in metric 2 & 3 twice if they have a completed application for one Type of Assistance (TOA) and are pending eligibility for another Type of Assistance (TOA)
RENEWALS INITIATED	NUMBER	STATE NOTES/ADDITIONAL
4. Total beneficiaries for whom a renewal was initiated in the reporting period	60,898	
RENEWALS AND OUTCOMES	DESCRIPTION OF STATE'S RENEWAL TIMELINE POLICY	
5. Total beneficiaries due for renewal in the reporting period (5a+5b+5c+5d)	0	
5a. Of the beneficiaries included in Metric 5, the number renewed and retained in Medicaid or CHIP (those who remained enrolled) [5a(1) + 5a(2)]	0	
5a(1) Number of beneficiaries renewed on an ex parte basis	0	
5a(2) Number of beneficiaries renewed using a pre-populated renewal form	0	
5b. Of the beneficiaries included in Metric 5, the number determined ineligible for Medicaid or CHIP (and transferred to Marketplace)	0	
5c. Of the beneficiaries included in Metric 5, the number terminated for procedural reasons	0	
5d. Of the beneficiaries included in Metric 5, the number whose renewal was not completed	0	
6. Month in which renewals due in the reporting month were initiated		
7. Number of beneficiaries due for a renewal since the beginning of the state's unwinding period whose renewal has not yet been completed	0	
MEDICAID FAIR HEARINGS	NUMBER	STATE NOTES/ADDITIONAL
8. Total number of Medicaid fair hearings pending more than 90 days at the end of the reporting period	562	

Renewals: How patients respond to a notice

Renewals: Need help?

There are
people in
your
community
who can
help you!

[kynector](#) or [licensed insurance agent](#) available online and by calling **1-855-4kynect** (1-855-459-6368)

If you're 65+ call the SHIP Hotline at (877) 293-7447 (**option #2**) or call DAIL at (502) 564-6930 and ask for a SHIP counselor to learn about Medicare options!

Check out Kentucky's website for all things Medicaid Renewals and PHE Unwinding!

<https://khbe.ky.gov/Enrollment/Pages/PHEUnwinding.aspx>

PHE Flexibilities

NOTE: HCBS Appendix K flexibilities do not end until November 11, 2023, six months after the end of the PHE

This is not a full list of all flexibilities. Please reference the [KY PHE Flexibility Tracker](#) for full information.

Ending May 11, 2023

- Suspension of provider revalidations
- Use of unlicensed facilities as alternative locations
- Hospital 20% add-on to DRG for COVID-19 diagnosis
- Nursing Facility \$270 per diem add-on
- Second Presumptive Eligibility (PE) period in CY

Extended through PHE Unwinding

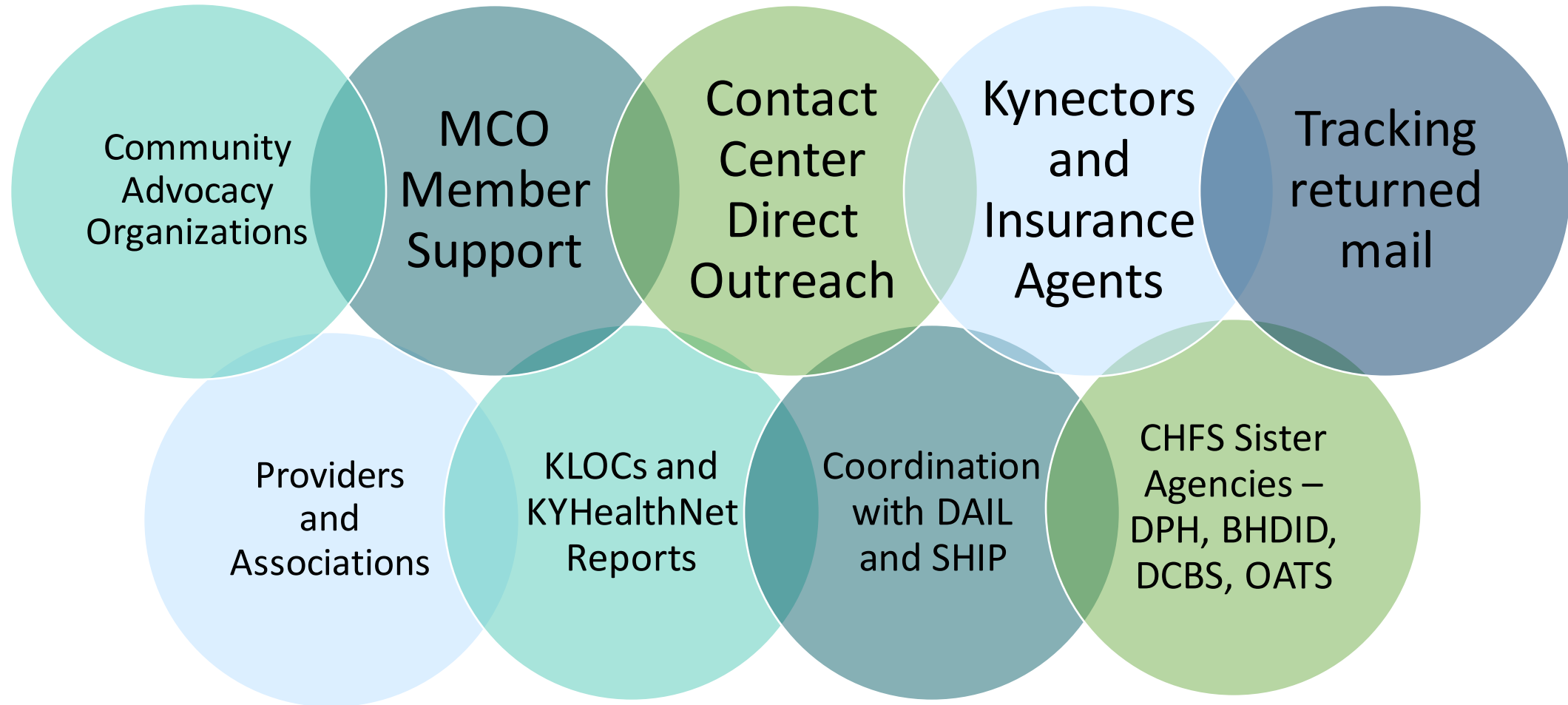
- LTC Resource disregard
- 90-day period to file an appeal and for the state to make a decision
- Telehealth audio-only
- Non-HIPAA platforms extended through 8/9/23*
- Re-enrollment of member MCO if within 120 days

Permanently Implemented

- Nurse Aide applicants use of I-9 instead of Social Security Card (907 KAR 1:250)
- Expanded telehealth (907 KAR 3:170)

**Following CMS guidance released on April 11, 2023, Office of Civil Rights is providing a 90-calendar day transition period for covered health care providers to come into compliance with the HIPAA Rules with respect to their provision of telehealth (begins May 12, 2023 and will end on August 9, 2023).*

Proactive Approaches to Help Members



Providers Supporting Patients Through Renewals

- Here is how to find your patient's renewal date in KYHealthNet.

KENTUCKY
CABINET FOR HEALTH AND FAMILY SERVICES
KY MEDICAL MANAGEMENT INFORMATION SYSTEM (KYNHIS)

Provider Home | Member | Claims | PA | Missed Appointments | Provider References | Trade Files | RA Viewer | Logout

Member Eligibility Verification

Friday 24 March 2023 07:55 am

Provider: [.....] - 282N00000X

Select Lookup Type: Member ID Lookup Service Type: Emergency Services
Family Planning
Health Plan Coverage

Member ID: [.....]

From Date: 03/24/2023 To Date: 03/31/2023

Verification No. 230830000C - 3/24/2023 Status: Active

Member

Current ID:	Last Name: L..	First Name:	Date of Birth: 09/27/1964
Previous IDs	Check Digit: 0	Gender: F	Date of Death:
SSN: [.....]	Phone Number: ()	County: 058 - Johnson	View Member's Mailing Address: here
Physical Address: 1833	City:	State: KY	ZipCode: [.....]
Hospice Election Date:	Medicare A:	Medicare B:	Medicare C:
Case Number:	Case Name:	Above FPL: N	Redetermination Date: 06/01/2023

Member's Authorized Representative

No Authorized Representative on file for current member.

Eligibility

[Eligibility 5 Year History](#)

Eligibility Group	Program Code	Program Status	From Date	To Date
KY Managed Care Organization with Cov.Den	D - Disabled indiv who rec CET	00 - Regular CET	03/24/2023	03/31/2023

How can I help my patients?

- ✓ Ask them to update their information in kynect by logging into kynect.ky.gov or calling 855-4kynect (855-459-6328)
- ✓ Remind them to watch for notices. Medicaid will contact them when it is their time to renew.
- ✓ If their renewal date is coming up, make sure they are aware.

Providers Supporting Patients Through Renewals

Waiver Participant & Provider Information

- [1915\(c\) HCBS COVID-19 and Appendix K FAQ](#)
- Kentucky Level of Care System (KLOCS) Report
 - Nursing facilities and intermediate care facility providers can access the Medicaid Renewal Report in [KLOCS](#).
 - See [the KLOCS Provider Medicaid Renewal Report Quick Reference Guide](#) to learn how to access a report of Medicaid Eligible Individuals who are due for renewal.

<https://www.chfs.ky.gov/agencies/dms/dca/Documents/COVIDAppendixKCombinedFAQ.pdf>

PROVIDER INFORMATION AND RESOURCES

Kentucky Level of Care System

What It Is

The Kentucky Level of Care System (KLOCS) electronic system streamlines and automates the current level-of-care paper process. KLOCS generates user tasks and notifications to enable all stakeholders to interact electronically in level-of-care application, review and approval processes.

Starting Aug. 3, 2020, all nursing facility providers, institutionalized hospice service providers and ICF/IID providers are required to use KLOCS. **Please Note:** KLOCS does not impact ancillary services. Those processes remain the same.

The following changes take effect Aug. 3, 2020:

- Applications will be submitted and tracked using an online self-service portal.
- Level-of-care requests and discharges will be initiated electronically. This process automatically routes requests to the appropriate KLOCS personnel for review and completion of determinations.
- Providers will receive automatic task notifications and reminders to submit requested information

Documentation

Providers/Facilities

- KLOCS Telehealth Frequently Asked Questions [🔗](#)
- KLOCS Provider Telehealth Quick Reference Guide [🔗](#)
- KLOCS Backdating and Correcting LOCs [🔗](#)
- KLOCS Provider Webinar Part 1 presentation [🔗](#)
- KLOCS Provider Part 2 presentation [🔗](#)
- NF Hospice ICF Guide [🔗](#)
- KLOCS Part 1 Provider Webinar recording [🔗](#)
- KLOCS Part 2 Provider Webinar recording [🔗](#)
- Part One Provider Webinar FAQs [🔗](#)
- KLOCS Common Scenarios and Quick Reference Guide [🔗](#)
- KLOCS Medicaid Renewal Report QRG [🔗](#)

KY PHE Website Resources

<https://medicaidunwinding.ky.gov>



During the COVID-19 Public Health Emergency (PHE), the Kentucky Department for Medicaid Services (DMS) made sure that all Medicaid beneficiaries kept their coverage. DMS stopped all annual renewals. But soon, DMS will begin annual renewals for Medicaid members. You may be at risk of losing Medicaid coverage if we cannot reach you. You should update your contact information as soon as possible and keep it updated so Kentucky Medicaid is able to reach you when it is your time to renew!

Please update your information as soon as possible!

Visit kynect.ky.gov or call kynect at 855-4kynect (855-459-6328) to update your mailing address, phone number, email and other contact information.

Kentucky Medicaid will then be able to reach you when it is your time to renew!

<https://khbe.ky.gov>

Kentucky PHE Plans and Reports

Through the PHE Unwinding, Kentucky will be prioritizing transparency across all operations and progress through the unwinding. The following materials will provide insight to all operational plans and up-to-date information on our progress through the 12-month unwinding period. Additional reports will be added to this section as they are available.

- [Kentucky Unwinding Approach March 2023](#)
- [Kentucky PHE Flexibilities Tracker](#)
- [Renewal Redistribution Report](#)
- [System Artifact Report](#)

Communications Materials

If you should need any materials to share with your customers or partners, please feel free to leverage the following resources, developed and approved by Kentucky Medicaid.

- [Member Information Brief](#) [español](#)
- [Member Renewals Information](#) [español](#)
- [Provider Information Brief](#)
- [Alternative Coverage Options](#) [español](#)
- [Qualified Health Plan \(QHP\)](#) [español](#)
- [Medicare Enrollment \(Members\)](#) [español](#)
- [Medicare Enrollment \(Provider\)](#)
- [How to Access Your Renewal Date](#)
- [How to Access Your Patient's Renewal Date](#)
- [KY PHE Renewal Pathway Brief](#)
- [Provider Renewals Guidance Document](#)

Stakeholder Session Information

KY PHE Reports

FAQs

Medicaid Member Information

Medicaid Provider Information

Communication Materials

Stakeholder Sessions

In March, DMS hosted Stakeholder Engagement meetings to provide information about the PHE Unwinding and Medicaid renewals. You can find the materials from those sessions here:

- [Presentation Recording - KY PHE Stakeholder Engagement Meeting Recording March - YouTube](#)
- [Presentation Slides](#)
- [Kentucky Unwinding Stakeholder Frequently Asked Questions Document](#)

To help support Medicaid partners, DMS is holding virtual stakeholder forums.



Please join us for the [Monthly Stakeholder Meeting](#) every third Thursday at 11:00 am ET.

If you have any questions for DMS that you would like for us to speak to during the upcoming monthly meeting, please submit those questions through this [survey](#). Thank you!

In addition, Thursday, April 20th we will be hosting a Provider Informational session on Medicaid Renewals and the PHE unwinding. Please [register for the event](#) to learn about updates specific to providers and hear answers to some of your questions!

How to stay informed...

CHFS Social
Media





Questions