

CABINET FOR HEALTH AND FAMILY SERVICES

Medicaid Monthly Virtual
Meeting
Aug. 21, 2025



# Agenda

- Welcome/Introduction
- Medicaid Renewals
- 1915(c) Community Health for Improved Lives and Development (CHILD) Waiver
- 1915(i) RISE
- Reentry Status Update
- Kentucky Medicaid Self-Measured Blood Pressure Cuffs
- Our Healthy Kentucky Home Spotlight Smoking/Vaping
   Prevention & Cessation
- House Resolution 1 (119<sup>th</sup> Congress)

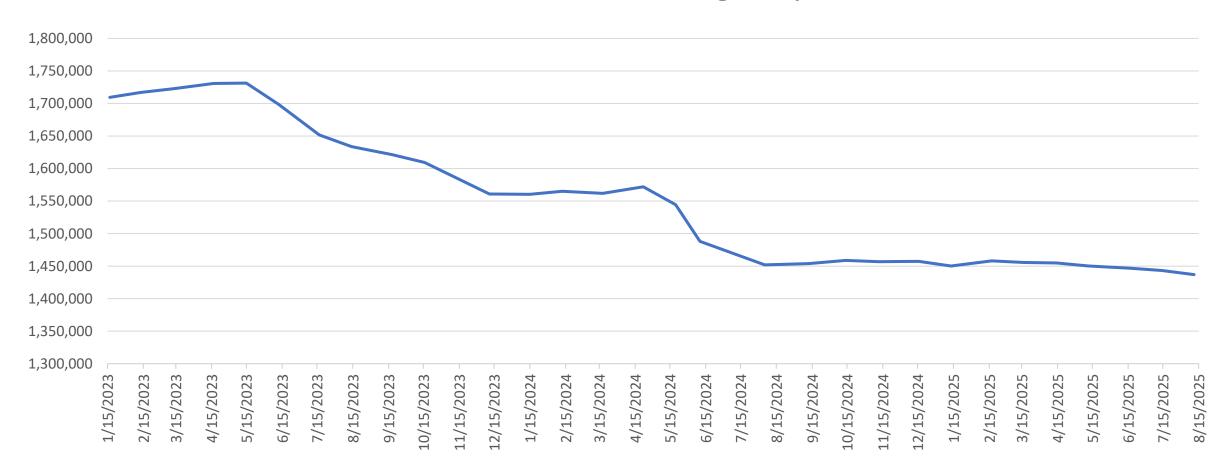


# Medicaid Renewals



### Medicaid Enrollment Trend

Medicaid Enrollment: Jan 2023 through July 2025 Renewals





# KY Medicaid July Renewals\*

	Individual Renewals	Medicaid Approvals	Medicaid Terminations	Pending	Extended
July	48,216	42,860	4,944	412	0

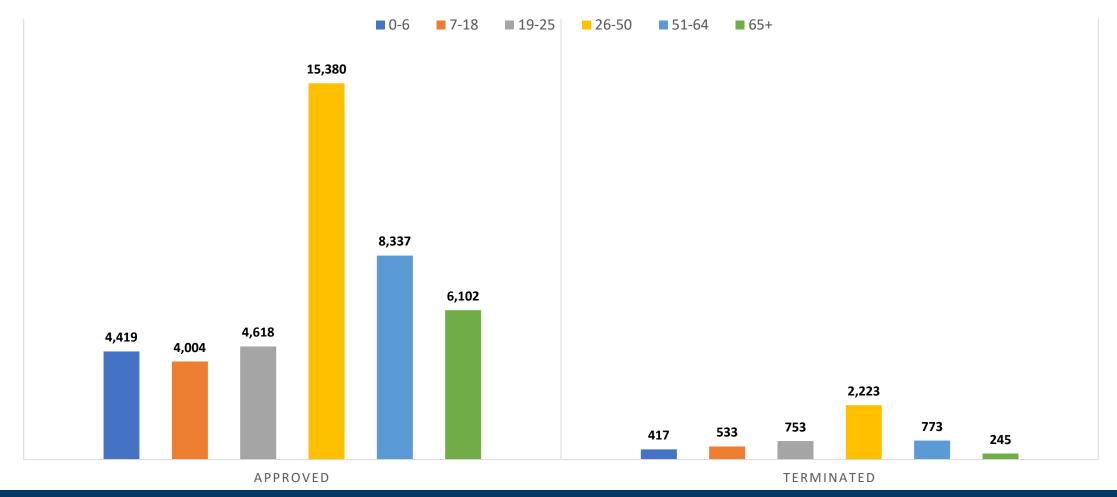
First month of renewals without the COVID-19 Public Health Emergency unwinding flexibilities!



<sup>\*</sup>Numbers are based on CMS Report posted at <a href="https://medicaidrenewals.ky.gov">https://medicaidrenewals.ky.gov</a>

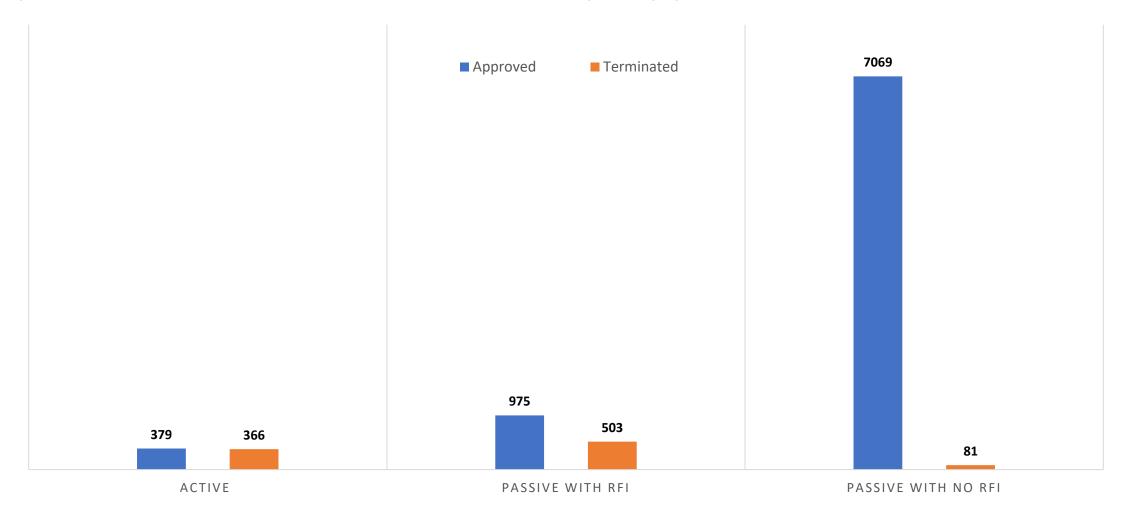
# July Renewals By Age

For age groups "0 to 6" and "7 to 18" there were 8,423 approvals and 950 terminations.





# July 2025 Child Renewals by Type





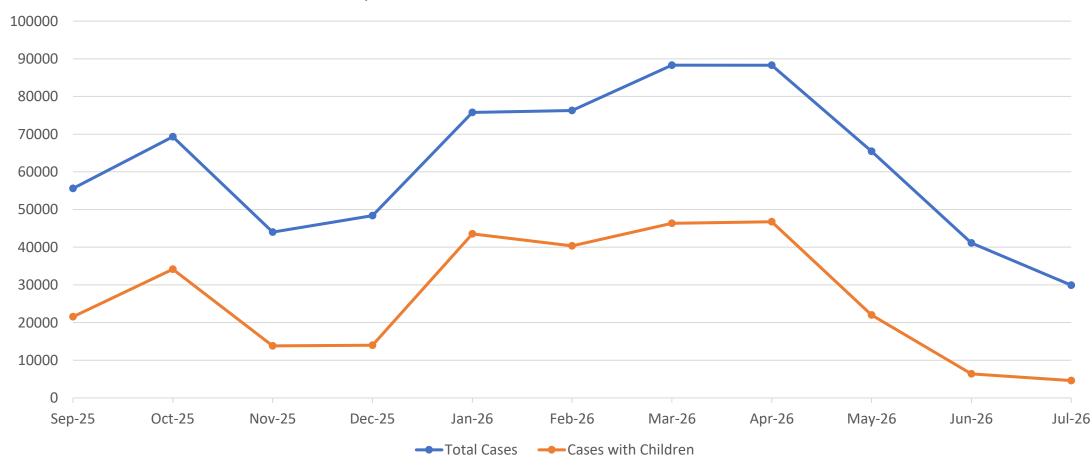
# July 2025 Child Terminations by Reason

(	Children's July Terminations
Failure to	Return Form
0-6	244
7-18	371
Total	619
Ineligible	for Benefits
0-6	74
7-18	123
Total	197
Other Rea	son "Null, Client Request"
0-6	98
7-18	40



# 12-Month Projected Renewal Caseload

Anticipated Renewal Count Over Next 12 Months





# Stay Covered: Renew Your Medicaid!



Every 12 months Medicaid members will go through a renewal process to make sure they are still eligible for coverage. Keep your information updated!



A renewal notice is sent at least **45 days before** the due date with instructions and a deadline to submit required information. A reminder is sent about **15 days** before due date.



You can check your renewal month by logging into the Kynect portal or calling the Kynect line. kynect.ky.gov or call 855-4kynect (855-459-6328). Providers also have access to the renewal date in KYHealthNet.



Send in requested information **right away to avoid losing coverage**! If coverage is terminated, reach out within 90 days to submit information to **reactivate** the case. If outside the 90 days will need to **reapply**.



# Outreach Strategies and Support

#### **State Outreach**

- Communications are sent by mail, email, phone, and text according to each family's scheduled renewal month.
- Aim to prompt timely responses from families to avoid coverage loss.

# Managed Care Organization Outreach

- Welcome letters and handbooks mailed shortly after enrollment.
- Follow-up calls and texts for renewals, gaps in coverage, or missing documents.
- Educational materials and reminders provided throughout the year to support member engagement.

# **Community-Based Support Channels**

#### **Kynectors**

- Certified assistants via kynect
- Help families apply, renew, and navigate Medicaid, KCHIP, and other benefits

### FRYSCs (Family Resource & Youth Services Centers)

- School-based centers supporting families with non-academic needs
- Assist with Medicaid applications, referrals, and outreach to eligible families

You can get help anytime!

Contact a local health coverage navigator at kynect.ky.gov or call 855-4kynect (855-459-6328)



# Help us get the message out! Communications materials available to support members!

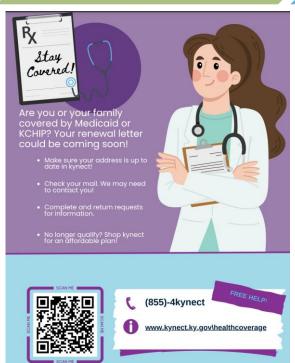
How to Apply

Materials for Offices

Get help from kynectors

Renewals









kynect

# Spread the word about Renewals for Children too! Materials are available to help families stay in the know!

Renewing Child Coverage Health Coverage Options

Get help from kynectors

Use kynect







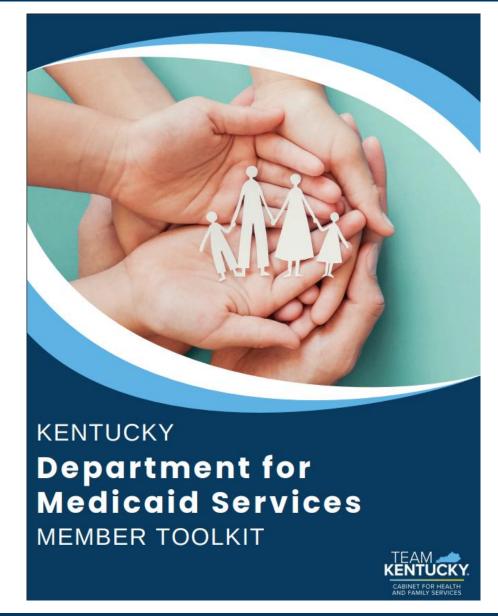




# Medicaid Member Toolkit Available on the DMS Member Website!

Available here

https://www.chfs.ky.gov/agencies/dms/member/ Pages/default.aspx





### KY Medicaid Website Resources

https://medicaidrenewals.ky.gov



Monthly Forum Session Information

**KY Reports** 

**FAQs** 

**Medicaid Member Information** 

Medicaid Provider Information

**Communication Materials** 

#### **Kentucky Plans and Reports**

Kentucky prioritizes transparency across all operations and progress related to renewals. The following materials include up-to-date information on renewals as they are reported to the Center for Medicare and Medicaid Services. Additional reports will be added to this section as they are available.

#### Most Recent CMS Monthly Data Reports

Kentucky Monthly Data Report - March 2025 Reporting Period - Updated

• March Data Demographic Report

Kentucky Monthly Data Report - July 2025 Reporting Period

• July Data Demographic Report

#### Past Monthly Reports

If you would like to review past plans, information, and reports from the public health emergency (PHE) unwinding, you can visit that website here: <a href="https://medicaidunwinding.ky.gov">https://medicaidunwinding.ky.gov</a>

#### **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.

**Child Renewals Information Packet** 

Child Renewals Materials – Renew Coverage

Child Renewals Materials - Sign Up on kynect

Child Renewals Materials – Get Help

Child Renewals Materials - Alternative Options

KHCIP Enrollment

Get Ready to Renew!

Find Your Local DCBS Office!

kynectors Can Help!

How Do I Apply for Medicaid?

kynect Qualified Health Plan (QHP)

#### Medicaid Monthly Virtual Forums

To help support Medicaid partners, DMS holds virtual Medicaid forums. These monthly meetings to provide information about Medicaid renewals and other program updates. You can find the materials from those sessions here:

July Virtual Forum Recording



July Presentation Slides



### **State Based Marketplace Updates**

#### H.R.1

 Outreach to immigrants who are not eligible for Medicaid based on immigration status and have income below 100% Federal Poverty Level who will no longer be eligible for APTC tax credits.

#### **Enhanced Tax Credits**

- New educational tab and fact sheet on the KHBE website.
- Renewed push to emphasize the value of obtaining, using, and keeping health insurance even if/when monthly contribution toward premiums rise.

#### Plan Year 2026

- Reminder that Open Enrollment with be November 1, 2025 through January 15, 2026 with no changes to passive renewals/auto re-enrollment.
- Plan certification activities have begun, and we will know more about rates and specific plans as the month progresses.
- There will be many more plans that are HSA compatible.

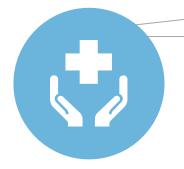


# 1915(c) Community Health for Improved Lives and Development (CHILD) Waiver



### **Families First**

A comprehensive, multi-year initiative aimed at enhancing the existing system of care for all Kentucky children and youth.



#### SHINE KY

Enhancing access to and delivery of school-based services for Medicaid and CHIP-eligible and enrolled students.



#### **KY CARES**

Services to support community reentry and improve care transitions for justice-involved youth.



#### **CHI Mapping Tool**

Tracking and reporting of children's health initiatives.



#### **Funding Modernization**

Restructuring of Medicaid payment for medically necessary treatment services.



#### High Needs Service Delivery

The 1915c CHILD Waiver is designed to meet the child-centric care, support services, housing, custody and placement, and other health-related social needs.



# Plan for a SPA to locate appropriate resources and housing for children and youth in need of placement and services.



## What is the 1915(c) CHILD Waiver?

# Community Health for Improved Lives and Development (CHILD)

The CHILD Waiver is a new Kentucky Medicaid program designed to help Kentucky children and youth with significant behavioral health or developmental challenges get the services they need, while staying at home, in school, and in their communities.

**Anticipated January 2026** 

# Serving Children & Youth with Most Complex Needs

- Focused for children and youth stepping out of acute psychiatric inpatient care or at risk of out-of-home placement due requiring intensive behavioral health and residential supports.
- CHILD waiver includes clinical therapeutic services designed to foster a step-down approach, coming from the highest level of care in order to return to home and the community.



# Who the 1915(c) CHILD Waiver Helps?

#### Children and Youth

- Under age 21
- With significant behavioral health or developmental needs
- Kentucky children and youth who:
  - Need a level of care similar to what would be provided in a psychiatric inpatient facility, intermediate care facility for individuals with intellectual disabilities (ICF/IID), or hospital.
  - Can be safely supported at home or in the community with the right services



## **Status and Next Steps**

- KY Public Comment period has been completed.
- Responses to comments were compiled, reviewed, and approved.
- Submission to CMS occurred 8.20.25.
- Responses to comments have been posted to our website.
- Draft regulations have been completed for internal review.
  - 907 KAR 2.720 Program Policy
  - 907 KAR 2.725 Reimbursement Provisions and Requirements
  - CHFS continues to develop systems and procedures for operations and implementation.



# 1915(i) RISE



# 1915(i) RISE

- 1915(i) State Plan Home and Community Based Program
  - Eligibility: 18 years old or older.
  - Primary Diagnosis of Serious Mental Illness.
  - Active Medicaid at 150% federal poverty level or below.
  - Require a minimum of two functional domain needs
- 10 services in the benefit.
  - 1. Assistive Technology
  - 2. Case Management
  - 3. Housing and Tenancy Supports
  - 4. In-Home Independent Living Supports
  - 5. Medication Management

- 6. Planned Respite for Caregivers
- 7. Supervised Residential Care
- 8. Supported Education
- 9. Supported Employment
- 10. Transportation



# 1915(i) Update

- Provider Go-Live 7/1/25
- 1915(i) Webinar 7/22/25
- Hosting "Office Hours" for provider questions on certification and onboarding. Monday's and Wednesday's at 3pm. Check <a href="https://dbhdid.ky.gov/1915iriseinitiative">https://dbhdid.ky.gov/1915iriseinitiative</a> for more information soon.
- Provider email <u>1915iriseprovider@ky.gov</u>
- General email <u>1915iriseinitiative@ky.gov</u>



# Reentry Status Update



### 1115 Reentry Program

Eligibility	Settings	Services
All adults and youth     who would be eligible     for Medicaid if not for     their incarceration.	<ul> <li>Department of Corrections (DOC) State Prisons.</li> <li>Department of Juvenile Justice (DJJ) Youth Development Centers (YDCs).</li> </ul>	<ul> <li>Case management 60 days prior to release and 12 months post-release.</li> <li>Medication-assisted treatment (MAT) with counseling for individuals diagnosed with a substance use disorder (SUD) 60 days prior to release.</li> <li>30-day supply of all clinically-required prescription medication and, if applicable, an order for durable medical equipment (DME) immediately upon release.</li> </ul>

#### **Program Updates:**

- Monitoring protocols have been approved.
- Systems deployment for the future state is currently in progress.
- The DOC and DJJ have been successfully enrolled with Medicaid under Provider Type 53 Reentry Organization. The next steps include contracting with managed care organizations (MCOs).
- Program design for the delivery of pre-release services is ongoing, including work group discussions with the DOC, DJJ, the Department for Community Based Services (DCBS), and MCO partners.



## **Consolidated Appropriations Act (CAA) Section 5121**

Eligibility	Settings	Services
<ul> <li>Youth who are Medicaid eligible at incarceration or found Medicaid eligible during placement.</li> <li>Under 21 or Former Foster Care FFC, age 18-26.</li> </ul>	<ul><li>DOC State Prisons.</li><li>DJJ YDCs.</li></ul>	<ul> <li>Screening and diagnostic services, including medical, dental, vision, and behavioral health screenings or diagnostic services 30-days prior to release.</li> <li>Targeted Case Management (TCM) 30 days prior to release and for at least 30 days after release.</li> </ul>

#### **Program Updates:**

- The State Plan Amendment (SPA) has been approved for CAA Targeted Case Management (TCM), and for Screening and Diagnostic Services.
- The Alternative Benefit Plan (ABP) SPA is currently in progress.
- The CAA Grant has been awarded, with the state kick-off call scheduled for August.



# Kentucky Medicaid Self-Measured Blood Pressure Cuffs



# Kentucky Medicaid Provider



- For Kentucky Medicaid members the first step in obtaining a blood pressure cuff is seeing a Kentucky Medicaid Provider
- A Medicaid enrolled clinician will determine medical necessity for a blood pressure cuff.
- The following clinicians may sign an order for a blood pressure cuff or monitor:
  - Physician
  - Physician Assistant
  - Advanced Practice Registered Nurse



### Clinician Orders



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- Members admitted in a hospital setting will have order filled by the hospital and education on usage done by hospital.
- All other orders are sent to a Medical Supplies, Equipment, and Appliances (MSEA) provider.



# Medical Supplies, Equipment, and Appliances (MSEA) Provider

- Clinician's orders are sent or taken to a Medical Supplies, Equipment, and Appliances (MSEA) Provider
- Traditional/Fee for Service Medicaid members are referred to an MSEA provider by the clinician or they may find their own at:

#### https://medicaidsystems.ky.gov/providerdirectory/pdsearch.aspx

 Managed Care Members (MCO) are referred to an MSEA provider by the clinician or they may find their own using their MCO service website or phone number.



# MSEA Filling Order



- The MSEA provider usually fills the same day if they are in stock.
- The member can pick up monitor and cuff and some MSEA suppliers deliver.
- The MSEA suppliers can also educate the member on how to use the blood pressure monitors.
- Most pharmacies are MSEA providers.



### What Devices are Covered

- A4660- SPHYGMOMANOMETER/BLOOD PRESSURE APPARATUS WITH CUFF AND STETHOSCOPE
- A4663- DIALYSIS BLOOD PRESSURE CUFF BLOOD PRESSURE CUFF ONLY
- A4670- AUTOMATIC BLOOD PRESSURE MONITOR

 No prior authorizations are required for any blood pressure cuff or monitor.



# **Blood Pressure Monitoring**



- The Kentucky
   Department for
   Medicaid Services also
   covers:
- Remote patient monitoring; and
- Patient education



# Guides to obtaining and billing blood pressure cuffs

- The Department for Medicaid Services and the Department for Public Health created the following guides for Medicaid members and providers:
  - Kentucky Medicaid Program Coverage Update: Guide to utilizing Self-Measured Blood Pressure (SMBP) benefits
  - Kentucky Medicaid SMBP Overview by Managed Care Organization Overview
- These guides can be found at: https://www.chfs.ky.gov/agencies/dms/dpo/Pages/default.aspx



# Questions?

For any further questions please email us at:

DivisionofHealthCarePolicy@ky.gov

Thank You!



# Our Healthy Kentucky Home Spotlight – Smoking/Vaping Prevention & Cessation



### Our Healthy Kentucky Home

- During the month of August, Our Healthy Kentucky Home focuses on preventing and treating tobacco use, including smoking, vaping, using dip and other tobacco products.
- Smoking and secondhand smoke exposure cause over 480,000 deaths in the U.S. each year
- Smoking harms nearly every organ of the body and causes many diseases
- Both smoking and vaping can increase your risk of heart disease, cancer, diabetes, stroke, and other health problems. By incorporating modest changes into your daily routine, you can begin your journey to a healthier, tobacco-free you



### In 2022...



MORE THAN

16 MILLION

Americans had at least one disease caused by smoking



MORE THAN
20%

OF KENTUCKY HIGH

OF KENTUCKY HIGH SCHOOL STUDENTS reported vaping MORE THAN

17%

reported that they were current cigarette smokers



1.



Prevent initiation of tobacco use especially among youth and young adults

2.



Promote cessation and assist tobacco users to quit

3.



Protect people from secondhand smoke



# Preventing tobacco product use among youth is critical

Tobacco product use is started and established primarily during adolescence.

Nearly 9 out of 10 adults who smoke cigarettes daily first try smoking by age 18.

In 2024, approximately two in five students who had ever used a tobacco product currently used them.

Flavorings in tobacco products can make them more appealing to youth. In the United States in 2024:

- 88.2% of high school students and 85.7% of middle school students who used e-cigarettes in the past 30 days reported using a flavored e-cigarette during that time.
- 86.1% of high school students and 85.4% of middle school students who used nicotine pouches in the past 30 days reported using flavored pouches during that time



## E-Cigarettes: Myth vs Reality

#### Myth:

E-cigarettes produce a harmless water vapor.

#### Reality:

E-cigarettes produce an aerosol that has nicotine and toxins known to cause cancer.

These toxic chemicals include things like benzene, lead, and nickel, some of the same products found in tobacco products. The chemical diacetyl, found in many e-cigarette flavors, is linked to serious lung disease.

#### Myth:

E-cigarettes can help people quit tobacco.

#### Reality:

E-cigarettes are not approved by the FDA to help people quit tobacco.

In fact, e-cigarette use among youth and young adults is strongly linked to the use of other tobacco products, such as traditional cigarettes, cigars, and smokeless tobacco.



## E-Cigarettes: Myth vs Reality

#### Myth:

E-cigarettes are safe.

#### Reality:

E-cigarettes are not a risk-free product. They contain nicotine and low levels of toxins and chemicals.

E-cigarettes are especially dangerous for teens, whose brains are still developing.

Teens who use e-cigarettes are at risk for nicotine addiction, mood disorders, difficulty paying attention, reduced impulse control, and learning problems.

#### Myth:

E-cigarettes are not addictive.

#### Reality:

Nicotine is a highly addictive drug. Nicotine is the main ingredient in most e-cigarette liquids.

#### Myth:

Big Tobacco doesn't make e-cigarettes.

#### Reality:

All major tobacco companies now make ecigarettes. In fact, the maker of Marlboro cigarettes just bought a 35% share in JUUL





MY LIFE MY QUIT

Free, confidential help to quit vaping, smoking or chewing for teens!

Text "**Start My Quit**" to 36072 or call 855-891-9989.





## Benefits of Quitting Smoking

After 6 hours	your heart rate slows
After 12 hours	your body is free of nicotine
After 2 days	your sense of taste and smell improves and your breath, clothes and house will smell fresher
After 1 month	your blood pressure improves and your immune system begins to recover
After 2 months	Your circulation improves, you will have more energy and your fingers and toes will stay warmer
After 2 months	your risk of heart attack begins to reduce
After 12 months	your blood pressure returns to normal
After 10 years	you have halved your risk of developing lung cancer compared to someone who continues to smoke
After 15 years	your chance of suffering a heart attack or stroke is the same as that of a non-smoker





# 2 Servings of Fruits and Veggies a day!

- Carrot sticks
- Berries
- Apples
- Bananas
- Cut broccoli and cauliflower
- Cherry Tomatoes





FIGHT CRAVINGS WITH EXERCISE



Decrease cravings



Cope with stress



Strengthen heart and lungs

TO LEARN MORE VISIT: Our Healthy KYHome.ky.gov







# BUILD YOUR SMOKEFREE TEAM

Surrounding yourself with positive support can make it easier to quit.

TO LEARN MORE VISIT:

OurHealthyKYHome.ky.gov







# QUIT-SMOKING MEDICATIONS

AT NO COST TO YOU

Do you want to quit smoking? You may qualify to receive quitsmoking medications and services at no cost to you. Talk to your health care provider today!







### Secondhand Smoke

The effects of secondhand smoke exposure on the body are immediate

Since 1964, about 2,500,000
people who *did not smoke* died
from health problems caused
by secondhand smoke
exposure

In adults who do not smoke, secondhand smoke exposure can cause coronary heart disease, stroke, lung cancer, and other diseases. It can also result in premature death

Secondhand smoke can cause adverse reproductive health effects in women, including low birth weight

In children, secondhand smoke exposure can cause respiratory infections, ear infections, and asthma attacks. In babies, secondhand smoke can cause sudden infant death syndrome (SIDS)

Secondhand smoke exposure
can produce harmful
inflammatory and respiratory
effects within 60 minutes of
exposure which can last for at
least three hours after exposure



HEALTHY HABITS
TO IMPROVE YOUR HEALTH







**EAT** Healthy Foods **EXERCISE R**egularly

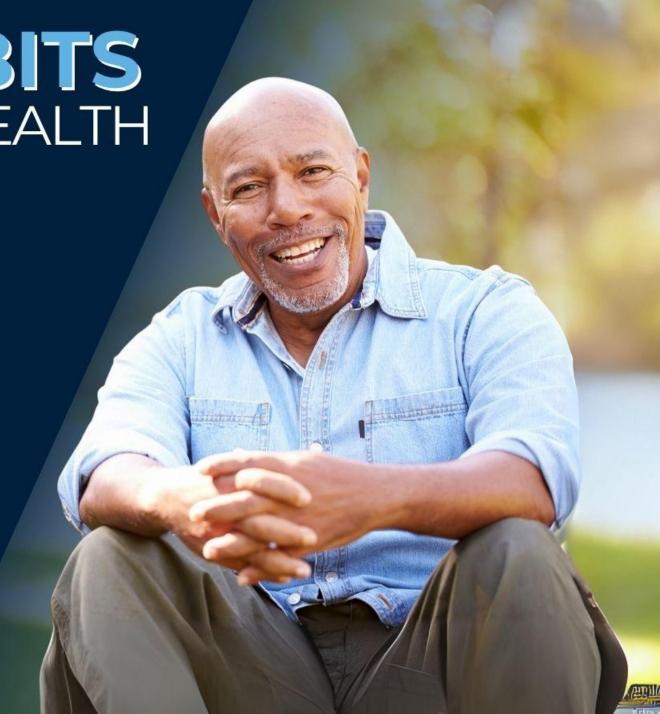
**ENGAGE**With Others

#### TO LEARN MORE VISIT:

OurHealthyKYHome.ky.gov







### Helpful websites:

- OurHealthyKyHome.ky.gov
- www.quitnowkentucky.org
- www.mylifemyquit.com
- Smokefree.gov
- Tobacco Prevention and Cessation Program - Cabinet for Health and Family Services





# House Resolution 1 (119<sup>th</sup> Congress)



House Resolution 1 (119<sup>th</sup> Congress)

- On July 4, 2025, House Resolution (H.R.) 1 –
   One Big Beautiful Bill Act (OBBA) was signed into law.
- The final version of H.R.1 maintained key Medicaid provisions from earlier versions of the bill while introducing new elements such as a Rural Health Transformation Program and new 1915(c) Home and Community Based Services authority.
- There are also changes to several key policies, including revised provider tax restrictions, updates to work requirements, and changes to state-directed payment limits





### H.R.1 Key Eligibility Changes

Limits retro-active coverage from three months to one month for Medicaid Expansion members and two months for traditional Medicaid members starting January 1, 2027

Limits eligibility to certain immigrants who are lawfully present effective October 1, 2026

Requires Medicaid Expansion members to have their eligibility reviewed every 6 months beginning January 1, 2027

Requires Medicaid Expansion members aged 19-64 be subject to work requirements beginning December 31, 2026 – exempts disabled and elderly

Requires cost-sharing for Medicaid Expansion members beginning October 1, 2028 for individuals with income between 100-138% if FPL (excludes primary care, mental health, substance use disorder services, family planning, hospital ER, long-term care, and services provided by CCBHCs, FQHCs and RHCs)



## H.R.1 Provider Reimbursement Changes

Provider Tax – imposes new ceilings on the "hold harmless" threshold in Medicaid Expansion states and prohibits new provider taxes on previously untaxed provider classes

Hold harmless – relationship between a provider tax and Medicaid payments to the provider is referred to as a "hold harmless" or safe harbor

Safe harbor levels will decrease on an annual basis from 6 percent to 3.5% between fiscal years 2028 and 2034 and sets threshold at 0 for any new provider taxes



\*State Directed Payments – capped at 100% of Medicare payment for expansion states and 110% of Medicare payment for non-expansion states

Beginning in 2028, states with payments exceeding the cap must reduce payments by 10 percentage points annually until they comply with the cap



<sup>\*</sup>Excludes nursing facilities and Intermediate Care Facilities for Individuals with Intellectual Disabilities

## H.R.1 Other Key Changes

Beginning in FY2026, \$50 billion in funding over 5 years available to states through the Rural Health Transformation Program

Authorizes a new stand-alone three-year waiver for home and community-based services in July 2028 – individuals will not need to meet nursing facility level of care

Quarterly checks of Social Security Administration death master file for enrollees and provider effective January 1, 2028





Questions



# Open call for topics of interest!

What would you like to hear more about from the Cabinet?

