

CABINET FOR HEALTH AND FAMILY SERVICES

Medicaid Monthly Virtual Meeting Oct. 17, 2024



Welcome

Renewal Update & Key Findings – Medicaid Surveys and Data

Medicaid Home and Community Based Waiver Updates

Reentry Program Updates

2025 kynect Open Enrollment

Non-Emergency Medicaid Transportation Updates

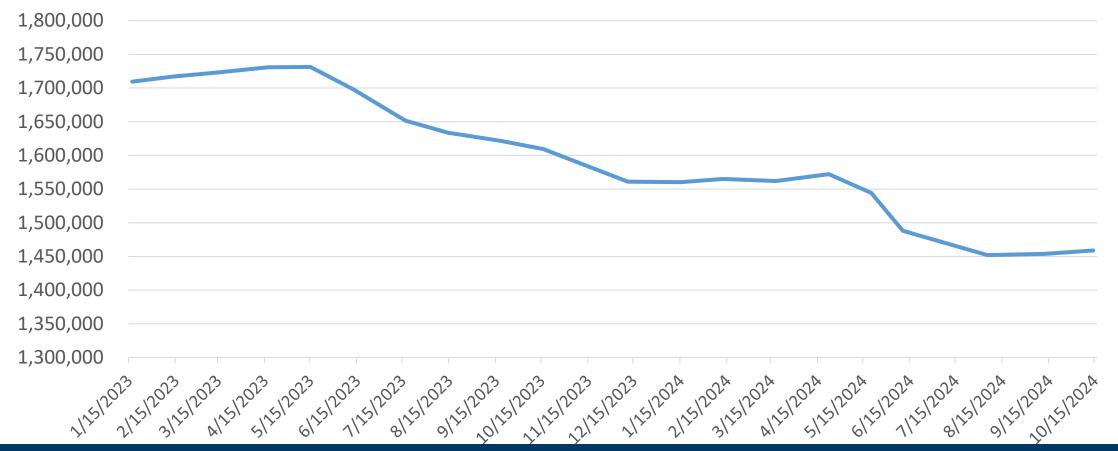
Program Spotlight: Division of Program Integrity

Medicaid PHE Unwinding Updates



Medicaid Enrollment Trend

Medicaid Enrollment: Jan 2023 through Sept 2024 Renewals





Medicaid Renewals Today



- Last PHE renewals for adults had a due date of May 31 with the exception of June 30 for 8 individuals.
- Ongoing annual renewals for **non-PHE** cases resumed in April 2024.
- Flexibilities in place through June 2025.
- Certain Appendix K flexibilities made permanent in 1915(c) waivers effective May 1, 2024.
- CMS monthly and updated reporting ongoing.



Unwinding Report Updates Posted – Cont'd

Original 2024 CMS Monthly Reports					Updated 2024 CMS Monthly Reports*					
	Individual Renewals	Medicaid Approvals	Medicaid Terminations	Pending	90-Day Processing Period		Individual Renewals	Medicaid Approvals	Medicaid Terminations	Pending
Jan	79,053	67,748	10,899	22	22 processed	Jan	79,053	67,758	10,911	0
Feb	93,004	64,789	10,128	1	1 processed	Feb	93,004	64,780	10,128	0
Mar	97,962	70,358	7,932	72	72 processed	Mar	97,962	70,404	7,958	0
Apr	103,265	70,170	15,887	226	226 processed	Apr	103,265	70,266	16,017	0
May	94,705	51,534	37,461	816	816 processed	May	94,705	519,938	42,747	0
Jun	58,959	41,336	13,187	1	1 processed	Jun	58,959	41,337	13,187	0

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KY Medicaid Renewals* and Reinstatements

Individuals procedurally terminated on their renewal due date are given 90 days to respond and provide requested information. If they are determined eligible, coverage is **reinstated** back to their termination date. Months that are still within the 90-day window and are still processing reinstatements are included below.

	Individual Renewals	Medicaid Approvals	Medicaid Terminations	Pending	Extended	Reinstatements as of 10/11/24
July	40,719	36,036	1,187	0	3,496	648
August	36,136	31,823	979	2	3,332	371
September	52,369	45,833	1,234	1	5,301	189

*Numbers are based on CMS Reports.



Renewals: Need help?

There are people in every community who can help! 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!

Resources on Kentucky's website for all things Medicaid Renewals and PHE Unwinding!

MedicaidUnwinding.ky.gov



Providers Supporting Patients Through Renewals

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

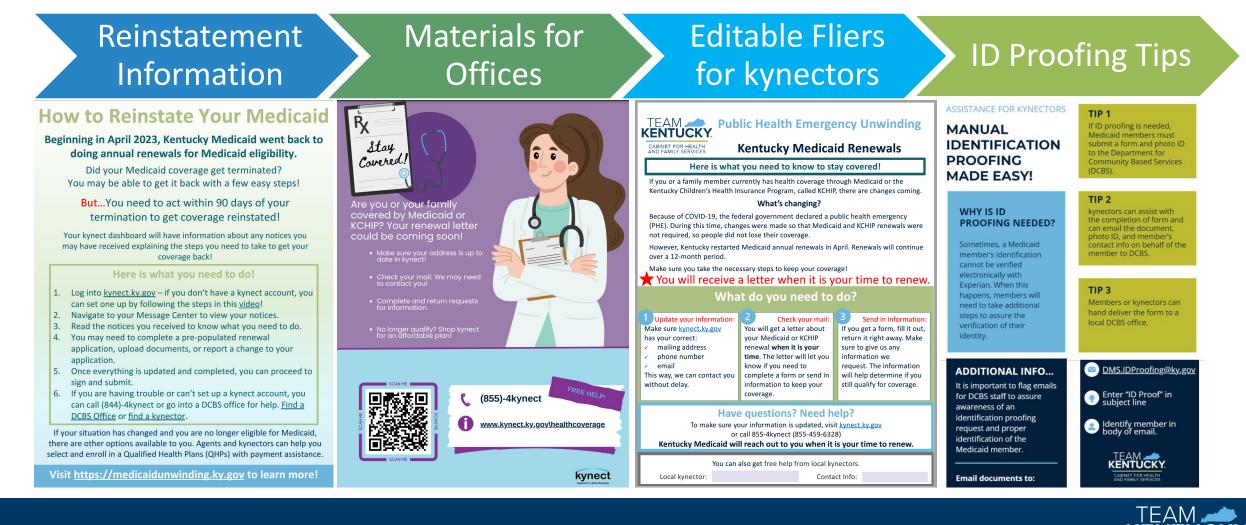
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select Lookup Type:	Member ID Lookup	▼ Serv	ice Type: Emergency S	ervices A	Searc
			Family Planni	ng 🔤	
			Health Plan C	overage	
lember ID:		-			
From Date: 03/24/20	23 🗉 To	Date: 0	13/31/2023		
Verification No. 23083	0000C - 3/24/2023 St	atus: Act	ive	P	rint
			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: 1	Phone Number: (*	1		County: 058 - Johnson	
Physical Address: 1	833			View Member's Mailing A here	ddress:
City:	State: KY		ZipCode: 1		
Hospice Election Date:					
Medicare A:			Medicare B:		
Medicare C:					
Case Ni mber:	Case Name:			Above FPL: N	
		**	Redeter	mination Date: 06/01/2023	1
-		_)
	Membe	r's Auti	horized Representa	tive	
No Authorized Repre	esentative on file for cu	arrent me	ember.		-
	No. of Concession, Name		Eligibility		
			ity 5 Year History		
	y Group		rogram Code Pr	ogram Status From Date	To Date

How can I help my patients?

- Ask them to update their information in kynect by logging into <u>kynect.ky.gov</u> 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.



Help us get the message out! Informational fliers available on PHE website in English and Spanish!



CABINET FOR HEALTH

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 <u>kynect</u>, ky.gev or call kynect at 855-449x-6220 to update your mailing address, phone number, email and other contact information. Kentucky Mediciai will then be able to reach you when it is your time to renew!

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

Stakeholder Session Information

KY PHE Reports

FAQs

Medicaid Member Information

Medicaid Provider Information

Communication Materials

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
 español

 Alternative Coverage Options
 español

 Qualified Health Plan (QHP)
 español

 Medicare Enrollment (Members)
 español

 Medicare Enrollment (Provider)
 How to Access Your Renewal Date

 KY PHE Renewal Pathway Brief
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Provider Renewals Guidance Document

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 <u>survey</u>. Thank you!

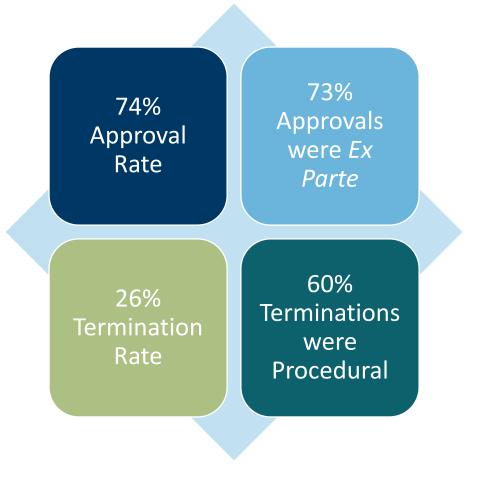
In addition, Thursday, April 20th we will be hosting a Provider Informational session on Medicaid Renewals and the PHE unwinding. Please <u>register for the event</u> to learn about updates specific to providers and hear answers to some of your questions!



Key Findings – Medicaid Surveys and Data

Summary of KY Data – Key Metrics

- Through September 13, 2024, Kentucky has monitored PHE-related Renewals and summarized key data metrics:
 - 74% of renewals ended with approval and continued Medicaid coverage
 - Of those, **73%** were renewed *ex parte*
 - 26% of renewals ended in termination of coverage
 - Of those...
 - 40% were terminated due to determination of ineligibility
 - 60% were due to lack of response to notices (procedural terminations)

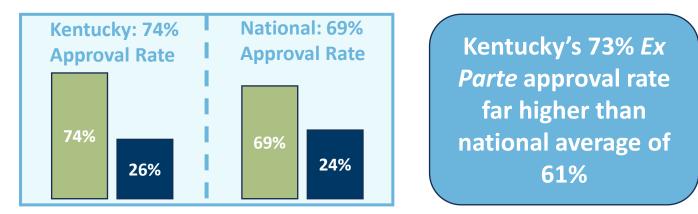




Kentucky Compared to National Averages

KFF's Medicaid Renewals Tracker shares updated state information and national averages. As of September 12, 2024, here is how Kentucky compared:

- ✓ Higher approval rate
- ✓ Higher *ex parte* approval rate
- ✓ Higher rate of terminations based on eligibility
- Lower procedural termination rate







Beyond the Numbers – Medicaid Surveys

What – Kentucky Medicaid conducted multiple surveys this summer:

- Kentucky Medicaid Member Survey
- Kentucky Medicaid Partner Survey
- Kentucky Alternative Coverage Survey

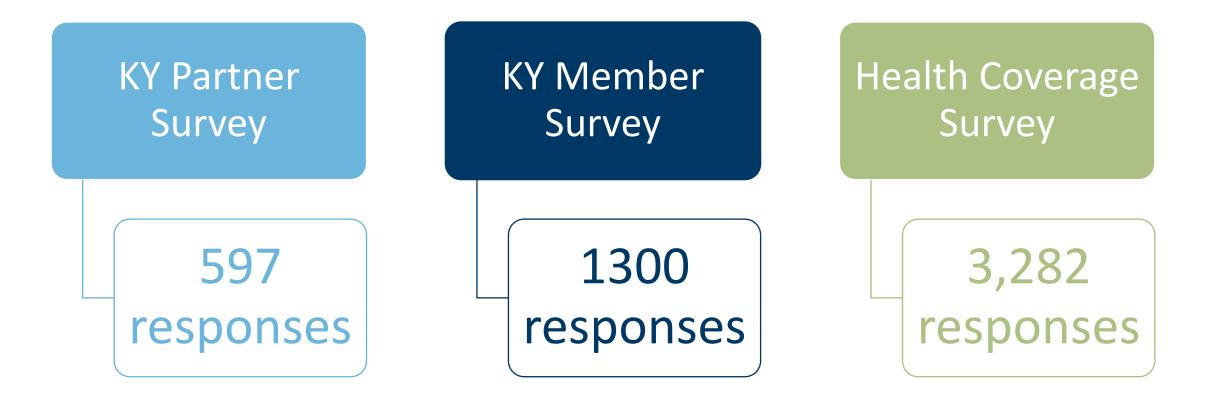
Why – Aim was to gather feedback and information from multiple audiences on their experience through renewals and their health coverage.

How – Took multiple routes, depending on the survey, including:

- Emailing surveys to Kentucky Medicaid Members that renewed
- Emailing and promoting Medicaid partner survey through distribution lists
- Linking the Alternate Coverage survey through social and kynect webpage



Response Rates





Reviewing Findings and Data for Key Themes

Goal was to understand experiences to strategically identify where process could improve or communications efforts could focus.

Multiple data briefs summarized key takeaways that can inform:

- Understanding of most impactful outreach mode
- Value of resources and platforms used
- Experiences and challenges during renewals
- Means to resolve issues and receive help





Kentucky Medicaid Partner Survey – Key Findings

- Over half of respondents were **providers** (32%) and **caregivers** (20%), followed by **advocates** (14%)
- Positive awareness and value of the PHE website, Monthly Unwinding Public Forums, and unwinding email communications and social media updates
- Half (50%) of respondents preferred email communication for receiving information from Medicaid
- Results showed Facebook was the most followed social media platform, with a positive value score associated with it



Key Medicaid Partner Takeaways

- KY will take a further look at approaches for how to continue to build awareness
- KY will continue to promote social media to ensure the value of regular updates and information sharing has a greater impact on partners
- Email listservs seem to be strong and will continue to be leveraged, perhaps even to increase engagement across other areas
- Future communications and websites plans can lean on the success of the PHE website



Kentucky Member Survey – Key Findings

- Majority reported having some combination of Medicaid and Medicare benefits (71%)
- 79% of respondents rated their experience with Medicaid favorably
- Reported that communication was most often received through written letter from Medicaid
- Results showed Facebook was the most followed social media platform and many accessed information and news through the Medicaid website
- Majority (78%) of respondents indicated they had taken action to renew Medicaid, with the most common approach being updating information in kynect or returning an RFI or renewal packet
- Many respondents (39%) reported they were able to use kynect with ease and as needed
- More than a third (38%) of respondents reported having reached out to DMS, DCBS or kynect with a question, complaint, or problem – of those, 35% noted the issue was resolved that same day and 19% indicated it took less than a week to resolve



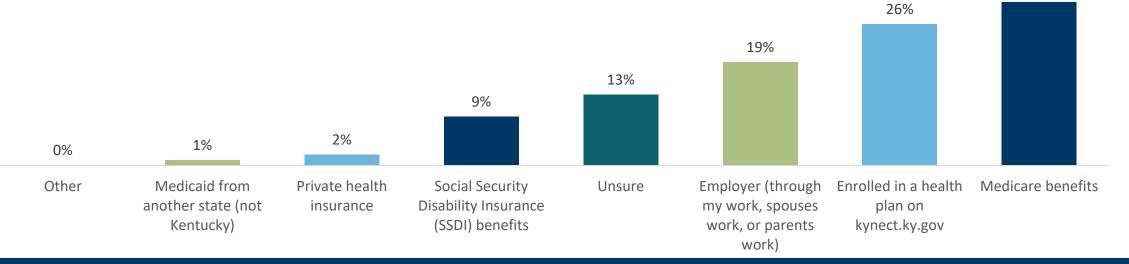
Key Member Survey Takeaways

- A majority of respondents had insurance. Among the 10% who did not, 62% of them had attempted Medicaid renewal, but experienced a barrier.
- State communications (letter, email, phone call, text) were most effective.
- Respondents had an overall positive view of Medicaid.
- Most issues were resolved by DMS same day or within 7 days, but 21% reported their issue unresolved.



Health Coverage Survey – Key Findings

- Majority of respondents (76%) reported that they or a member of their household lost coverage in the last year
- A large portion of those individuals (56%) reported being currently uninsured
- Respondents who reported having coverage indicated their type of insurance they held, with most either now receiving Medicare benefits or enrolled in a health plan through kynect





Key Coverage Survey Takeaways

- Need to continue outreach to members who are uninsured
- Take further efforts to understand employer coverage across the state, as able
- Continue efforts to ensure members determined ineligible for Medicaid are connected to plans on KHBE and understand opportunities for APTC



1915(c) HCBS Waivers

1915(c) HCBS Waiver Updates

ABI Acute care for individuals with a brain injury who are 18+

HCB Individuals with physical disabilities or aged 65+ ABI LTC Long-term support for individuals with a brain injury who are 18+

MIIW Individuals who are ventilator-dependent 12+ hours per day or on an active weaning program

MPW & SCL Individuals with intellectual and/or developmental disabilities



Amended waivers with new proposed rates submitted to the Centers for Medicare and Medicaid Services on October 1, 2024.

Home Health Care Services providers (including MIIW) were notified of January 1, 2025, deadline for all claims to have matching visit documented using electronic visit verification.

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Waiver providers (excluding MIIW)have been notified of the January 1, 2025, golive date for Therap electronic visit verification. Netsmart access will end April 1, 2025.



HCBS 1915c Waiver Slots

CMS approval for additional waiver slots is pending

Michelle P.

Acquired Brain Injury Long-Term Care

750 new; 250 current Fiscal Year

50 new; 25 current Fiscal Year

Home and Community Based Services

Supports for Community Living

750 new; 250 current Fiscal Year

375 new; 125 current Fiscal Year



Reentry Update

Reentry 1115 Project Timeline





Consolidations Appropriations Act (CAA)

- The 2023 Consolidated Appropriations Act (CAA), Congress amended existing laws that limit Medicaid and CHIP coverage for incarcerated individuals.
- CMS released guidance July, 2024 regarding provisions under CAA to take effect on January 1, 2025.



Eligible Population

- Adjudicated juveniles under 21 years of age; or between the ages of 18 and 26 former foster care children group.
- Eligibility is suspended upon incarceration/placement.



- Early and Periodic Screening, Diagnostic, and Treatment Services (EPSDT): Includes medical, dental, and behavioral health screenings or diagnostic services.
- Targeted Case Management 30 days prior to release and for at least 30 days after release.

Possible Settings

- Youth Development Centers
- Youth Detention Centers
- State Prisons
- Local Jails

Kentucky Health Benefit Exchange Open Enrollment Kick-Off

Timeframe

- The Qualified Health Plan (QHP) OE Period for Plan Year 2025 (PY25) will run from 11/1/24 through 01/16/25 at 1am EST.
- The Pre-screening Tool will be available on 10/15/2024 with a preview of PY25 plans.

Provider Updates

- Plan certification was completed in September
- CareSource will be in 27 fewer counties
- Passport by Molina will be in 5 additional counties
- Paramount is a new dental issuer across the Commonwealth







System Enhancements

- Throughout the year KHBE regularly updates the kynect system based on user feedback and common errors. Some that impact our Agents and kynectors the most are:
 - Self Service Portal Refresh As a result of Human Centered Design feedback, KHBE has updated the Self-Service Portal with improved sidebar navigation, more efficient questions, and several other minor enhancements.
 - Autoenrollments to Ensure Optimal Coverage If you are in a Catastrophic Plan, you will be transitioned to a Bronze Plan, similarly, if you are in a Bronze Plan with CSR you will be transitioned to a Silver Plan.
 - **Cost-Sharing Reduction (CSR) Benefits** Enhancements to CSR benefit information displayed and new sorting logic.
 - Pregnancy Special Enrollment Period
 - Increased Efforts for Request for Information (RFI) Individual's will receive nudges that their verification for Special Enrollment Period as well as enhancements to RFI verifications and notices.





Preparations for Agents and kynectors

- We provide an Open Enrollment toolkit to our kynectors. The kit includes, fact sheets, flyers, and escalation path information.
- The Incident Tracker will be live for Open Enrollment for Agents and kynectors to report incidents and system defects for quick resolution.
- Virtual Training Sessions, Open Enrollment Webinar, Site Visits, and Q and A Sessions have already begun and will continue throughout Open Enrollment.





Preparations for Agents and kynectors

- Weekly and monthly updates of changes and reminders will be distributed through Friday Facts emails and the monthly Insight Newsletter.
- The paper applications and appendices are now available fifteen languages:
 - Arabic

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- Nepali
- Bosnian
 - Russian

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- Burmese
- Somali

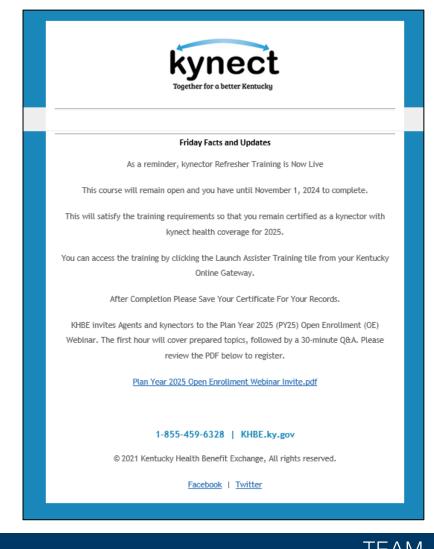
Spanish

Swahili

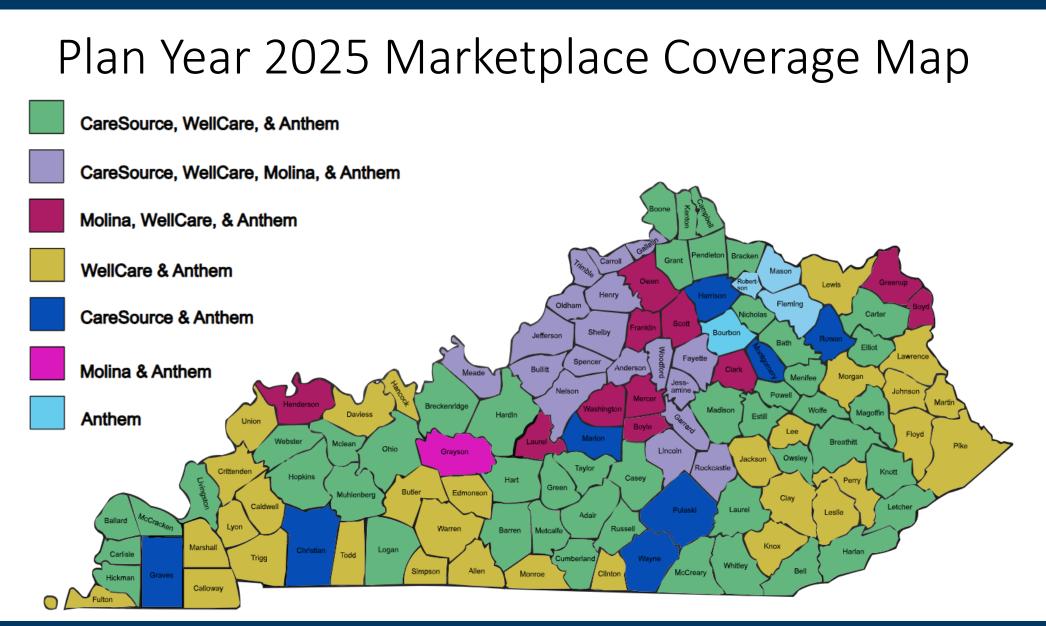
Ukrainian

Vietnamese

- English
- French
- Haitian-Creole •
- Kinyarwanda •
- Mandarin

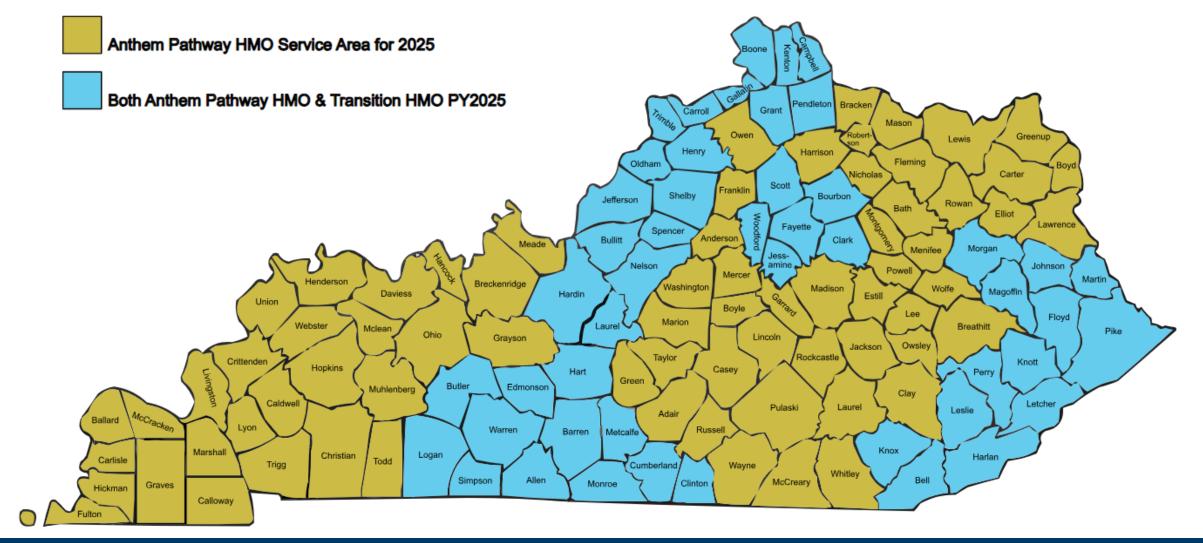






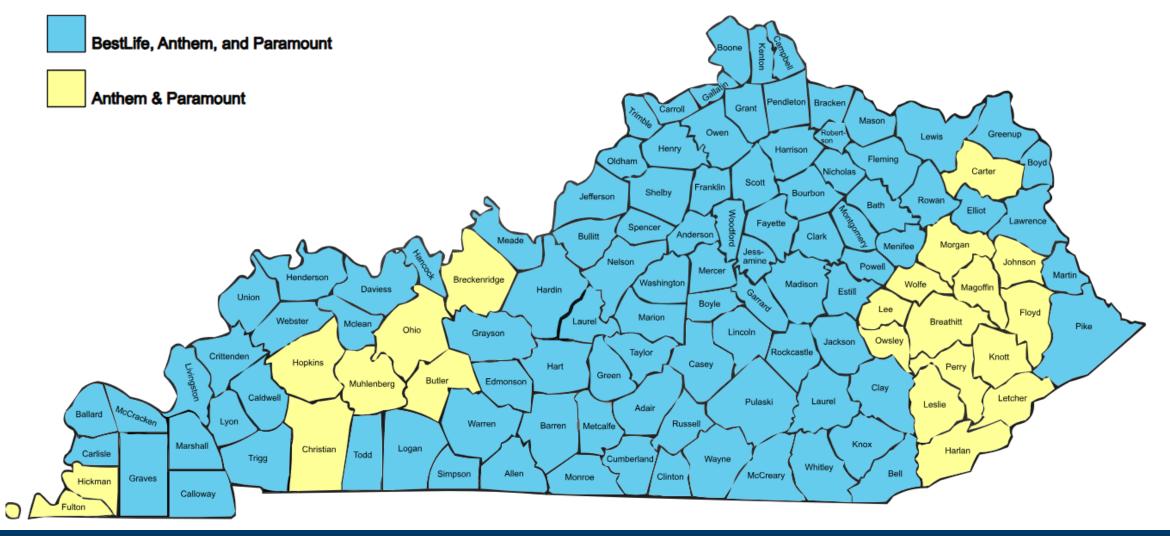


Plan Year 2025 Marketplace Coverage Map





Plan Year 2025 Dental Marketplace Coverage Map





Open Enrollment Preparation

Outreach and Enrollment

- kynectors will continue to host events across the state to inform Kentuckians of the OE Period and assist them with their Health Coverage needs.
- In the month of October kynectors will be hosting over 450 events and, so far this year, there have been over 4,000 events hosted by kynectors across the Commonwealth.





Open Enrollment Preparation

Outreach and Enrollment

- KHBE also works closely with their public relations firm to host large events across the state in coordination with kynector organizations.
- Below are photos from KHSAA state championships, Balloon Glow in Louisville, and a Murray State Basketball game.





Open Enrollment Preparation

- KHBE has developed new and improved materials for this year's Open Enrollment. Those have been added to the website with more in the works. They can be found below.
 - kynector OE Flyers
 - https://khbe.ky.gov/Agents-kynectors/KynectorResources/OE.kynector2.v1.pdf
 - <u>https://khbe.ky.gov/Agents-kynectors/KynectorResources/OE.kynector2.b%26w.v1.pdf</u>
 - <u>https://khbe.ky.gov/Agents-kynectors/KynectorResources/OE_kynector1_v1.pdf</u>
 - Editable kynector OE Brochure
 - <u>https://khbe.ky.gov/Agents-kynectors/KynectorResources/OE.Brochure.2025.kynector.pdf</u>
 - kynector OE Brochure with QR Code
 - <u>https://khbe.ky.gov/Agents-kynectors/KynectorResources/OE.Brochure.2025.QR.pdf</u>
 - Back to School Flyer
 - <u>https://khbe.ky.gov/Agents-kynectors/KynectorResources/back-to-school.v3.print.kynector.pdf</u>
 - <u>https://khbe.ky.gov/Agents-kynectors/KynectorResources/back-to-school.v3.print.kynector.b%26W.pdf</u>
 - Family Glitch Flyer
 - <u>https://khbe.ky.gov/Agents-kynectors/2024%20Docs/Family_Glitch_Flyer_kynector_final.pdf</u>



Non-Emergency Medical Transportation (NEMT) Changes

NTP Transportation

Medicaid recipients will now receive NEMT services to Narcotic Treatment Programs (NTP)s

NTPs provide methadone treatment to opioid use patients





Eligibility Changes

- 907 KAR 3:066 outlines eligibility requirements for NEMT services
- Medicaid recipients' eligibility changed from:
 - No vehicle in the household;
 to
 - No vehicle in recipient's name.





Exemptions

- Recipients with a vehicle in their name may be exempt if they provide a note from a:
 - Clinician;
 - School;
 - Employer;
 - Mechanic;
 - Transportation Authority.





Exemptions part 2

- Exemption notes must verify the vehicle is unusable for recipient.
- Recipients under 18 will have same vehicle ownership status as parent or legal guardian.
- Parents may request a 2-week exemption for children.





Future Changes

The Department of Medicaid Services will work with recipients on future changes to increase quality and access.





Thank you for allowing me to share information about the changes to the NEMT Program.



Kentucky Department for Medicaid Services Division of Health Policy DivisionofHealthCarePolicy@ky.org





Division of Program Integrity

Division of Program Integrity

Provider Licensing and Certification Branch

- Application Review Section
 - Applications and Change of Ownership
- Maintenance Section
 - Updates, License Renewals, Revalidations

Audits and Compliance Branch

Recovery Branch

Third-Party Liability and Estate Recovery Branch







MPPA Helpful Hints

- Read your notifications.
- Look for your revalidation coming due notification.
- Clear out notifications. There is no "unread" section similar to email.
- Use the application and maintenance status "in process" does not mean we have it, or that it has been submitted.



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Top 10

Common Application & Maintenance Errors

- 1. SSN card not uploaded
- 2. Not including the communication email address in basic information
- 3. Delegate Form is incorrect: NPI, Name, Signature, etc.
- 4. Adding Group DBAs, FEINs, or other group information on an individual file
- 5. License end dates not updated in the license panel
- 6. Certifications added in the license panel (mostly nurses with a certification)
- 7. Missing or incorrect document uploaded
- 8. DMEs Ownership does not match PECOS
- 9. Individual providers trying to add group checking accounts for EFT
- 10. Incorrect effective dates for licenses or certifications



Provider Revalidations

If your revalidation was due during the Public Health Emergency (PHE) and you have not yet done so, we encourage you to complete and submit your revalidation (RVL). Submitting your RVL now will allow KY DMS to review and process your RVL in accordance with Federal guidance in a timely manner.

WHERE TO FIND REVALIDATION DUE DATE:

The revalidation date can be found on your dashboard under KY

Medicaid provider IDs.

Revalidation Newsletter

Search by Me	dicaid ID Statu	s or Prov	ider Type			Search by Medica	aid ID		
Medicaid ID Status		Provider Type				Medicaid ID			
All	*	All		~					
					Reset	Search C	Near		
				,	CY Medicaid Provider IDs				
Medicaid Provider ID	Medicaid ID Status	View	Provider Name	NPI	CY Medicaid Provider IDs	Medicaid Provider ID Effective Date	Medicaid Provider ID End Date	Revalidation Due Date	Action



Provider Enrollment Best Practices

- Make sure the provider file is up-to-date. This includes contact information such as email address, phone numbers, etc.
- Check for the revalidation due date on your dashboard.
- Check for any notifications or correspondence on your dashboard for any communication from DMS.
- Submit updated license/certification through KYMPPA at least 2 to 4 weeks before expiration.
- Report any changes that may impact current information disclosed to DMS including a change in owner.



Post-Payment Review Audits

- Who gets audited?
 - All provider types, as required by the Social Security Act.
- How do I know what the audit is about?
 - Read the audit letter and follow directions carefully.
 - Check the who, what, when, and where.
 - Note the contact person named in the letter.
 - Be cognizant of the due date and if you need an extension, reach out sooner rather than later.
- Contact us! We are here to help! <u>Jennifer.Dudinskie@ky.gov</u>



Best Practice Tips for a Successful Audit

- 1. Audit documents must be legible. If we cannot decipher, we cite.
- 2. If there is no supporting documentation, the service did not occur.
- 3. Make sure required signatures and documents are part of the records and entered timely.
- 4. Ensure credentialing requirements are met.
- 5. If required, complete the Records Request Cover Sheet completely and submit with the required documentation.





Questions



Open call for topics of interest!

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

