



CABINET FOR HEALTH
AND FAMILY SERVICES

Public Health Emergency Unwinding

Stakeholder Engagement Meetings
March 2023

Public Health Emergency (PHE)

The Secretary for the Department of Health and Human Services declared a PHE on January 31, 2020, due to COVID-19



The PHE allowed states several flexibilities by:

- Triggering a variety of federal emergency powers
- Temporarily waiving certain Medicaid and Children's Health Insurance Program (CHIP) requirements
- Permitting continuous coverage with 6.2% enhanced Federal Medical Assistance Percentage (FMAP)



PHE flexibilities remain in effect for 90 days

- The PHE has been extended numerous times
 - Most recent extension is to **April 11, 2023**
 - White House announced end on **May 11, 2023**



The Consolidated Appropriations Act 2023 separates continuous coverage from the PHE effective **March 31, 2023** and phases out the enhanced FMAP through December 31, 2023



Upon PHE expiration

- ✓ Unwind PHE flexibilities
- ✓ Resume temporarily waived requirements and conditions
- ✓ Identify flexibilities to permanently integrate into state plan or waivers

Consolidated Appropriations Act, 2023 – Impact

Section 5131 of the recently enacted CAA makes key changes to the guardrails for unwinding, that will support eligible Member coverage retention



Separates the Medicaid continuous coverage requirement from the end of the PHE and sets a new statutory end date of March 31, 2023.



Provides for extended enhanced federal medical assistance percentage (eFMAP) to support unwinding during a nine month phase-down from April 1, 2023 – December 31, 2023.

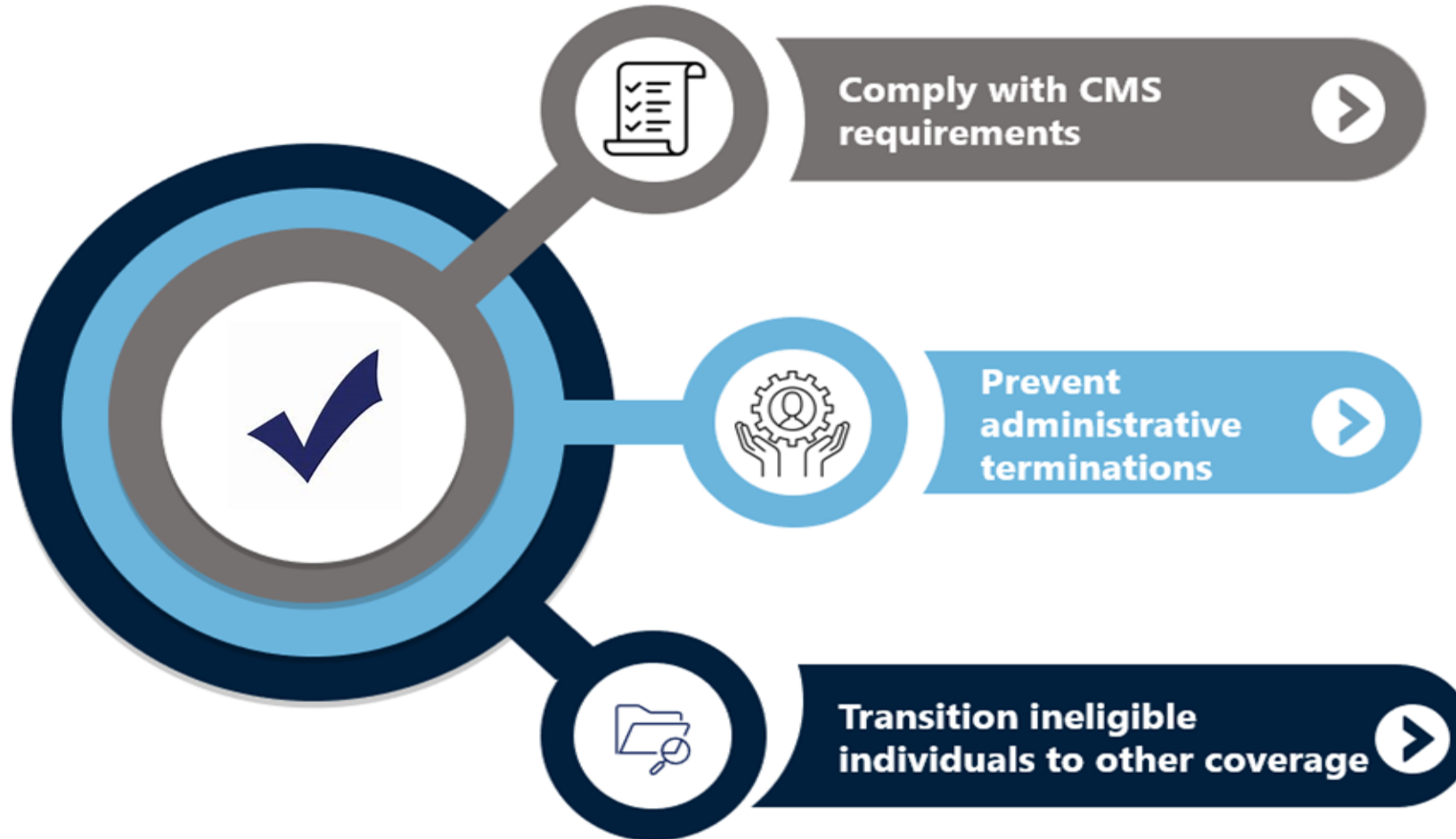


Institutes new Medicaid, CHIP, and marketplace reporting requirements to enable oversight and unwinding and to improve transparency in state processes.



Gives CMS targeted enforcement powers to reduce states' regular FMAP, require corrective action, suspend procedural terminations, and impose civil monetary penalties as a result of non-compliance with federal renewal and CAA reporting requirements.

Kentucky's PHE Unwinding Goals



High Level Timeline for Renewals

February 15, 2023
Renewal Redistribution
Plan and System
Readiness Artifacts due
to CMS



April 8, 2023
Baseline Unwinding Data
Report due to CMS –
progress reports due on
the 8th of each month



May 2023 – April 2024
Conduct renewals over
12-month period



March 31, 2023
Continuous coverage
ends – 14-month period
to complete renewals



May 2023
Renewals starts for
members with renewal
date of May 31, 2023



Renewal Caseload Planning

IMPORTANT: System will reflect updated coverage and renewal dates by March 25 and in KYHealthNet after April 7

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

KY Medicaid Renewal Process

March

May renewals will receive a text and/or email notification that their renewal month is approaching

DID YOU KNOW?
Members will receive a communication:

- About 90 days before their renewal end date and/or
- If there's no response by the 15th of their renewal month

April

May renewals start processing

May **passive renewals** successfully verified issued notice of renewal

Notice of Eligibility

May **passive renewals not verified** issued request for information about 60 days prior to end date

Request for Info

May **active renewals** issued renewal packet about 60 days prior to end date

Renewal Packet

June renewals will receive a text and/or email notification that their renewal month is approaching

May

May **active renewals and passive renewals with RFI** will issue notice of renewal or denial by month end date

June renewals will start processing

June **passive renewals** successfully verified issued notice of renewal

Notice of Eligibility

June **passive renewals not verified** issued request for information about 60 days prior to end date

Request for Info

June **active renewals** issued renewal packet about 60 days prior to end date

Renewal Packet

July renewals will receive a text and/or email notification that their renewal month is approaching

June

June **active renewals** will issue notice of renewal or denial by month end date

July renewals will start processing

July **passive renewals** successfully verified issued notice of renewal

Notice of Eligibility

July **passive renewals not verified** issued request for information about 60 days prior to end date

Request for Info

July **active renewals** issued renewal packet about 60 days prior to end date



Renewal Packet

August renewals will receive a text and/or email notification that their renewal month is approaching

Example Notices

Example Notice of Eligibility:

KIP-105.1
10/22

Date: 01/19/2023
Case Number: 112917281

Cabinet for Health and Family Services
Department for Community Based Services

Decision About Your Coverage

Please see below for your household coverage. Coverage is based on the information you gave us.

Who was approved for coverage

Name	Program	Coverage Start Date	Coverage End Date
[REDACTED]	Medicaid	August 01, 2022	January 31, 2023
[REDACTED]	Medicaid	March 01, 2023	February 29, 2024
[REDACTED]	Medicaid	March 01, 2022	February 29, 2024
[REDACTED]	Medicaid	March 01, 2022	February 29, 2024
[REDACTED]	Medicaid	March 01, 2022	February 29, 2024

Whose coverage will end

Name	Program	Effective Date
[REDACTED]	Medicaid	February 01, 2023

Reason: You will no longer receive benefits because your SSI payment has stopped. We based our decision on the rules in: 907 KAR 20:060.



You may check the rules online at <https://apps.legislature.ky.gov/law/kar/TITLE907.HTM>.

Important Medicaid Information

If you will be turning 65 in the next 90 days, or become eligible for Medicare due to a disability, there may be actions you need to take. Please refer to the **IMPORTANT: You may soon be eligible for Medicare** insert included in this notice.

Example RFI:

KIP-2.1
09/21

Date: 03/03/2023
Case Number: 113022229

Cabinet for Health and Family Services
Department for Community Based Services

ACTION REQUIRED BY June 01, 2023

WE NEED INFORMATION

WHY?



We need more information from you to decide if you can get benefits. We need it by the due date(s) below. **If we do not get it, you may not qualify for Medicaid or Qualified Health Plan.**

WHAT'S NEXT? We need you to submit proof.

Proof We Require for Medicaid/Qualified Health Plan with Payment Assistance (APTC)	Examples of Proof	Due Date
Verification of lawful presence	<ul style="list-style-type: none"> I-327 (Reentry Permit); or I-551 (Permanent Resident Card), I-571 (Refugee Travel Document); or I-766 (Employment Authorization Card); or I-94 (Arrival/Departure Record); or Unexpired Foreign Passport; or I-20 (Certificate of Eligibility for Nonimmigrant (F-1) Student Status) 	June 01, 2023

Example Renewal Packet:

EDB-087
04/21

DATE: 12/15/2022
CASE NUMBER: 110543114

Cabinet for Health and Family Services
Department for Community Based Services

Medicaid Renewal: We Need Information from You

Why?

It's time to renew your Medicaid benefits. We cannot renew them unless you give us the information we ask for in this letter. We need it by January 31, 2023. If we don't get it, your Medicaid will stop.

What we need and when we need it

What to do	Due Date
Give us the information below	January 31, 2023

Your current info

We used this information about members of your case to decide their eligibility

Name	Monthly Income	Is the person incarcerated?	Resources
[REDACTED]	\$0.00	Not Incarcerated	-

Renewals: How to respond to a notice

Complete and return the form

- Fax to 502-573-2005 or 502-573-2007
- Mail PO Box 2104, Frankfort, KY 40602

Use the online Self Service Portal

- Log in at <https://kynect.ky.gov/benefits>
- Click on **Renew Benefits** or **upload requested information from RFI**

Call 1-855-459-6328 (kynect) or 1-855-306-8959 (DCBS)

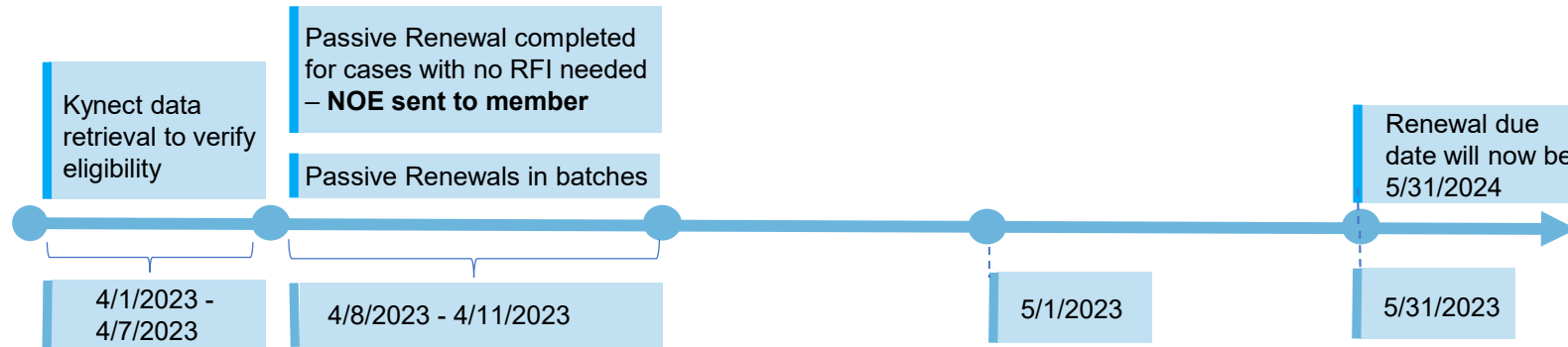
- Monday through Friday from 8:00 am to 4:30 pm ET
- Saturday from 9:00 am to 2:00 pm ET (1-855-306-8959 only)

Visit a kynector, insurance agent or DCBS office

- Monday through Friday 8:00 am to 4:30 pm local time
- DCBS office: https://prd.webapps.chfs.ky.gov/Office_Phone/index.aspx
- Kynector/insurance agent: https://kynect.ky.gov/benefits/s/auth-reps-assisters?language=en_US

KY Passive Renewal Timeline

Example: Erica Smith's Renewal Due Date is 5/31/2023 and her case can be passively renewed. Here is the timeline for her renewal...

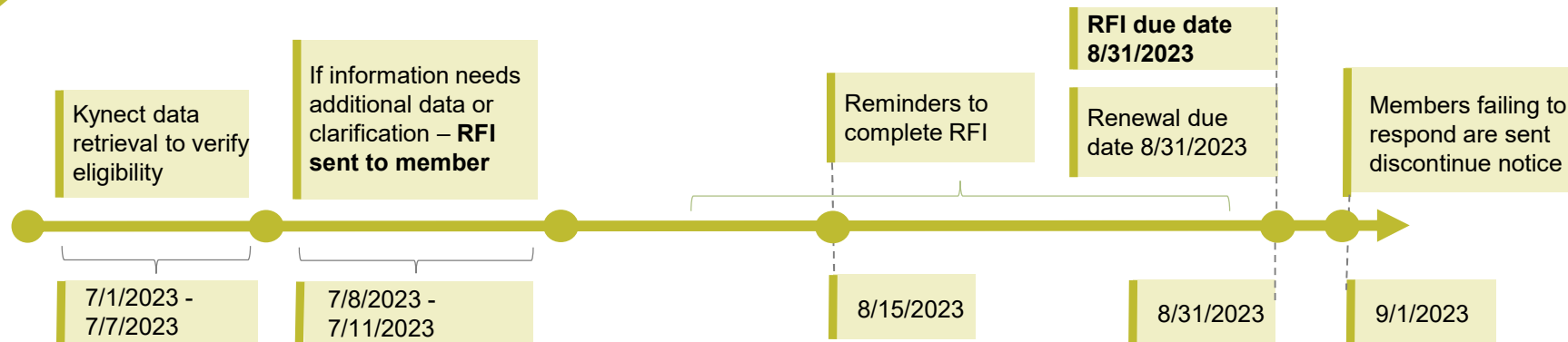


Important:
When Erica is passively renewed, her coverage end date and her renewal date will be updated to 5/31/2024

- 1 Erica's information in the system was up to date and verified
- 2 **No action** was required to continue Medicaid coverage
- 3 Erica will receive a **Notice of Eligibility (NOE)** in the mail

KY Renewal Case with RFI Timeline

Example: Jason Johnson's Renewal Due Date is 8/31/2023 but there is additional information needed to process his case. Here is the timeline for his renewal...



Important:

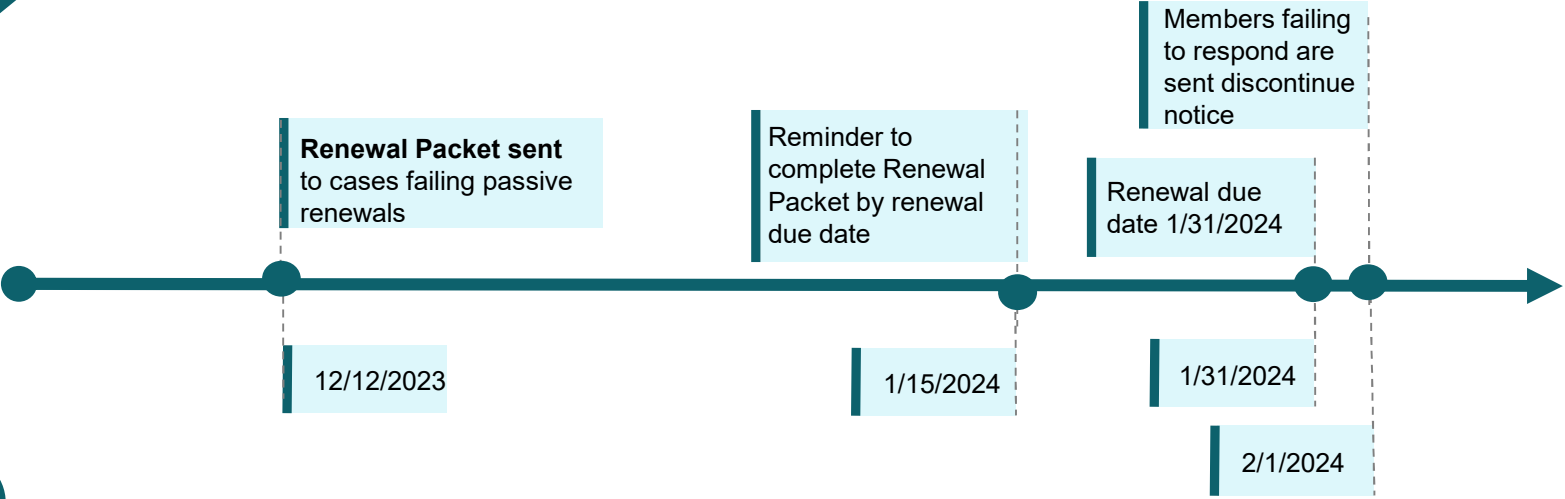
Jason has **90 days** past his renewal due date to submit information and have his coverage reinstated retroactively

Jason has **120 days** to appeal his coverage decision and request a fair hearing

- 1 Jason receives an RFI in the mail to present more information
- 2 This required Jason to **take action** to continue Medicaid coverage by responding to RFI
- 3 Jason's case will be processed with the new information

KY Active Renewal Timeline

Example: Tom Star's Renewal Due Date is 1/31/2024. He will go through an active renewal after the system attempts to verify data. Tom's eligibility depends on consideration of resources. He will receive a prepopulated form for him to complete and return. Here is the timeline for his renewal...



- 1** Tom's case will be actively determined
- 2** This required Tom to **take action** to continue Medicaid coverage by responding to the Renewal Packet
- 3** Tom's case will be processed with the full provided information

Important:
Tom has **90 days** past his renewal due date to submit information and have his coverage reinstated retroactively

Tom has **120 days** to appeal his coverage decision and request a fair hearing

KY Medicaid Renewals: Overall **SNAPSHOT**

Medicaid current population: 1,719,927

Estimated total who may lose eligibility: 236,246

Of those, **74,764** are over 138% FPL and may qualify for other coverage such as a Qualified Health Plan (QHP) with Advance Premium Tax Credit (APTC)

IMPORTANT: Member may provide information or circumstances may change prior to redetermination

Age	Member Count	%
18 or younger	59755	25%
19 to 64	158505	67%
65 or older	17986	8%
Grand Total	236,246	

Renewals by the Numbers **SNAPSHOT**

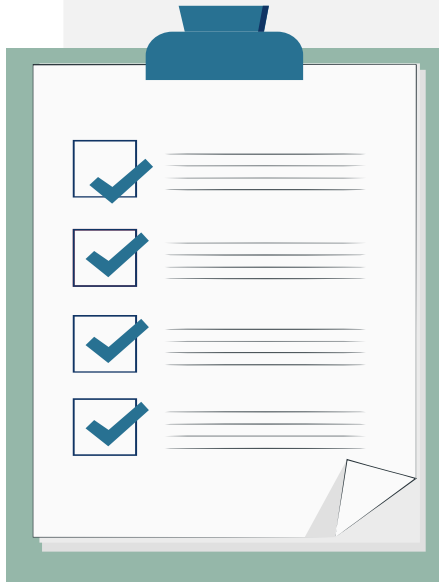
Ethnicity	IndividualCounts
UnKnown	13,163
Hispanic or Latino	16,509
Non-Hispanic or Non-Latino	206,574
Grand Total	236,246

Race	IndividualCounts
American Indian or Alaskan Native	534
Asian	4,407
Black or African American	34,318
Native Hawaiian or Other Pacific Islander	488
Unknown	20,266
White	180,916
Grand Total	240,929

Categories	MemberCounts
Children over 19	8259
Pregnant women outside 12 month postpartum	4601
Over 64	17151
Former foster over 26	170
SNAP enrolled	26797
Under state guardianship	193
Nursing Facility	1214
Enrolled in a MSP	20642
• HCBS waivers (total) and each waiver	1584
o ABI Acute and ABI Long-Term Care Waiver	43
o Home and Community Based (HCB) Waiver	884
o Michelle P. Waiver	412
o Supports for Community Living (SCL) Waiver	245
o Model II	0

Renewals: What's Next?

What to expect and what you can do!



Members should keep their contact information updated so Kentucky Medicaid is able to reach them when it is their time to renew!

Update your information as soon as possible!

Visit kynect.ky.gov or call kynect at **855-4kynect (855-459-6328)** with questions and to update your mailing address, phone number, and email!



Be on the look out for any mail or outreach from Kentucky Medicaid and be sure to respond!

Renewals: Need help?

There are
people in
your
community
who can
help you!

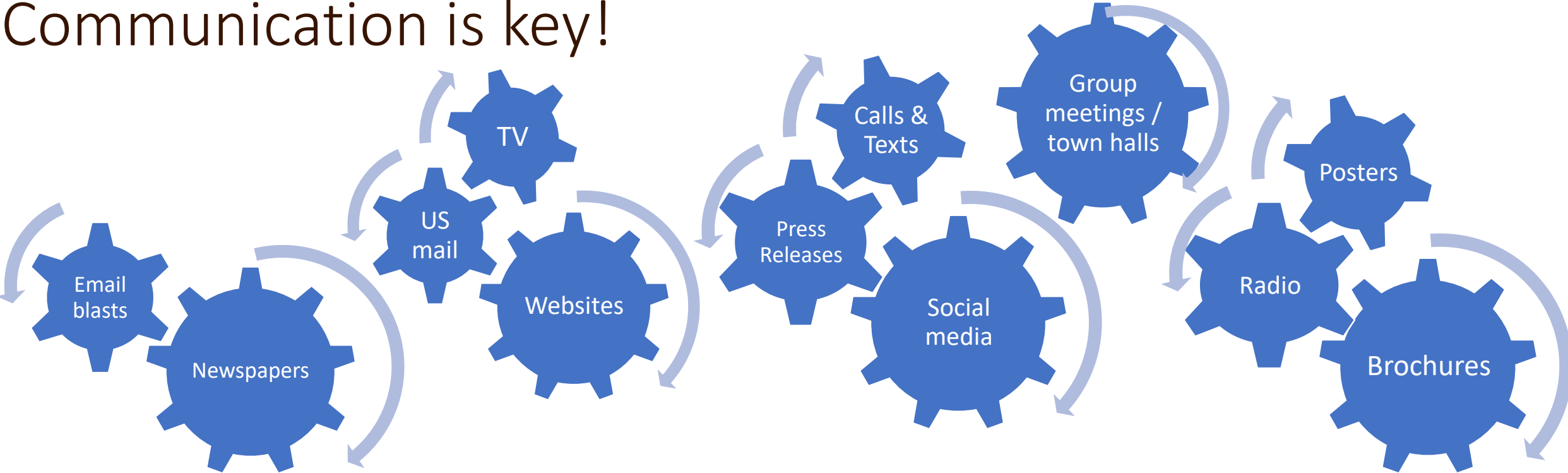
[kynector](#) or [licensed insurance agent](#) available online and by calling **1-855-4kynect** (1-855-459-6368)

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>

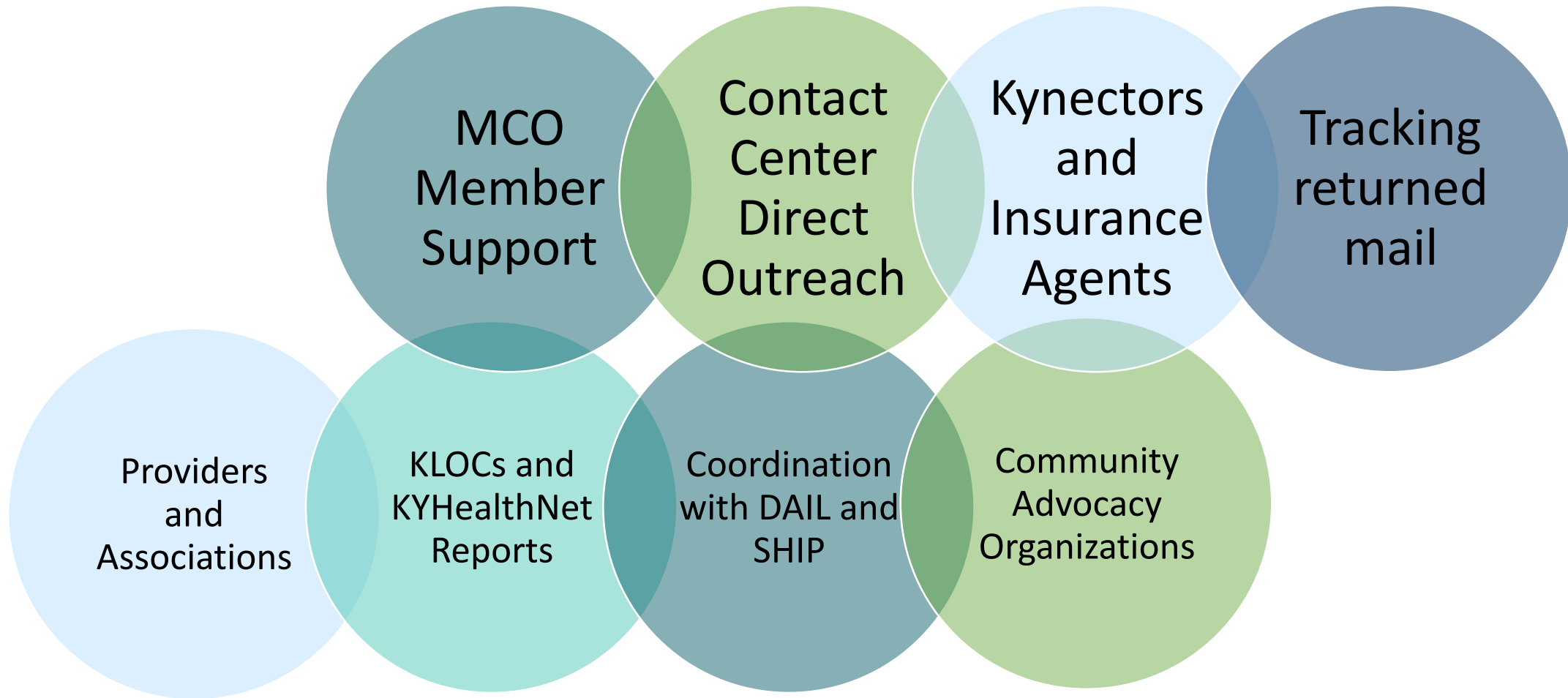
Communication is key!



Members * Providers * State Agencies * Managed Care Organizations * Advocacy & Community Based Organizations



Proactive Approaches to Help Members



PHE Flexibilities Ending on May 11, 2023

NOTE: HCBS Appendix K flexibilities do not end until 6 months after the end of the PHE

Providers

- Suspension of provider revalidations
- Suspension of recoupments and payment intercepts
- Temporary provider enrollments
- Use of unlicensed facilities as an alternative location
- Use of a temporary expansion site or other areas that do not comply with requirements
- Use of SNF beds for patients not meeting SNF requirements

Members

- Second Presumptive Eligibility (PE) period in a calendar year

Provider Reimbursement

- Hospital 20% add-on to DRG for COVID-19 diagnosis
- Nursing Facility \$270 per diem add-on

This is not a full list of all flexibilities. Please reference the [KY PHE Flexibility Tracker](https://www.ky.gov/health/medicaid-unwinding) on [MedicaidUnwinding.ky.gov](https://www.ky.gov/health/medicaid-unwinding) for full information.

PHE Flexibilities Extended

Members

- Disregard for excess resources for LTC members for 12 months past the PHE.
- 120-day period to file an appeal and for the state to make a decision
- Re-enrollment of member to previous MCO if within 120 days

Covered Services

- Required coverage of COVID-19 vaccines, testing and treatments without cost sharing (ARPA)
- Telehealth audio-only, non-HIPAA compliance platforms extended through August 9, 2023*
- Methadone take-home doses for OUD (SAMSHA extension)

**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).*

This is not a full list of all flexibilities. Please reference the [KY PHE Flexibility Tracker](#) on [MedicaidUnwinding.ky.gov](https://www.MedicaidUnwinding.ky.gov) for full information.

PHE Flexibilities Permanently Implemented

Provider

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

Covered Services

- Expanded telehealth (907 KAR 3:170)

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How to stay informed...

Kentucky's Medicaid Renewals and PHE Unwinding Website -
[MedicaidUnwinding.ky.gov](https://www.MedicaidUnwinding.ky.gov)

CHFS Social Media

- Facebook,
- Twitter, and
- Instagram

Stakeholder Meetings

- Ongoing Stakeholder Meetings – 3rd Thursday @ 11:00 ET



Questions