#### Welcome!

#### VIRTUAL COVER MONTANA SUMMIT

October 11 – 12, 2023

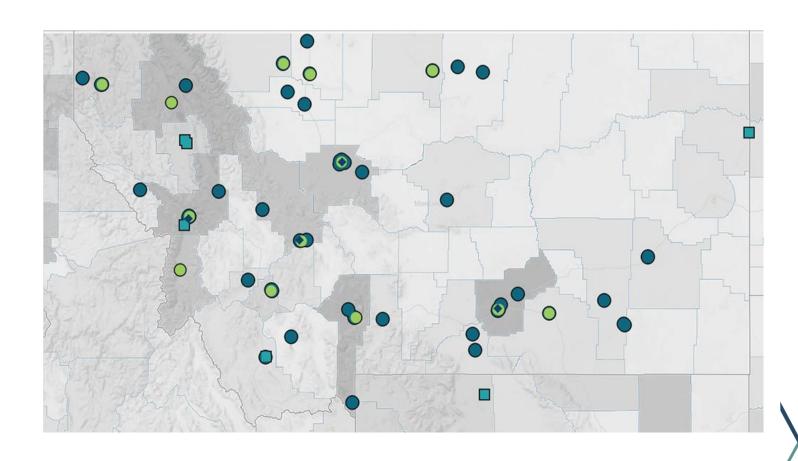


#### Mission:

To promote integrated primary healthcare to achieve health and well-being for Montana's most vulnerable populations.

#### Vision:

Health equity for all Montanans.





## Land Acknowledgment

The Mission of the Montana Primary Care Association is to promote integrated primary healthcare to achieve health and well-being for Montana's most vulnerable populations.

As part of that work, MPCA acknowledges that Montana occupies territory that was taken from the Blackfeet, Crow, Cheyenne, Salish & Kootenai, Shoshone-Bannock, and Kalispel Nations, whose connection to this land, past present, and future, we remember and respect.

We honor the original stewards of this land and their descendants, many of whom continue to live, work, teach, create, and learn in this community. We are committed to showing gratitude for the land and its Indigenous peoples by respecting and remembering this in our thoughts and actions.

Learn more at: <a href="https://native-land.ca/">https://native-land.ca/</a>.



#### Who Are We?

## Montana Primary Care Association (MPCA) Membership

- 14 FQHC's
- 5 Urban Indian Health Centers
- Over 120,000 Montanans served by members
- Supports members in:
  - Quality/Data
  - Workforce
  - IBH/SUD
  - Patient-Level Social Needs

#### **Cover Montana**

- Founded in 2014 for first enrollment period
- In-person Navigators
  - 6 across Montana
  - Collaborate with assisters at clinics throughout the state
- Helpline 844 682-6837
- Website <u>www.covermt.org</u>

This work is supported by the Centers for Medicare and Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$1.25M with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.



Who are you?



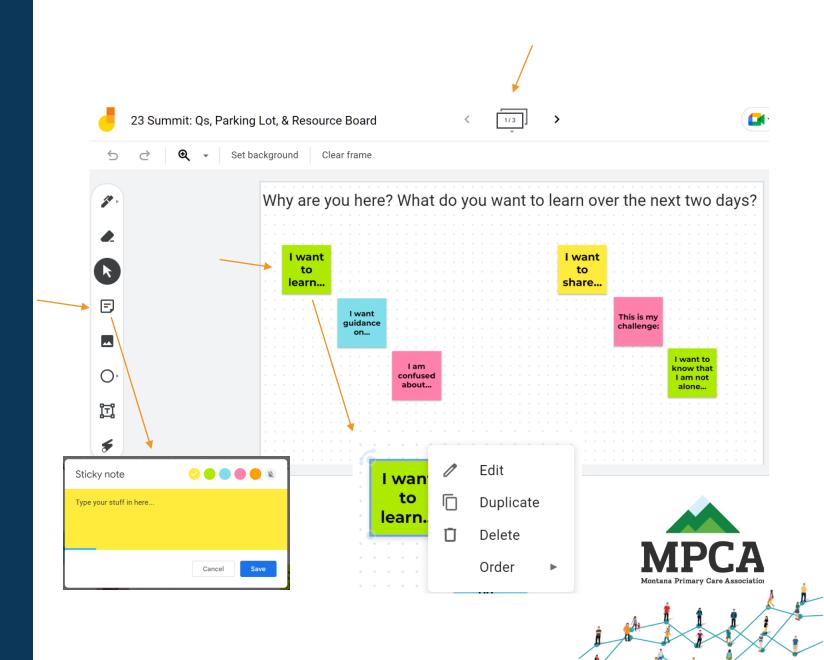


#### Virtual Tools!

#### Summit Jamboards:

- Parking Lot
- Outreach and Enrollment Resource List

But we're going to practice on Jamboard. We want to know why you are here today and what you hope to learn.



#### Wednesday, Oct. 11th: 10:30 AM - 5:00 PM

The State of Coverage

Olivia Riutta, Director of Population Health, Montana Primary Care Association

2023 Legislative Rundown
11:15 AM - Noon

Stacey Anderson, Director of Policy, Montana Primary Care Association

Lunch Break

Noon - 1:00 PM

Keynote: Medicaid Unwinding & Coverage Trends Across
Tribal Nations
1:00 PM - 2:00 PM

Kristen Bitsuie, Tribal Health Care Outreach and Education Policy Coordinator, National Indian Health Board

Breakout Session: 2:30 PM - 3:30 PM

Deep dive into the Medicaid expansion application & the apply.mt.gov platform

Breakout Session: 2:30 PM - 3:30 PM

Marketplace application walk through and updates

Fort Peck Tribally Sponsored Health Insurance Program (TSHIP) – Best practices for increasing coverage & expanding access to care in a rural, reservation community

4:00 PM - 5:00 PM

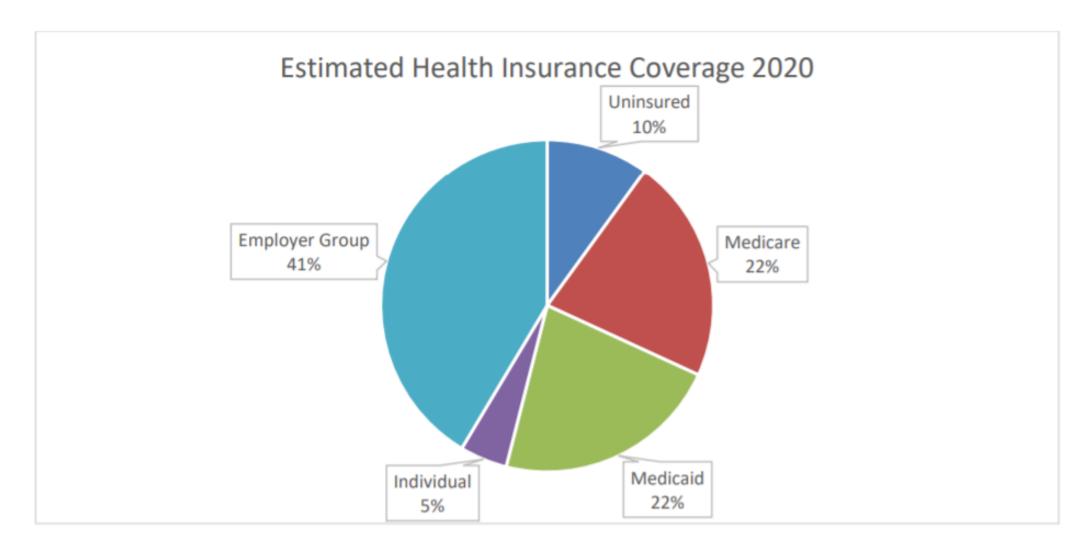
Rae Jean Belgarde, Director & Alyssa Shields, Policy & Financial Analyst, Fort Peck Tribal Sponsorship Health Insurance Program (TSHIP)



#### Thursday, Oct. 12th: 10:30 AM - 5:00 PM

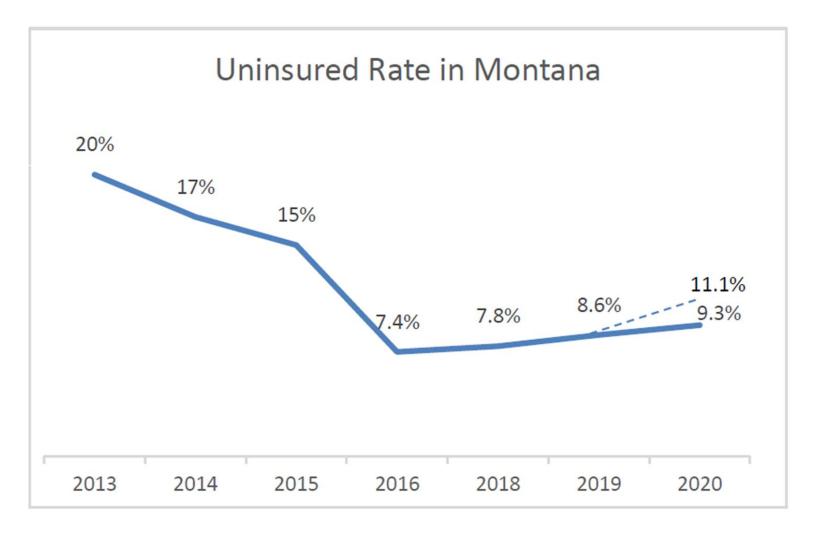
Dr. Annie Glover, Senior Research Scientist, Rural Institute for Inclusive The State of Maternal Health in Montana Communities, UM 10:30 AM - 11:00 AM Annie Carlson, Navigator, Cover Montana; Kalli Jacquay, Maternal Care Navigating Pre & Peri-natal Health Insurance Coverage Coordinator, Logan Health 11:00 AM - Noon Lunch Break Noon - 1:00 PM Coverage to quality: utilizing coverage to improve outcomes for diabetes, Breakouts Session: breast, cervical, and lung cancer 1:00 PM - 2:00 PM New enrollment assister meet up Breakout Session: 1:00 PM - 2:00 PM Strategies to re-engage and re-enroll folks in Montana Medicaid Putting it back together 2:30 PM - 3:30 PM Representatives from the Montana Marketplace Carriers: BCBS, Mountain 2024 Montana Marketplace Plans & Prices Health COOP, & PacificSource 4:00 PM - 5:00 PM





Source: 2020 Report on Health Cover and Montana's Uninsured, Montana Healthcare Foundation





Source 2020 Report on Health Cover and Montana's Uninsured, Montana Healthcare Foundation





#### Medicaid and CHIP Enrollment July 2023

Data for this dashboard comes from the CHIMES Full Issuance report. This report observes a 90-day look back period to allow for application processing lag, retroactive enrollments, etc.

Dashboard updated monthly.

Dashboard updated 10/3/2023 for Jul 2023.

Questions or Issues with Dashboard?

	Enrolled	Change from Last Month		2021				Ž.	2022				20	23		
Traditional Medicaid Children	100,780	-5,018	300,000													
Traditional Medicaid Adults	61,618	-3,120	200,000 													
Medicaid Expansion Adults	110,388	-8,074	150,000						ŀ							
НМК (СНІР)	19,393	-1,302	50,000													
Total	292,179	-17,514	0 Traditional M		11 1	2 3	3 4 Children	5 6	7	9 10		L 2	3 4	4 5	6	7

Source: https://dphhs.mt.gov/interactivedashboards/medicaidenrollmentdashboard



## Medicaid Unwinding highlights

Unwinding process began in April 2023

Montana will take 10 months to complete all 325,000+ renewals

- Folks will be renewed at some point throughout the 10-month process
- Montana front-loaded renewals in the first five months they also started with MAGI Medicaid and started ABD cases in the 4<sup>th</sup> month
- As of October 1<sup>st</sup>, the state has already started/completed renewals with 84% of all Medicaid cases

Montana is ending 12-month continuous eligibility at the same time the unwind begins



## Cover MT role in Medicaid Unwind

(844) 682-6837 | covermt.org

- Create educational resources in partnership with DPHHS
- Provide public education to help community partners prepare
- Navigators assist enrollees with questions about redetermination
- Navigators assist folks no longer eligible enrollees to avoid a gap in coverage and find affordable health insurance outside of MT Medicaid



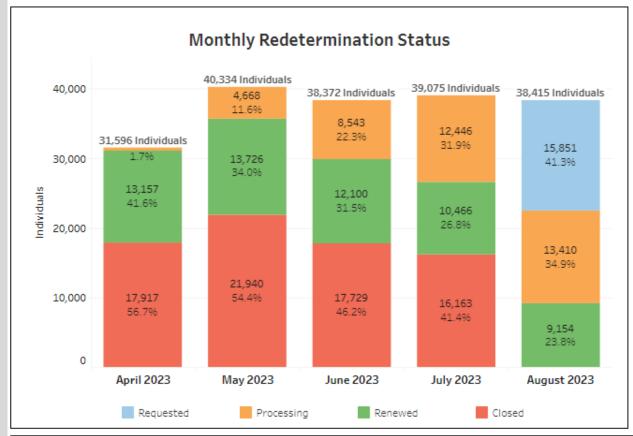
and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the

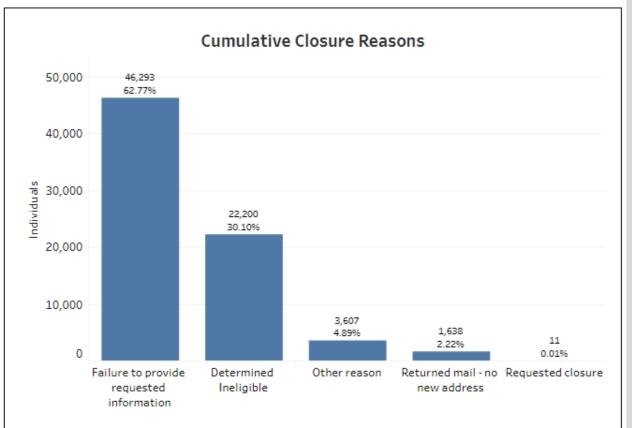
U.S. Government. Cover Montana is a project of the Montana Primary Care Association

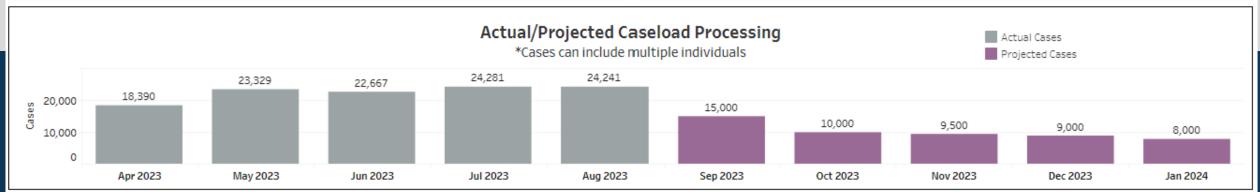




Lesa Evers Cover Montana - Champion for Coverage







Data: DPHHS Medicaid Enrollment Dashboard (May 2023), US Census, Medicaid disenrollment data snapshot as of

8/18/2023	3				,				
County	May 23 AI/AN enrolled in county	May 23 Total Medicaid/H MK enrollment in county	Total county population	AI/AN as a share of total Medicaid/HMK enrollees	Total enrolled as a share of county population	Number	county	a share d	erate loss as f total pre- g Medicaid lation
BIG HORN	6,050	7,099	13,124	85%	54	1,343	10.23%		18.92%
GLACIER	6,646	8,278	13,778	80%	60	1,332	9.67%		16.09%
ROOSEVELT	5,053	6,108	10,794	83%	57	965	8.94%		15.80%
BLAINE	1,982	2,841	7,044	70%	40	551	7.82%		19.39%
ROSEBUD	2,872	3,817	8,329	75%	46	646	7.76%		16.92%
HILL	3,879	7,240	16,309	54%	44	1,145	7.02%		15.81%
GARFIELD	0	340	1,173	0%	29	79	6.73%		23.24%
LAKE	5,852	11,635	31,184	50%	37	<b>1</b> \958	6.29%		16.83%
MINERAL	78	1,764	4,535	4%	39	78	6.13%		15.76%
YELLOWSTONE	7,293	47,285	164,731	15%	29	8,449	5.13%		17.87%
LINCOLN	217	7,347	19,67	3%	37	1,006	5.11%		13.69%
PHILLIPS	461	1,517	4,217	30%	36	5% 213	5.05%		14.04%
SILVER BOW	747	11,492	35,133	7%	/ 33	1,769	5.04%		15.39%
PONDERA	678	2,565	5,898	26%		291	4.93%		11.35%
MUSSELSHELL	72	1,622	4,730	4%	/ 34	230	4.86%		14.18%
PETROLEUM	0	95	496	0%	19	9% 24	4.84%		25.26%
FLATHEAD	1,056	29,798	104,357	4%	29	4,938	4.73%		16.57%
SWEET GRASS	21	701	3,678	3%	19	172	4.68%		24.54%
CARBON	60	2,415	10,473	2%	23	489	4.67%		20.25%
01110500	***	1000	40 400	400/		.01	7-7/	Ā	1/V V



## Coverage loss for Montana kids

As of August 25<sup>th</sup>, there were 55,000 Montanans who had lost Medicaid coverage. Of those, 25,150 are kids, making up 46% of the coverage loss.

## How to help prevent coverage loss

Make sure the OPA has the most up-todate contact information for all people enrolled in Medicaid and Healthy MT Kids on ongoing basis

Make sure folks are checking their mail

Help patients create accounts in apply.mt.gov (SSP) and sign up to receive notices via both email and mail – Cover Montana has a guide to help

Think about your role and community partners who can help with:

- Answer renewal questions and complete renewal packets
- Provide information about Medicaid appeals
- Help folks reenroll in coverage.



# What can we do about the state of our unwinding?

For folks who are **no longer eligible**, help them find other coverage options.

For folks who lost coverage, but think they still qualify for Medicaid/HMK

- Help them **reapply**
- Help them understand their rights to **appeal** if they think the coverage loss was an error
- You can both file an appeal and reapply!

If consumers/patients want to share their **story**, refer them to Montana Women Vote, a statewide non-profit doing story collection work about unwinding.

Consumers and patients are also free to call their **elected officials** for help and/or to convey their experience.

Assisters should talk to their **organizational leadership** so they understand what is happening on the ground.

Marketplace Medicaid	Unwinding Report - HealthCare.gov								
State	Metric  ▼	April 2023: Net Count	April 2023: Net Percentage <sup>a</sup>	May 2023: Net Count	May 2023: Net Percentage <sup>a</sup>	June 2023: Net Count	June 2023: Net Percentage <sup>a</sup>	June 2023: Cumulative Count	June Cumulative 2023: Percentage <sup>a</sup>
HealthCare.gov Total									
HealthCare.gov Total	Marketplace Consumers with Previous Medicaid or CHIP Enrollment	67,683	100%	161,687	100%	206,722	100%	436,092	100%
HealthCare.gov Total	Consumers Who Applied for Marketplace Coverage and were Determined Medicaid/CHIP-Eligible or Potentially Medicaid/CHIP-Eligible	8,751	13%	20,157	12%	23,755	11%	52,663	12%
HealthCare.gov Total	Consumers who Applied for Marketplace Coverage and were Determined QHP-Eligible	58,802	87%	141,240	87%	182,719	88%	382,761	88%
HealthCare.gov Total	Eligible for APTC	52,537	78%	124,685	77%	160,008	77%	337,230	77%
HealthCare.gov Total	Not Eligible for APTC	6,265	9%	16,555	10%	22,711	11%	45,531	10%
HealthCare.gov Total	Consumers with a QHP Selection	45,751	68%	107,326	66%	138,266	67%	291,343	67%
Montana									
Montana	Marketplace Consumers with Previous Medicaid or CHIP Enrollment	NR	NR	1,397	100%	1,691	100%	3,088	100%
Montana	Consumers Who Applied for Marketplace Coverage and were Determined Medicaid/CHIP-Eligible or Potentially Medicaid/CHIP-Eligible	NR	NR	480	34%	573	34%	1,053	34%
Montana	Consumers who Applied for Marketplace Coverage and were Determined QHP-Eligible	NR	NR	911	65%	1,118	66%	2,029	66%
Montana	Eligible for APTC	NR	NR	646	46%	863	51%	1,509	49%
Montana	Not Eligible for APTC	NR	NR	265	19%	255	15%	520	17%
Montana	Consumers with a QHP Selection	NR	NR	469	34%	591	35%	1,060	34%

Link to Montana data:

https://data.medicaid.gov/dataset/9a83ba5e-05f5-47f5-82de-

f3a59233a912/data?conditions[0][property]=state&conditions[0][value]=Montana&conditions[0][operator]=%3D

Sources: HealthCare.gov application and policy data through July 2, 2023, and T-MSIS Analytic Files (TAF) through June 2023 (TAF version 7.1 with T-MSIS enrollment through the end of June 2023). Data include consumers in HealthCare.gov states where the first unwinding renewal cohort is due on or after the end of reporting month (state identification based on HealthCare.gov policy and application data). State data start being reported in the month when the state's first unwinding renewal cohort is due. Apr data include Arizona, Arkansas, Florida, Indiana, Iowa, Kansas, Nebraska, New Hampshire, Ohio, Oklahoma, South Dakota, Utah, West Virginia, and Wyoming. May data include the previous states and the following new states: Alabama, Illinois, Louisiana, Michigan, Missouri, Mississippi, North Carolina, Texas, and Virginia. June data include the previous states and the following new states: Alabama, Illinois, Louisiana, Michigan, Missouri, Mississippi, North Carolina, Texas, and Virginia.

#### Note

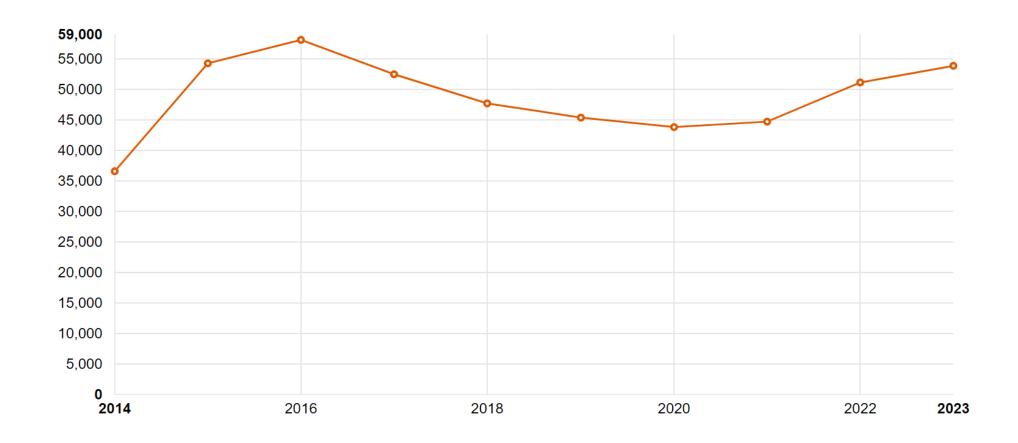
- 1. This table includes Marketplace consumers who submitted a HealthCare.gov application on or after the start of each state's first reporting month who can be linked to an enrollment record in TAF that shows Medicaid or CHIP enrollment between March 2023 and the latest reporting month.
- 2. Cumulative counts show the number of unique consumers from the included population who had a Marketplace application submitted or a HealthCare gov Marketplace policy on or after the start of each state's first reporting month through the latest reporting month. Net counts show the difference between the cumulative counts through a given reporting month and previous reporting months.
- 3. The data used to produce the metrics are organized by week. Reporting months start on the first Monday of the month and end on the first Sunday of the next month when the last day of the reporting month is not a Sunday. For example, the April 2023 reporting period extends from Monday, April 3 through Sunday, April 30.
- 4. Data are preliminary and may change as states resubmit T-MSIS data or data quality issues are identified. April and May data were rerun since July and now include Utah's TAF data for March and April 2023.
- 5. Data do not represent Marketplace consumers who had a confirmed Medicaid/CHIP loss. Future reporting will look at coverage transitions for people who lost Medicaid/CHIP
- 6. See the data and methodology documentation for a full description of the data sources, measure definitions, and general data limitations

#### Data notes:

- 1. Data as of August 22, 2023. Utah has a data quality issue and TAF data for this state are unavailable for May and June 2023. South Dakota has a data quality issue and TAF data for this state are unavailable for June 2023. These states' numbers only include consumers who were enrolled in Medicaid or CHIP in another state, but submitted a HealthCare.gov application for coverage in the state.
- 2. Oklahoma has a data quality issue and more than 3 percent of beneficiaries in TAF have 3 or more enrollment spans in a year. For more information about this data quality check, see DQ Atlas (https://www.medicaid.gow/dq-atlas/welcome).
- a Percent of total Marketplace consumers with previous Medicaid or CHIP enrollment.
- Some cells have a value of "NR" or not reported. State data starts being reported in the month when the state's first unwinding renewal cohort is due.
- APTC: Advance Premium Tax Credit; CHIP: Children's Health Insurance Program; NR: Not reported; QHP: Qualified Health Plan







 Number of Individuals Who Selected a Marketplace Plan



Source: Kaiser Family Foundation: https://www.kff.org/health-reform/state-indicator/marketplace-enrollment/



## Marketplace Updates

- The American Rescue Plan extended enhanced Marketplace subsidies until 2025.
- There are new Standardized plans "easy pricing" for 2024 with uniform cost sharing structures, with different premium costs.
- Open Enrollment is November 1<sup>st</sup> January 15<sup>th.</sup>
- The loss of Medicaid coverage SEP extends until July 2024.



# 2023 Policy Update & Looking Ahead to 2025



#### Agenda

- 1. 2023 Legislation
  - 12-month postpartum coverage (HB 2)
  - II. No-cost-share breast diagnostic and imaging (HB 665)
  - III. State Navigator licensing (HB 567)
- II. Medicaid
  - Redetermination
  - II. End of 12 months continuous eligibility (2021 HB 2)
- III. 2025 Legislative Priorities
  - Reauthorize Medicaid Expansion

## 12 month post-partum coverage expansion

#### HB 2 – State Budget:

- Included in Governor's budget in November 2022
- Reduced to 6 months coverage with BH diagnosis in Section B Subcommittee
- Restored to 12 months coverage in full House Appropriations Committee

#### Key Provisions:

- People who are on Medicaid at the time of delivery will maintain Medicaid eligibility for 12 months from that date (increased from 60 day coverage)
- No behavioral health diagnosis required

# No-cost-share breast cancer diagnostic and imaging requirements

#### HB 665:

Sponsored by Rep. Jodee Etchart (R-Billings)

#### Key Provisions:

- No-cost-sharing meands deductible, coinsurance, copayment, or similar out-ofpocket expense
- Diagnostic breast examinations include mammography, MRI, or ultrasound.
- Only applies to state-regulated insurance plans

### State Navigator Certification

#### HB 567:

- Sponsored by Rep. Mary Caferro (D-Helena)
- Supported by Commissioner of Securities and Insurance
- ▶ Eliminated state requirements for navigator certification

#### Key Provisions:

- Only federal training required
- Must document successful completion of federal training to be certified

#### 2023-2024 Medicaid Issues

#### Redetermination:

- More info to come throughout the conference
- Historic and unprecedented redetermination of EVERY Medicaid enrollee including CHIP, HMK, Expansion, Traditional, and other waiver populations (300+K individuals)

#### End of Continuous Eligibility:

- State directed to end continuous eligibility for Medicaid Expansion population in 2021 (HB 2)
- Implemented same time as redetermination.

#### 2025 Legislative Priority

#### Reauthorize Medicaid Expansion:

- "Sunsets" June 30, 2025
- II. 2025 Legislature MUST reauthorize
  - "Lift the Sunset"
    - ► Governor's budget and/or Legislative Strategy?

#### Contact Info:

If you have questions, I'm happy to help answer your questions.

**Stacey Anderson** 

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