

MA Protected Coverage & MA Standard Eligibility Groups

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- During the pandemic, coverage for MA enrollees has been protected by temporary COVID emergency policies. These policies are more commonly referred to as the continuous coverage requirements. The continuous coverage requirements end April 1, 2023, and we will gradually begin to move back to standard eligibility policies.
- Beginning April 1, 2023, the policies and procedures that apply to an enrollee will depend on whether the MA enrollee is in the MA Protected Coverage Group or the MA Standard Eligibility Group.
 - These group distinctions will apply until everyone enrolled in MA as of March 31, 2023 has had their first renewal after we resume conducting renewals. At that point, all enrollees will be subject to standard eligibility policy.

MA Protected Coverage Group

Coverage for enrollees who had MA on March 31, 2023 will remain protected by the temporary COVID emergency policies until their first annual MA renewal after we resume renewals.

An enrollee is in the MA Protected Coverage group until their first renewal if:

- The enrollee applied before April 1, 2023, and was enrolled in MA during March 2023

MA Standard Eligibility Group

MA enrollees not in the MA Protected Coverage Group are in the MA Standard Eligibility Group. Standard MA eligibility policies apply to this group.

An enrollee is in the MA Standard Eligibility group if:

- The enrollee applied for MA on or after April 1, 2023, even if retroactive coverage is approved for March 2023 or earlier
- The enrollee was in the MA Protected Coverage Group and had their first annual MA renewal after we resumed renewals.

Questions?

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Restarting Renewals Timeline

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Restarting Renewals

- The recently enacted Consolidated Appropriations Act 2023 ends the MA continuous coverage requirements on March 31, 2023. April 1, 2023 begins the unwinding process.
- We are proceeding with the first renewal cohort of MA renewals for July 2023, with the final cohort in the unwinding period being MA renewals for June 2024.
- Adjustments to the timeline will be made if there is additional guidance from the Centers for Medicare & Medicaid Services (CMS).

Questions?

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DATA Match

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Data Match after Continuous Coverage Requirements End

- Data Match: Data matching is a process for identifying public program enrollees who may no longer be eligible for that program.
- Periodic Data Match (PDM)
 - Process that uses electronic data sources to identify Medical Assistance for Families with Children and Adults (MA-FCA) enrollees during their 12-month period of eligibility.
 - Will begin after everyone who is on MA has had their renewal.
- MAXIS similar process
 - MA Protected Eligibility Group will not be closed if the match causes an adverse action prior to their renewal
 - Standard Eligibility Group may have increased spenddown, premium increase or loss of coverage
- PARIS Match: Enrollees who have been identified as having other MA coverage in another state will close if they have coverage in another state.

Questions?

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Backlogged Changes in Circumstance

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Changes in Circumstance During Continuous Coverage

- The backlog: Record of adverse changes in circumstance (CICs) that were reported during continuous coverage that could not be acted upon
- Workers have been instructed not to process changes in circumstance that close coverage, increase premiums or cost sharing, or reduce benefits.
 - For the MA Protected Coverage Group, this will continue until their first renewal after the end of continuous coverage
 - Normal CIC processing applies to the Standard Eligibility Group
- Instead, workers have been instructed to track adverse changes and maintain coverage for enrollees

Backlogged CICs in the Unwinding

- During the unwinding period beginning April 2023, we are instructing workers not to process previously reported (aka backlog) changes in circumstance.
- When renewals resume in the unwinding process, an enrollee's renewal will serve as the "source of truth" for the most up-to-date eligibility information.
 - If an enrollee called to report a change, they should report it again on their renewal form if the change still applies.
- Exception: MA-LTC cases with a previously reported uncompensated transfer will be evaluated to see if a transfer penalty will apply after the unwinding process begins

Uncompensated Transfers

Exception:

- The transfer of an asset or income without adequate compensation may result in a period of ineligibility for MA-LTC. MA does not pay for MA-LTC services during this period.
- Uncompensated transfer policies apply to people receiving LTC services in a nursing facility or with a Home and Community Based Waiver.
- We have not been imposing transfer penalty periods during the temporary COVID rules for MA-LTC enrollees.
- Old transfers will be reviewed when the unwinding period begins. MA-LTC coverage may close for an uncompensated transfer, but MA will remain open for those in the MA Protected Group.

What will be done with old changes that an MA enrollee reported?

- We are acting on beneficial changes as usual
- We will not review or act on old adverse changes, unless there is an uncompensated transfer for an MA-LTC enrollee
- We will use the information provided on a renewal to redetermine a person's eligibility

Questions?

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