

# MEDICAID REDETERMINATION

Agency for Health Care Administration,  
Department of Children and Families,  
and  
Florida Healthy Kids

October 11, 2023



HealthyKids™

# What is Medicaid?

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Medicaid is a federal program through which states partner with the federal government to provide health care coverage to low-income children, families, elders, and people with disabilities.

The federal government establishes basic mandatory program requirements.

States choose whether to participate.

Jointly financed: federal and state governments share the cost.

Each state develops a unique Medicaid program based on federal rules – subject to federal Centers for Medicare and Medicaid Services (CMS) approval.

# Mandatory and Optional Medicaid Groups

- The federal government requires state Medicaid programs to cover “mandatory groups” and allows for coverage of “optional groups.”
  - Mandatory groups: Categories of people that must be covered.
  - Optional groups: States may choose to cover additional federally-approved groups.
- The Florida Medicaid program outlines covered groups through its Medicaid state plan and various waivers.

## Mandatory

Low Income:

- Children
- Pregnant Women
- Parents
- Seniors (adults 65 years of age and older receiving Medicare who also qualify for Medicaid)

Foster Care/Former Foster Care to Age 26

SSI Recipients

## Optional (Examples)

Medically needy

Children 19 and 20

Lawfully residing children during their first 5 years

Breast and Cervical Cancer Program Enrollees

Family Planning Waiver

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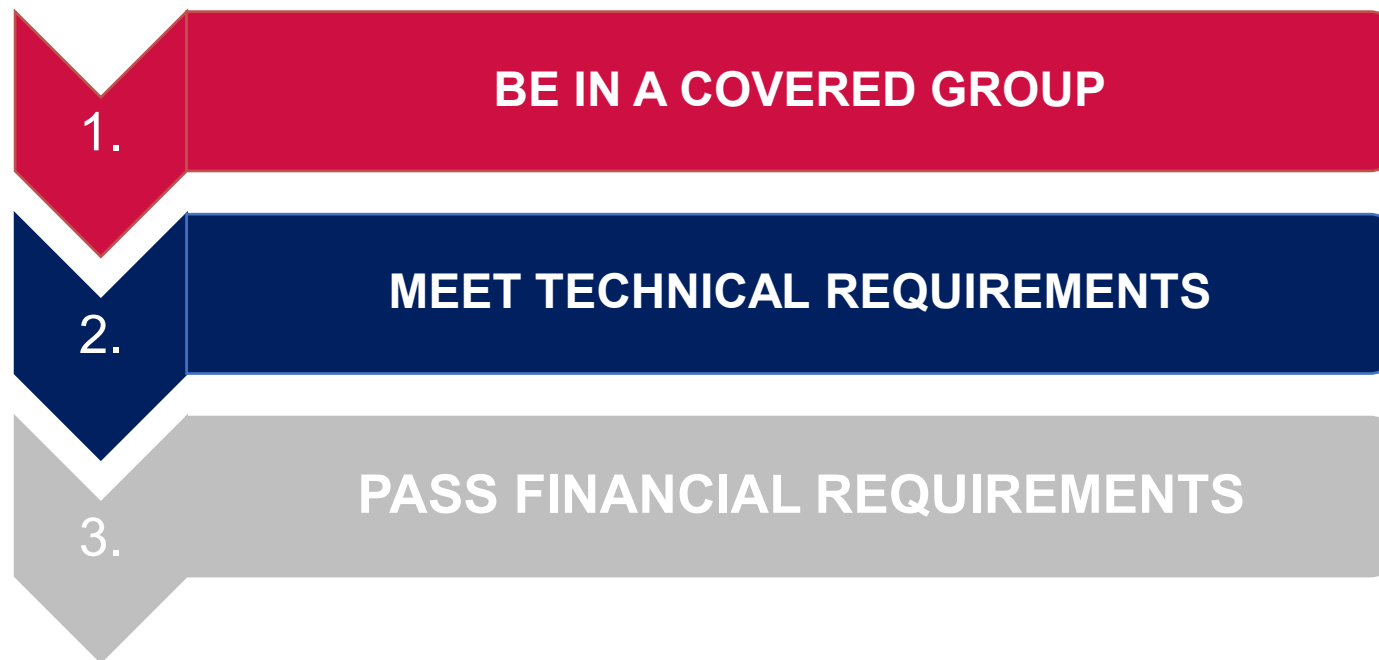
# Florida Medicaid Income Limits

Group	FPL Level
Children Under Age 1	200% FPL
Children 1 through 18	133% FPL
Pregnant Women	185% FPL
Parents, Caretakers, Children 19-20	Fixed dollar amount
Home and Community Based Services, Nursing Home, Hospice	222% FPL
Meds A/D	88% FPL
Breast and Cervical Cancer Treatment	200% FPL

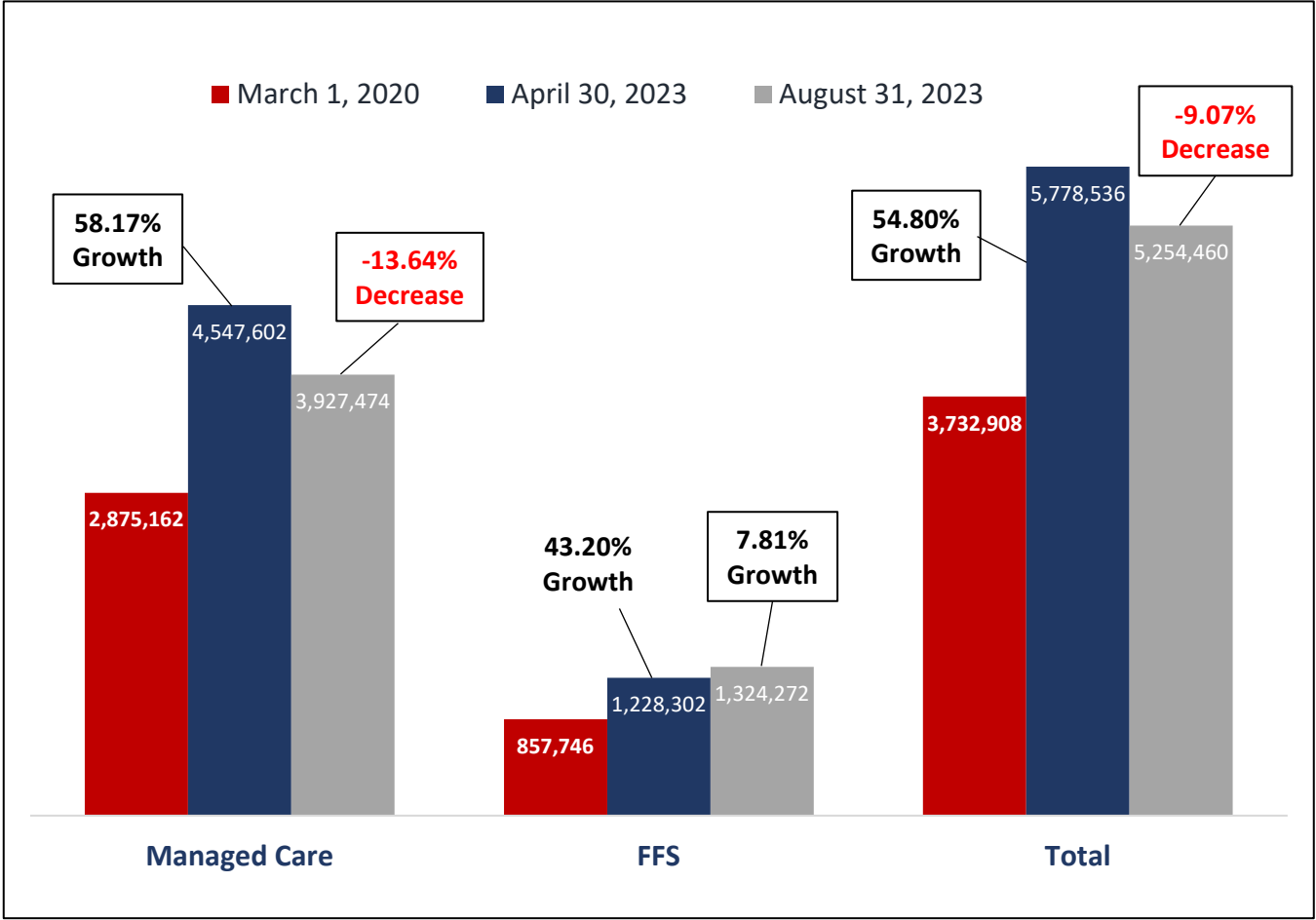
# Who is Eligible to Enroll in Florida Medicaid?

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- Medicaid is an entitlement program, which means that everyone who meets eligibility rules has a right to enroll in Medicaid coverage – states cannot cap their programs.
- In order to be eligible for Medicaid in Florida, a person must:



# Impact of Public Health Emergency on Enrollment

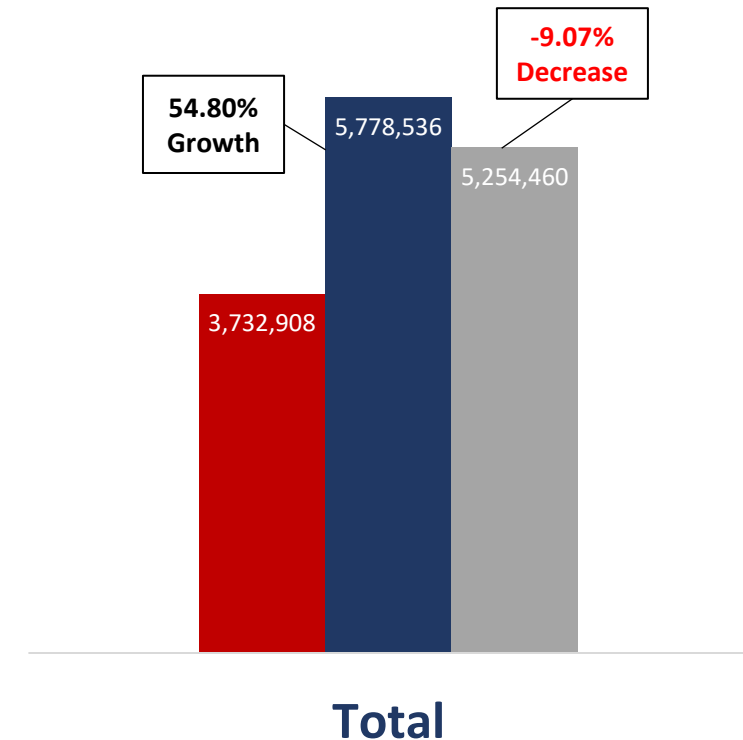


Since March 2020, Medicaid enrollment increased by over 1.5 million recipients to nearly 5.3 million (as of August 31, 2023).

The chart reflects the change in enrollment from March 1, 2020 through August 31, 2023.

# Impact of Public Health Emergency by Eligibility Category

- Overall, Medicaid enrollment increased by 54.8% from March 2020 to April 2023.
- Since April 2023, Medicaid enrollment decreased by 9.07%.
- Some groups experienced higher growth since March 2020:
  - For example, Temporary Assistance for Needy Families (TANF) (includes Children, Parents/Caretakers and Pregnant Women) with an increase of 75.5% or 1,641,650 enrollees.
  - Per member per month cost for those in the TANF category: \$210.20.
- While others experienced lower growth:
  - For example, SSI eligible (the aged, blind and disabled) saw an increase of just 9.4% or 66,451 enrollees.
  - Per member per month cost for those in the SSI category: \$935.01.



# Federal Consolidated Appropriations Act, 2023

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- States must provide coverage for children under 19 for 12 months.
- Makes permanent the state option for Medicaid postpartum coverage for 12 months.
- Ends “Continuous Coverage” effective April 1, 2023.
- Updates to Enhanced FMAP rate:
  - The CARES Act provided a **6.2 percentage point increase** in federal Medicaid matching funds to help states respond to the COVID-19 pandemic.
  - 5% from April to June 2023.
  - 2.5% from June to September 2023.
  - 1.5% from October to December 2023 (**currently 59.46%**).
- To continue receiving the enhanced Medicaid matching rate, states must:
  - Follow federal Medicaid eligibility requirements.
  - Attempt to ensure updated beneficiary contact information.
  - Make a good faith effort to contact current enrollees by using more than one modality (e.g., hard copy letter and text message).



# Medicaid Eligibility by DCF

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Individuals potentially eligible for Medicaid include:

- Pregnant women
- Parents and other caretaker relatives
- Children up to age 21
- Former foster care children up to age 26
- Aged, blind, or disabled not currently receiving SSI

All enrollees must meet eligibility requirements such as identity verification, residency, citizenship, and cooperation with child support.

Enrollees must verify their eligibility every 12 months.

Some enrollees may be subject to asset limits for eligibility determination.

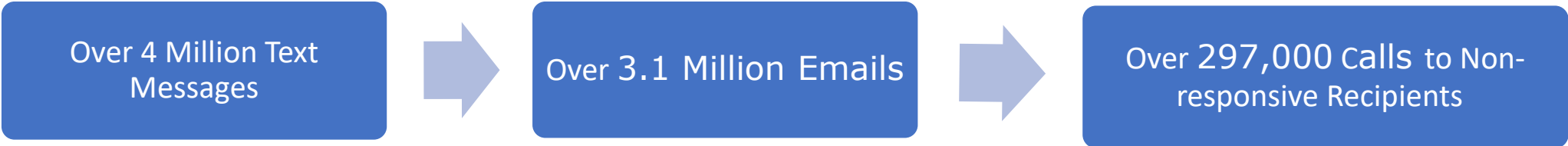
# Medicaid Redetermination Schedule

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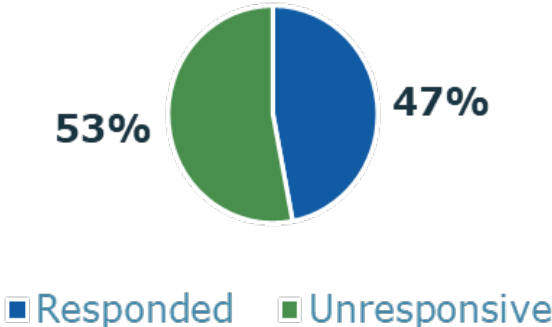
- 4.6 million Medicaid recipients will have their cases redetermined by the Department over the 12-month unwinding period.
- During the “Continuous Coverage” period, Florida continued to request eligibility information to ensure a data-driven approach to redeterminations.
- Redeterminations prioritized based on:
  - Recipients whose submitted information during the continuous coverage period demonstrated ineligibility.
  - Recipients who had not used their Medicaid benefit in the last 12 months.
- Remaining recipients are reviewed on their regularly scheduled renewal date, aligned to coincide with other members within the household, or their renewal date for SNAP or TANF benefits.
- Vulnerable populations (e.g., children with complex medical needs, as defined by AHCA) will be last in the redetermination schedule.

# Robust Communication Strategies

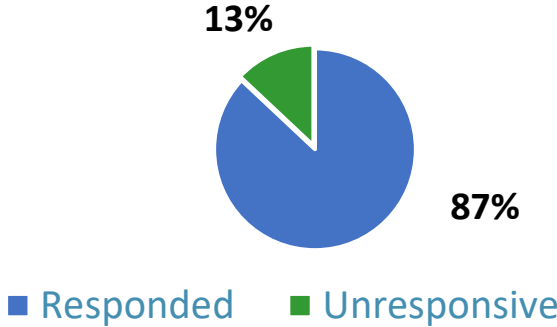
- The Department developed extensive outreach via email, texting, and automated calls. Medicaid recipients received 5-13 contact attempts from the Department.



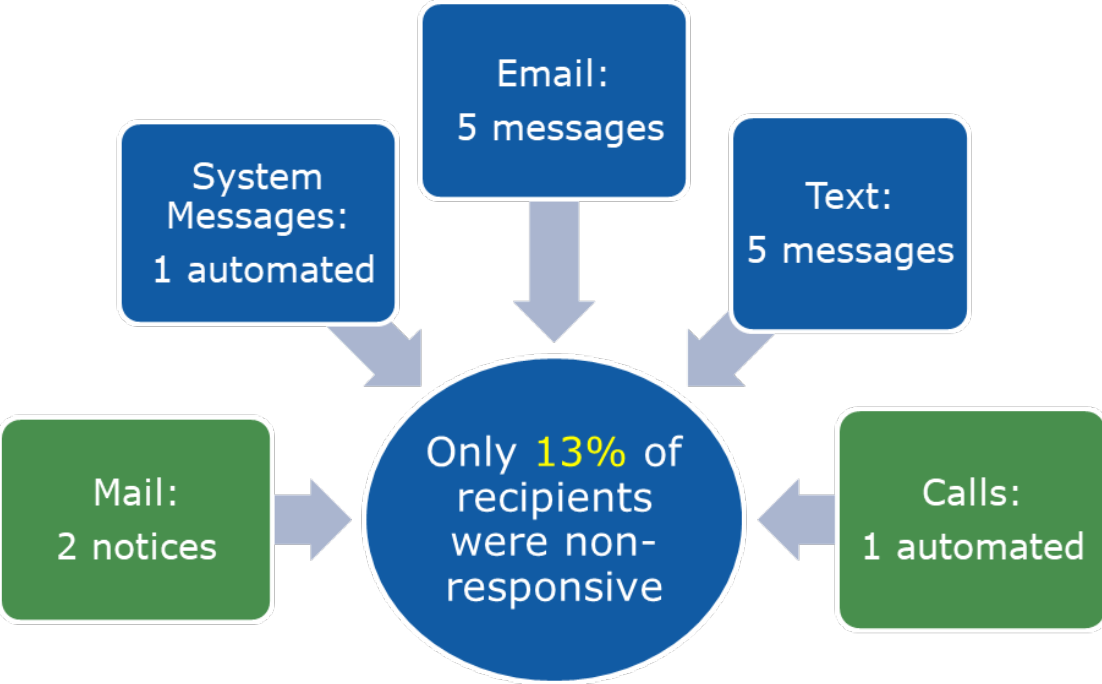
Pre-Pandemic Response Rate



Current Response Rate



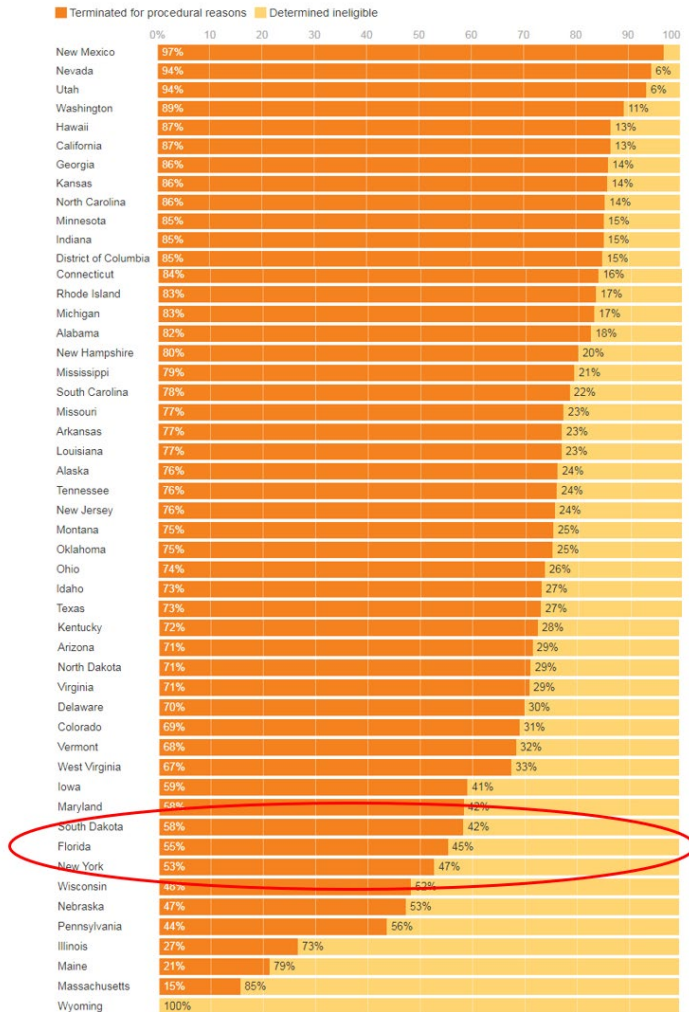
# Robust Communication Strategies



- Due to Florida’s robust outreach communications plan, Florida is performing better than the national average for procedural disenrollments for not responding. This means more Floridians are responding to their Medicaid redetermination notices than the national average.



# National Procedural Disenrollments



- National data as of October 2, 2023, shows of all recipients who were disenrolled, 73% were disenrolled for procedural reasons.
  - Procedural terminations include recipients who do not provide information necessary to complete a redetermination.
- Florida has one of the lowest national rates of procedural terminations, ranked 9th.

Source: Kaiser Family Foundation's *Medicaid Enrollment and Unwinding Tracker* as of October 2, 2023



# Redetermination Outcomes - Status

From April 2023 through August 2023, over 2.2 million individuals' Medicaid eligibility was redetermined.

1.5 million (67%) remain eligible

746,000 individuals (32%)  
no longer eligible

243,000 individuals  
referred for Medically  
Needy coverage

- Every child no longer eligible is referred to Florida Healthy Kids.
- Every adult no longer eligible is referred to the federal marketplace or their Medicaid health plan to review other options.
- 2.4 million remaining individuals will be redetermined between September 2023 and March 2024.

# Supporting Florida Families

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Processing Medicaid Eligibility cases and providing client support

2,700 dedicated employees

Dedicated Medicaid Redetermination phone line to assist Medicaid recipients with a current wait time less than

5 minutes

Processing cases faster than the 45 day federal standard

22 days

During the months of April, May, June, July, and August, client support answered

1.8 million calls

# Ample Safeguards in Place

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- Top priorities:
  - Ensure that those who are eligible maintain their coverage
  - Provide available coverage options to those no longer eligible
- Individuals who apply retain Medicaid coverage until a determination is made.
- Recipients who do not submit a redetermination have 90 days to submit a late application. If they are determined to be eligible, their coverage will be reinstated retroactive to their closure date.
- Individuals who feel that they were incorrectly determined ineligible have 90 days to appeal.



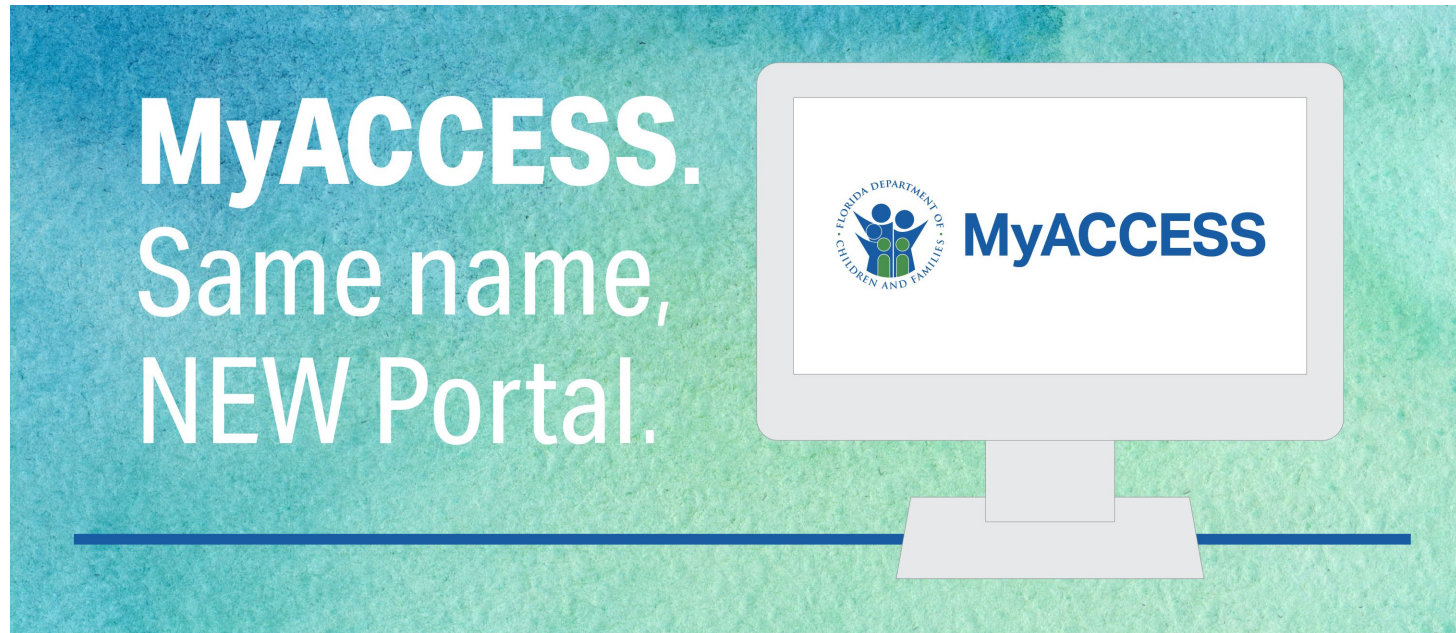
# Enhanced Vulnerable Population Outreach

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- DCF coordinated with AHCA to place these cases at the end of the redetermination schedule, allowing for enhanced outreach efforts.
- Collaboration with Managed Care Organizations to inform households of process and options.
- Partner with Florida Healthy Kids for outreach and coverage tracking for cases exceeding Medicaid income thresholds.
- Ensure proactive and personalized assistance for children with complex chronic conditions (as defined by AHCA) during the renewal process:
  - Specialized processing team
  - Outbound call campaign
  - Earlier text messaging campaign

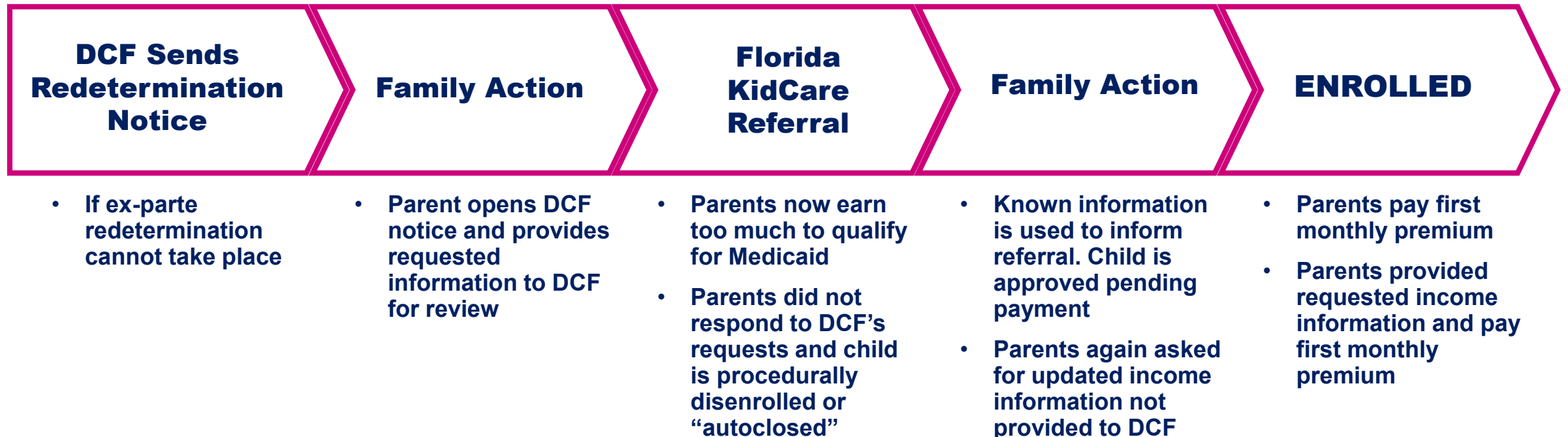
# New My ACCESS Portal Coming Soon

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The Department's new My ACCESS portal, coming later this fall, will give individuals an enhanced and user-friendly platform to efficiently manage their benefits, making the process more convenient and informative.

# DCF to Florida Healthy Kids Referral Pathways



# Florida KidCare Programs

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## Medicaid

Birth through the 19<sup>th</sup> birthday

Department of Children and Families



## MediKids

1 through 4 years old

Agency for Health Care Administration



## Florida Healthy Kids

5 through the 19<sup>th</sup> birthday

Florida Healthy Kids Corporation



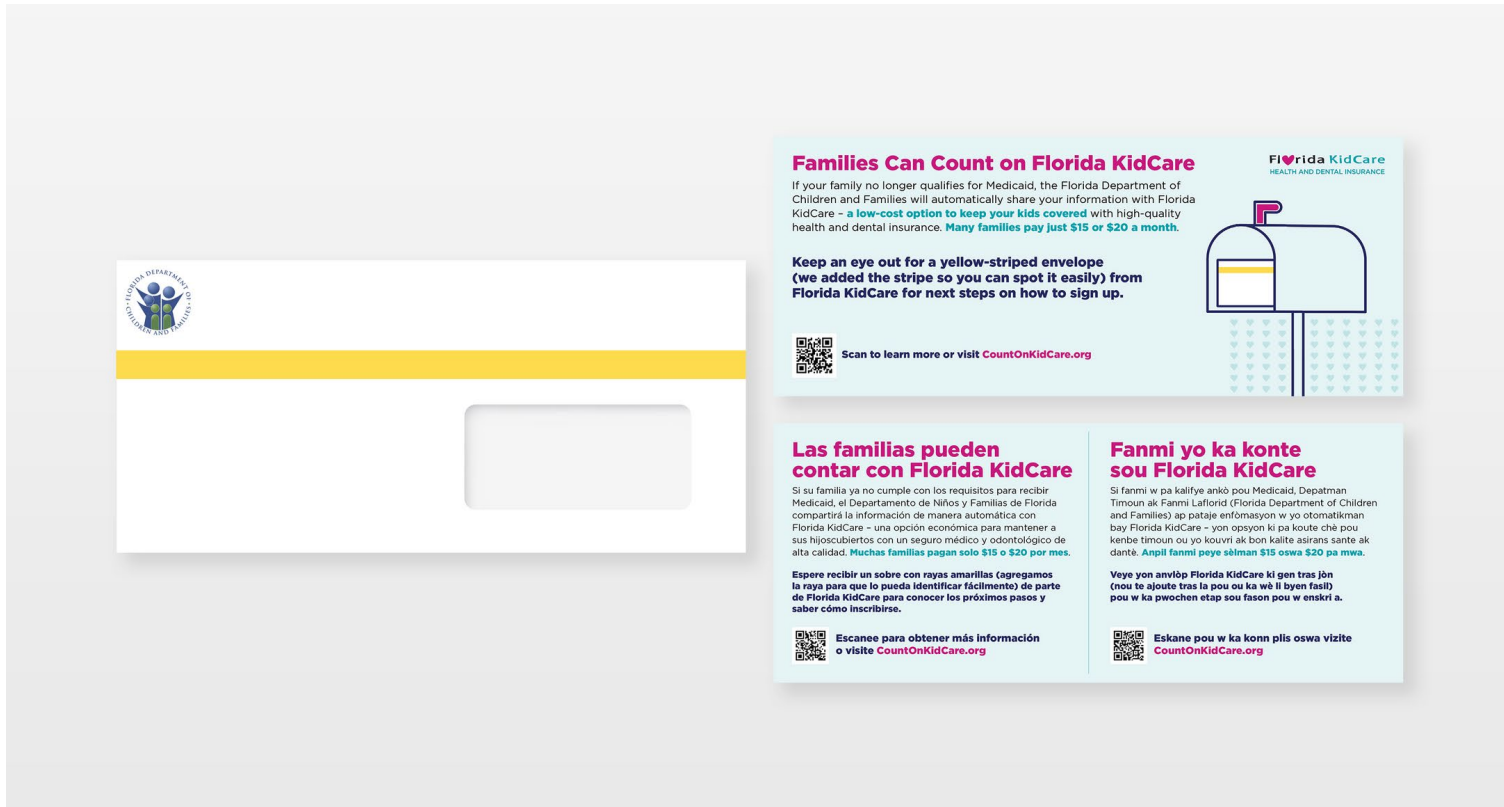
## CMS Health Plan

Birth through the 19<sup>th</sup> birthday with special health care needs

Florida Department of Health

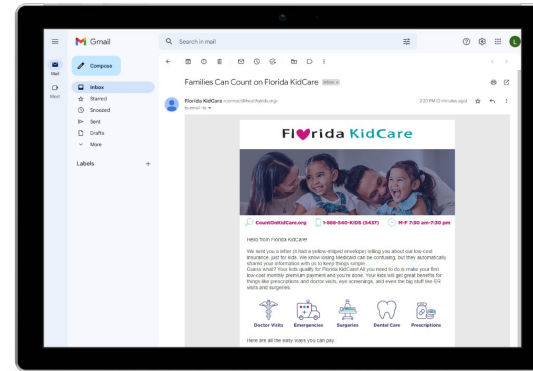
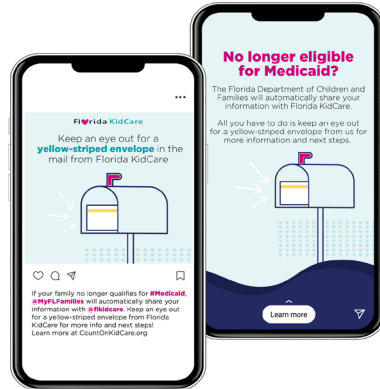


# Aligning Outreach with DCF



- Included paragraph with information about KidCare in DCF Denial Notice letter
- Full-color, double-sided insert in Medicaid Denial Notice letter

# Additional Outreach to Families



## CountOnKidCare.org

Unique landing page for families with questions about the process

## Targeted Digital Ads

Hyper-targeted ads to families who are referred to Florida KidCare

## Text Messages/Emails

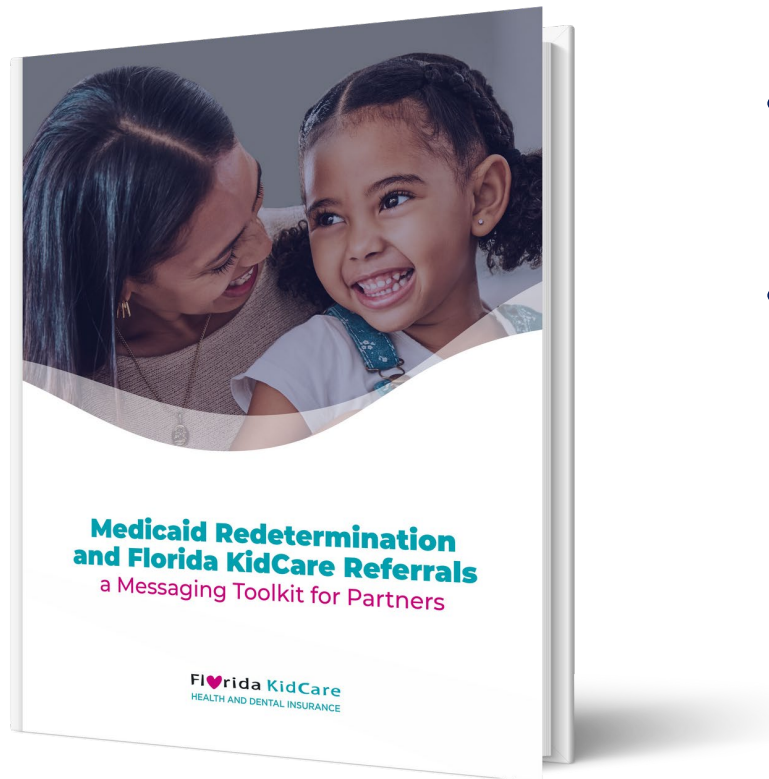
Series of custom messages to prompt families who have not enrolled

## Calls to Families

Outbound call campaign to contact families no longer eligible for Medicaid coverage

# Collaborating with Community Partners

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- Open feedback loop to work cases and share concerns.
- Quarterly conference calls to discuss learnings and best practices.
- Partner toolkit released to ensure consistent messaging, including:
  - Partner DOs and DON'Ts
  - Key messages
  - Sample social media posts and graphics
  - Email templates

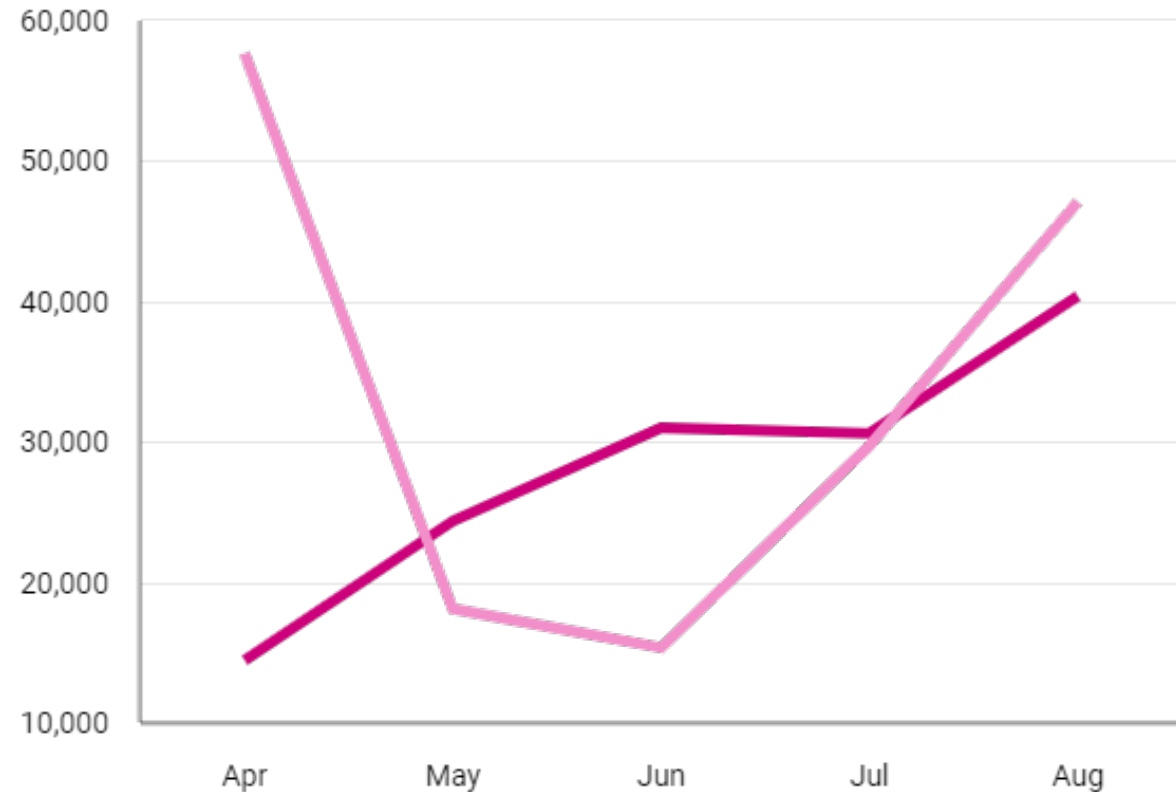
# Referrals and New Enrollment

New enrollment since April

# 67,091

Children referred since April

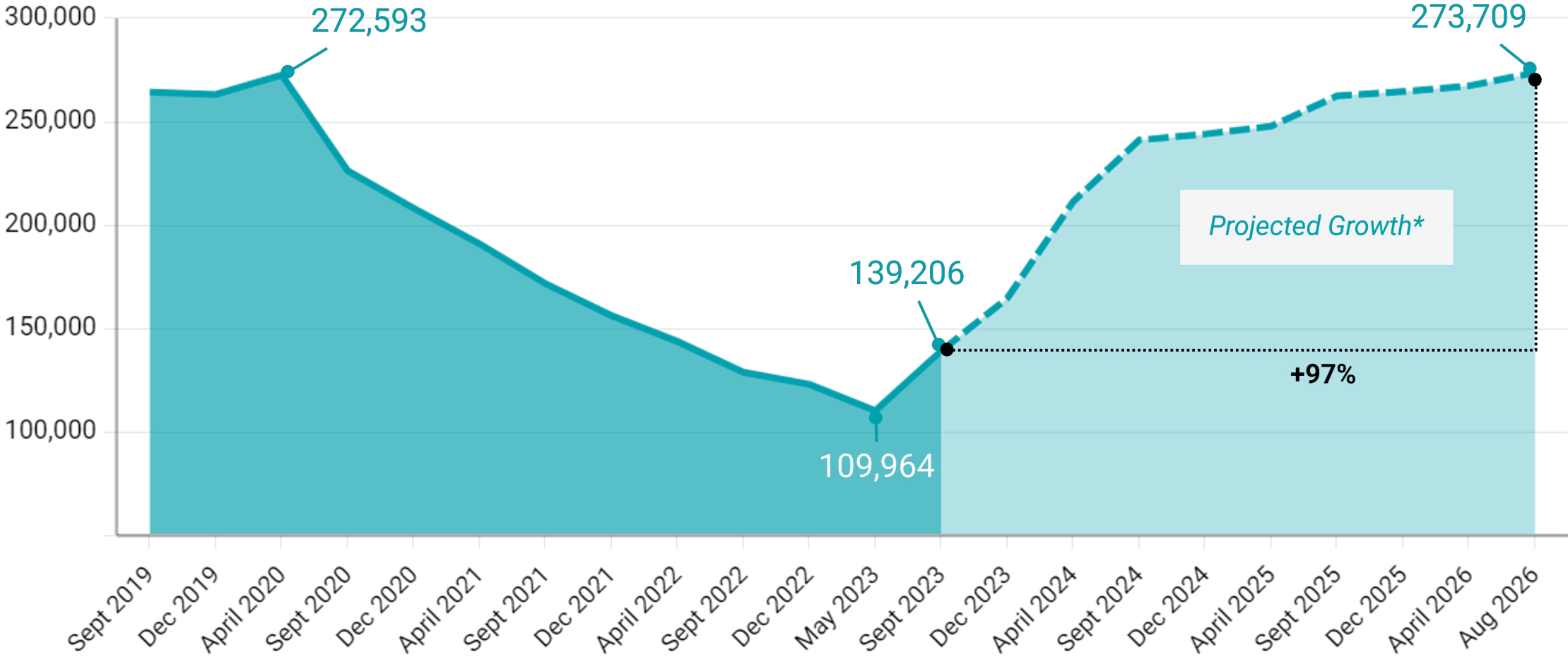
# 140,750



● Children Referred ● Procedural Terminations\*



# KidCare Actual and Projected Enrollment



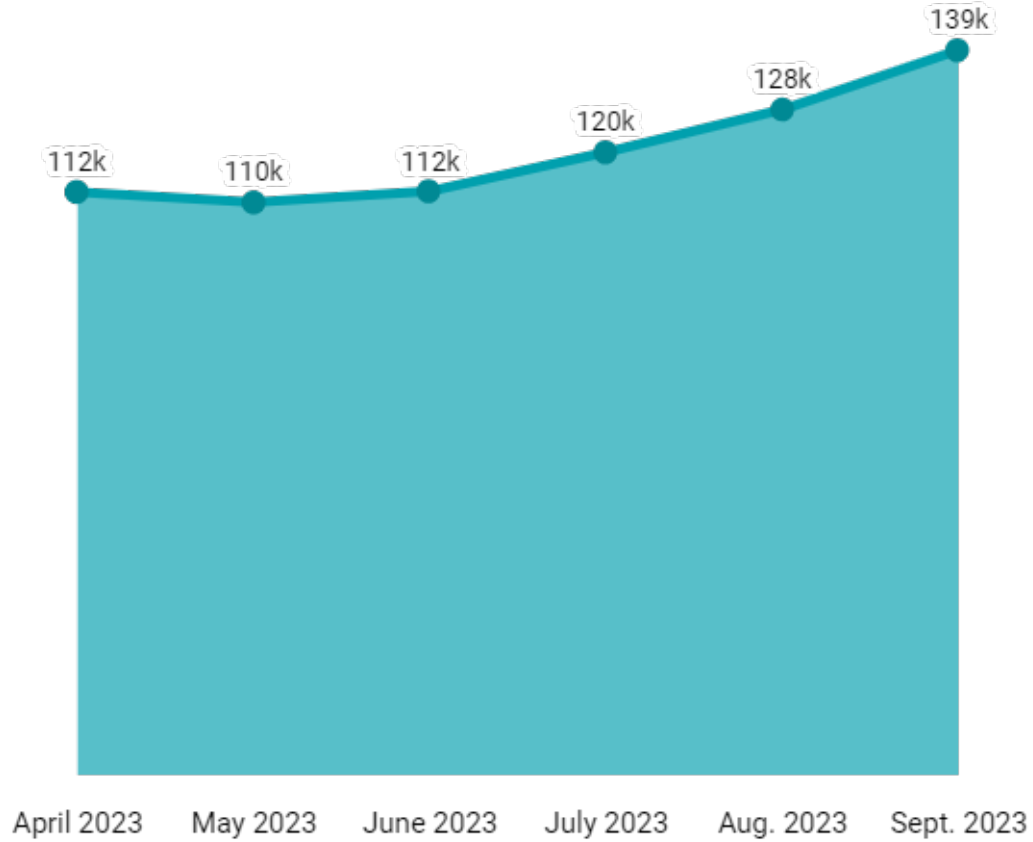
Projected Growth\*

+97%

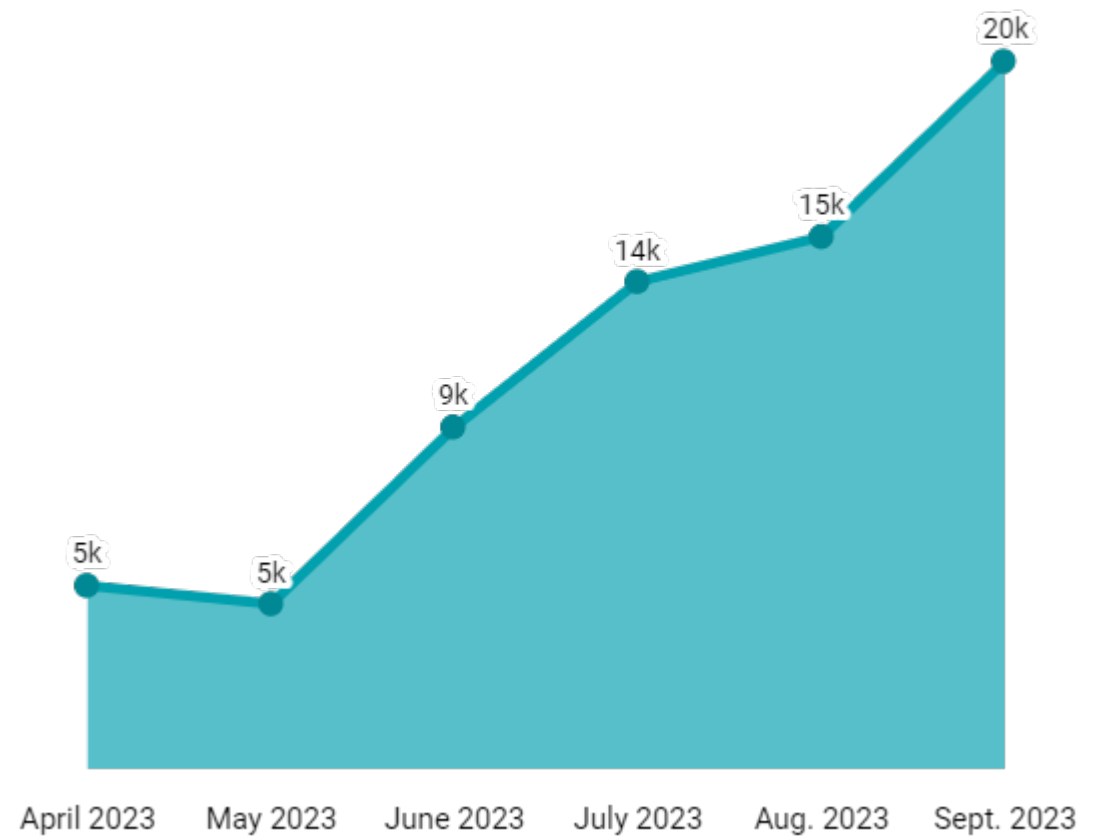
\*Projections are based on the Florida KidCare Caseload Social Services Estimating Conference held on July 18

# Enrollment

## Net Change



## New Enrollment

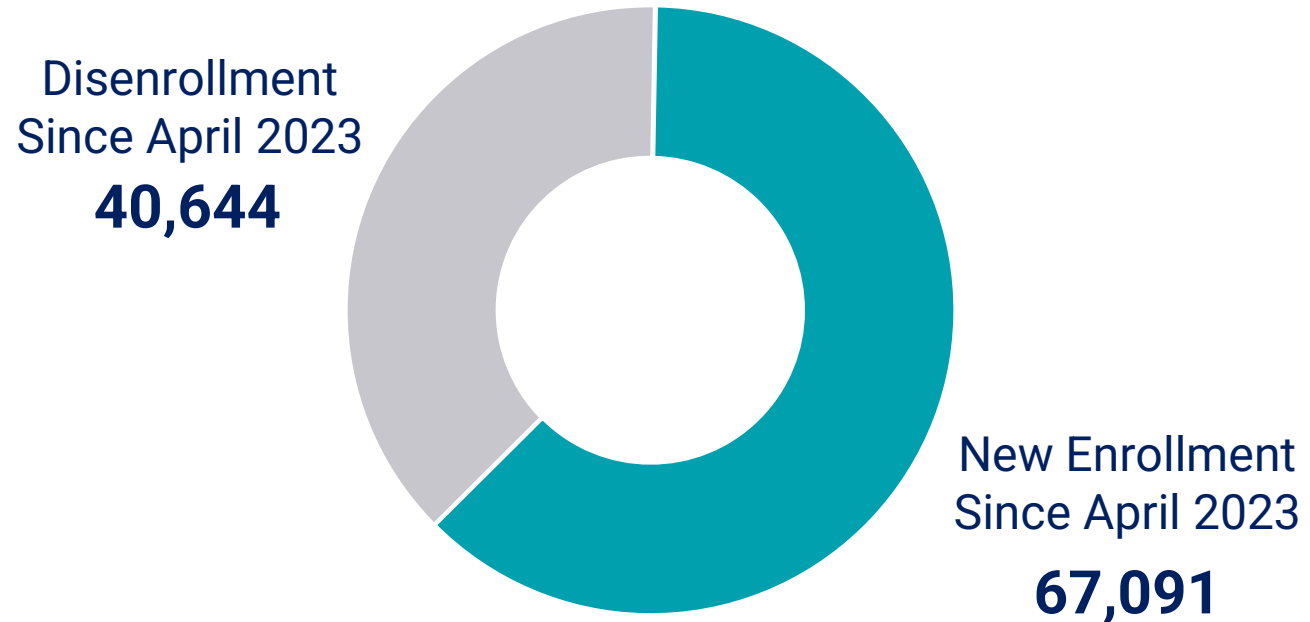


Source: Florida Healthy Kids Corporation Monthly Enrollment Files

# Enrollment Vs. Disenrollment

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## Enrollment Breakdown



Source: Florida Healthy Kids Corporation Monthly Enrollment Files

# Questions

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- For more information about Medicaid Redetermination, visit <http://www.myflfamilies.com/Medicaid>
- Or chat with our virtual assistant [www.myflfamilies.com/services/public-assistance](http://www.myflfamilies.com/services/public-assistance)