Continuous Coverage Unwind May Renewals Data

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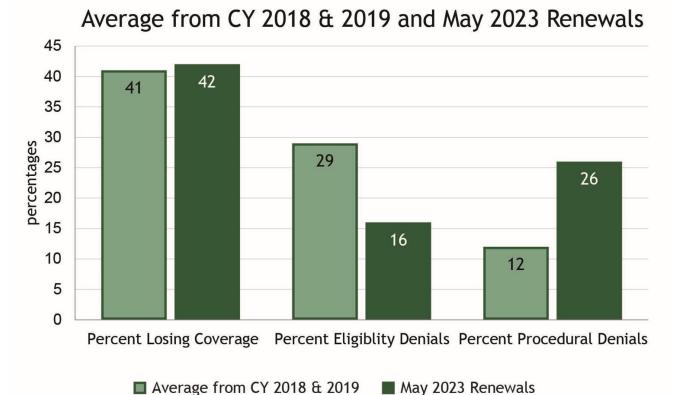


Executive Summary

- First month of return-to-regular renewals, May, matches prepandemic rates - 56% renewed (compared to an estimated 57% pre-pandemic)
- 42% disenrolled (compared to 41% pre-pandemic)
- Of those disenrolled, procedural denials (like not completing renewal paperwork) were 26% compared to 12% previously, and only 3% voluntarily disenrolled (should be higher given our outstanding unemployment rate)
- Those two areas represent targeted outreach opportunities going forward, along with our update your address campaign (36% "whereabouts unknown")



May Renewals & Historical Trends



Based on pre-pandemic data, on average about half of those losing coverage become eligible for Medicaid again within two years.

Actions to reduce
Procedural
Denials
-Continue Update
Your Address
Campaign
-Continue
Targeted Time to
Renew
Messaging/
Providers, RAEs &
partners

Actions to connect eligibility denials to other coverage

- -employer outreach
- -C4 partnership
- -#KeepCoCovered

Other Communications & Initiatives

- ☐ Reporting web page launched July 5
- ☐ Press release went out July 5
- ☐ Adjustments to outreach strategies to targeted groups based on forthcoming data
- ☐ Demographic, race ethnicity and regional breakouts (coming in late July in time for quarterly stakeholder meeting)
- ☐ Increase in other Dept engagement
- ☐ ASK: Seeking grant \$s for additional outreach targeted to procedural denials



Connect for Health Partnership

- Federal reports show "sent to marketplace" as all eligibility denials
- At C4's request, HCPF is sending more targeted lists to C4 (excluding deceased, out of state, etc.)
- C4 is focusing outreach primarily on "over income" and will refine outreach over time
- 11K individuals were over income in May cohort, C4 reported in June BOD meeting reaching about 7K (3K HHs)
- Ongoing outreach is expected as "pending" cases are worked
- Feds will start reporting marketplace metrics in October



In addition to....

- Post flyers, posters in your waiting rooms
- Include messaging on patient portals, websites or newsletters
- Play videos in your waiting rooms (closed captioning available)
- Laptop with PEAK open for patients to check their renewal dates, update contact info
- Bookmark the PHE Planning Page:
 hcpf.colorado.gov/covid-19-phe-planning
- Sign up for the COVID-19 Public Health Emergency Updates Newsletter
- Register for Next Webinar July 26 1-2:30pm
- Download the Communication Toolkits
- Check the regularly updated FAQs







Get ready to renew your Medicaid coverage now!



Update your contact information and sign up for notifications in the Health First Colorado app and in your PEAK account.



Respond by the date in your letter — you'll get this in the mail and by email.



Don't forget to sign your renewal packet.



Turn in documentation through Health First Colorado app, mail, online at co.gov/PEAK.

What if I don't qualify for Medicaid or CHP+?

You have a limited amount of time to apply for other coverage.

Other health coverage options include:

- Employer coverage, check with your employer to learn about options, rules and deadlines.
- · Coverage through a family member's health insurance.
- Coverage through Connect for Health Colorado (Colorado's official health insurance marketplace). You might qualify for reduced premiums. Visit: connectforhealthco.com/we-can-help/
- Coverage through Medicare, for people age 65 or older or people under 65 with certain disabilities. Visit: doi.colorado.gov/colorado-medicarehealth/drug-insurance-coverage-options
- Coverage for active or former military, naval, or air service through Tricare (active) at tricare.mil/ or VA (veterans) at va.gov/health-care/apply/application/





KeepCOCovered.com

Review Your Options, Stay Covered.

- To get free help enrolling in Connect for Health Colorado marketplace coverage, reach out
 to a certified assister online at connectforhealthco.com/we-can-help/assisters/ or by calling
 855-752-6749. TTY: 855-346-3432.
- To get free help filling out an application for Health First Colorado or CHP+ coverage, or to Application Assistance Site here:

COLORADO
Department of Health Care
Policy & Financing

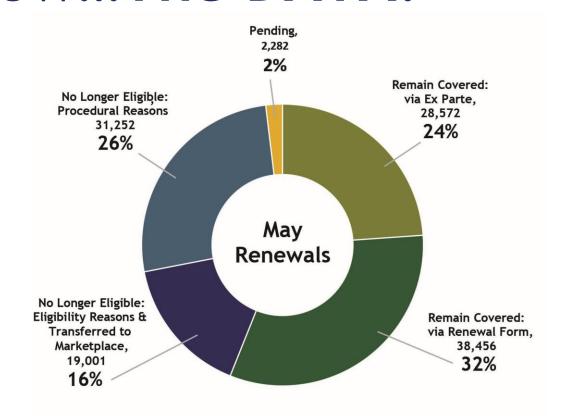
THANK YOU for your collaboration and helping us build awareness!

Appendix

And Now...The DATA!

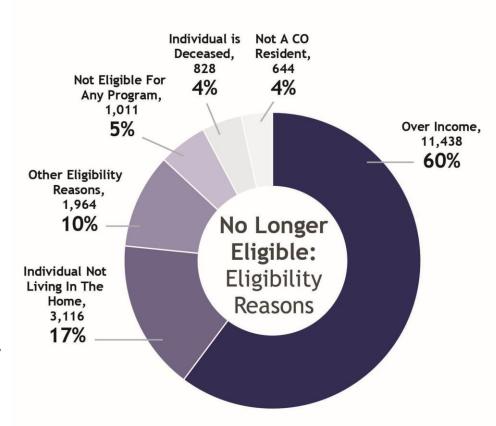
Procedural denials examples: didn't respond, didn't provide verification, didn't sign renewal

Eligibility denials examples: over income, moved to Medicare, out of state, passed away, etc



Top Eligibility Denial Reasons Majority Over Income (60%)

NOTE: CMS data reporting includes all eligibility denials within "sent to marketplace". The marketplace is prioritizing outreach to certain denial reasons.



Top Procedural Denial Reasons Did Not Return Renewal Packet (53%) & Could Not Reach (36%)

