



DELAWARE HEALTH AND SOCIAL SERVICES

Delaware's Plan for Unwinding from the COVID-19 Public Health Emergency

February 2023

dhss.delaware.gov

STATE OF DELAWARE

BACKGROUND

Unwinding

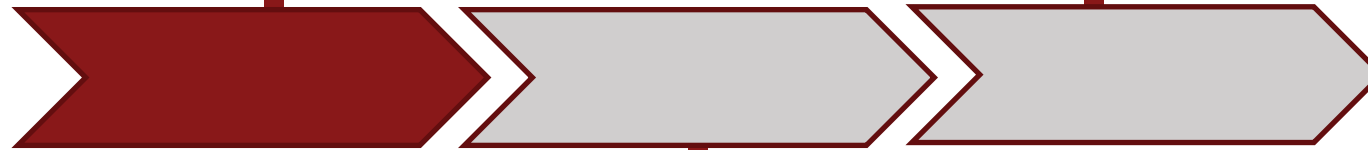
Process by which the State will resume annual Medicaid eligibility reviews.

STATE OF DELAWARE

BACKGROUND

2022

DHSS starts preparations for unwinding.



December 29, 2022

Congress passed the Consolidated Appropriations Act (CAA).



April 1, 2023

Congress designates as date for unwinding to begin.

STATE OF DELAWARE

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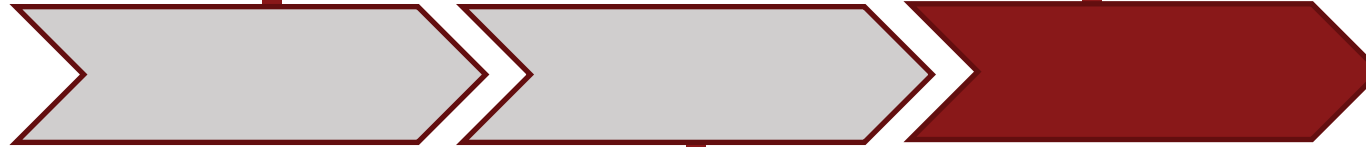
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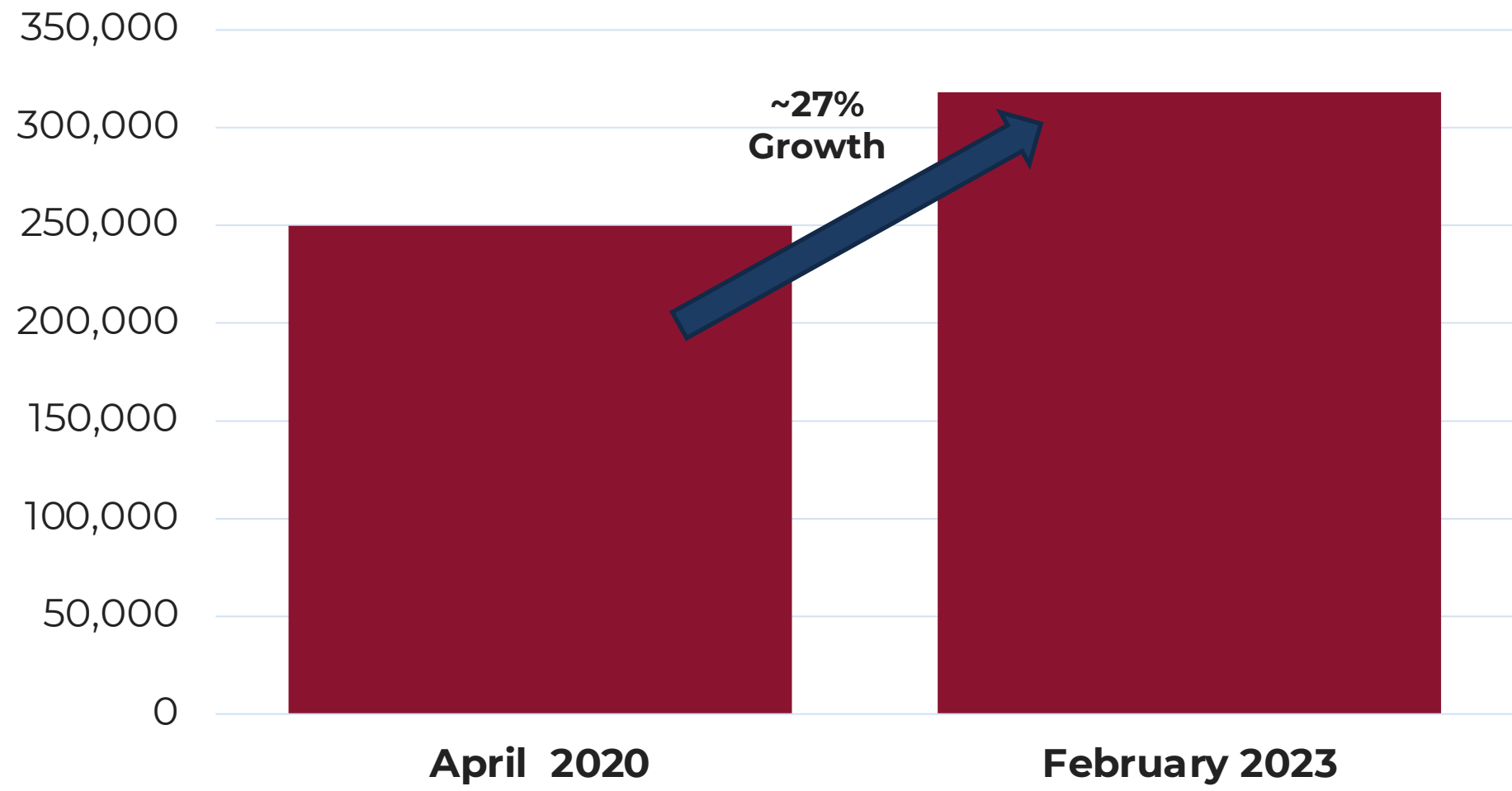


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STATE OF DELAWARE

MEDICAID RECIPIENTS



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MEDICAID RECIPIENTS

During unwinding, DSS/DMMA will process monthly:

- **5,245** non-LTC Medicaid renewals
- **1,831** LTC Medicaid renewals

Based on CMS's requirement that no more than 1/9 of all renewals are completed in any given month.

STATE OF DELAWARE

BACKGROUND

Federal Medical Assistance Percentages (FMAP)

used in determining the amount of Federal matching funds for State expenditures for assistance payments

ENHANCED FMAP PHASEOUT

Year	2023												2024		
Enhanced FMAP	6.2% FMAP			5.0% FMAP			2.5% FMAP			1.5% FMAP			Normal FMAP		
Month	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar

March 31, 2023
End of the
Medicaid continuous
coverage requirement.

December 31, 2023
Enhanced FMAP
phases out by 12/31.

MEMBERS SHOULD EXPECT:



Members **will need to renew** their Medicaid over the course of the unwinding period (April 1, 2023 to June 30, 2024).



Members **will have to update their contact information** or report other changes.



Renewals will be **worked from oldest to newest.**



Members **should be on the lookout for any communication** from the State and follow up on it quickly.



The DSS Customer Relations Unit, DSS/DMMA eligibility workers, the health plans, and other State staff will be **supporting members** through this process.

POPULATION-SPECIFIC CONSIDERATIONS

Postpartum Women

DMMA is pursuing a State Plan Amendment to allow for 12-month continuous coverage for women after the end of a pregnancy; this SPA is pending with CMS.

People Living with I/DD

No automatic closures of cases.

Members Living in a Nursing Facility

No automatic closures of cases.

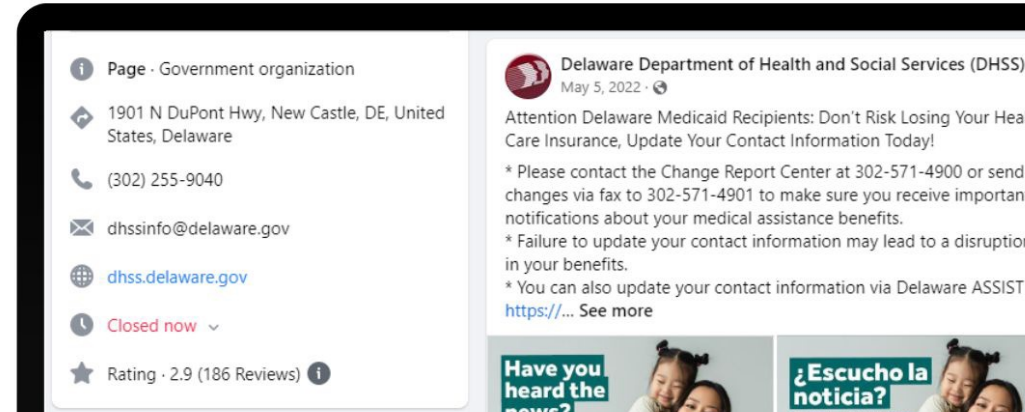
Other Members Eligible for Long-Term Care

No automatic closures of cases.

MEMBER COMMUNICATIONS

DHSS has been in regular contact with members, partners, and stakeholders about unwinding since April 2022.

- *MCO text campaign*
- *Announcements via DMMA, DSS, and DMAP websites, newspapers*
- *Outreach to providers and stakeholders*
- *Provider associations*
- *Community partners and advocates*
- *Flyers and posters placed in state agency and health care provider offices*



COMMUNICATIONS STRATEGY

Audiences

INTERNAL

- DHSS
- DSS Call Centers
- Health Benefits Manager Call Centers
- Delaware State Agencies
- State Executive Leadership

EXTERNAL

- Benefits Recipients
- Elected offices
- Managed Care Orgs (MCOs)
- Marketplace Navigators
- Medical Providers and Facilitates
- Community Organizations
- Consumer Advocates

Tactics


DIRECT MEMBER OUTREACH





- Mail (Notices/Letters)
- Text
- Email
- Phone
- ASSIST Self Service Portal
- DHSS Website Content and Banners
- Social Media Content and Graphics

PUBLIC OUTREACH

- Webinars and Briefings
- Community Partner and Provider Toolkits
- Outreach Materials (Flyers, Posters, Infographics)
- Social Media and Video
- E-newsletter Content
- Media: Press Releases, Media Outreach, and Paid Media Campaign

ONGOING MEMBER COMMUNICATIONS

 **GET READY TO RENEW NOW!**
DON'T RISK LOSING YOUR DELAWARE MEDICAID COVERAGE
Delaware Medicaid renewals restarted on April 1, 2023.

			
STEP 1 Report name changes (your name and household members).	STEP 2 Update your contact information (mailing address, email address, and phone numbers).	STEP 3 Check your mail / email for letters from Delaware Medicaid.	STEP 4 Complete your Delaware Medicaid renewal form (if you get one).

For more information, visit de.gov/medicaidrenewals.

TTY users: 1-855-889-4325.
Español, Kreyòl ayisyen, العربية, Tiếng Việt, or other languages: 1-866-843-7212.

Current social media.



Postcards will be sent.

Find communications materials at:
de.gov/medicaidrenewals

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TRANSITION TO OTHER COVERAGE

**Federally Facilitated Marketplace (FFM)
Navigators in Delaware**



**Westside Family
Healthcare**
westsidehealth.org



Quality Insights
qualityinsights.org

STATE OF DELAWARE

SEQUENCE OF COMMUNICATIONS

For illustrative purposes only



Month of Sequence



Targeted Outreach by MCOs

Closing notices go out

60-day Email and Text

Renewal letters go out

30-day Email and Text

Medicaid coverage renews or ends (e.g. June 1)

Note: this sequence will repeat on a monthly basis for 1/9 of Medicaid members.

This slide illustrates a sequence for individuals with renewals due in April.

STATE OPERATIONAL NEEDS

Division of Social Services (DSS)

- Create **new Medicaid renewal team**
- Create front end fair hearing resolution team
- Augment/realign staff to handle:
 - Returned mail
 - Contacting clients regarding returned renewals
 - Document imaging
- Augment Call Center

Division of Medicaid & Medical Assistance (DMMA)

- Update and test eligibility systems
- System improvements to handle passive renewals (saves a mailing to members automatically deemed eligible)
- Expand staff capacity to process renewals for people receiving long-term care
- Coordinate with health plans to ensure readiness for unwinding

SUMMARY OF ELIGIBILITY UNWINDING



The Consolidated Appropriations Act signed in late 2022 dictates that the **unwinding period will begin on April 1, 2023.**



Unwinding will result in an **unprecedented workload** for the State.



The State has **multiple strategies planned to ensure continuity of coverage for individuals.**



The State will **communicate** with members and stakeholders **during each stage of the process.**

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SNAP EMERGENCY ALLOTMENT

On December 29, 2022,
the CAA became law, marking
the end of SNAP Emergency
Allotments in **February 2023.**

dhss.delaware.gov

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SNAP EMERGENCY ALLOTMENT

February 2023

The last month Emergency Allotments will be issued to Delaware SNAP households.

March 2023

The first month since 2020 that benefits will be reduced back to regular eligibility levels.

SNAP BACKGROUND



Individuals received extra emergency food benefits on top of their normal food benefit during the federal Public Health Emergency.



The SNAP Emergency Allotment benefit equaled \$10 million per month on average.

Current SNAP caseload:
61,759 cases

Covering **124,854**
individuals

EMERGENCY ALLOTMENT

Emergency allotment

= (equals)

current maximum benefit amount for the household size **minus**

the household's current monthly benefit amount.

Number in SNAP Household	Maximum Benefit Amount
1	\$281
2	\$516
3	\$740
4	\$939
5	\$1,116
6	\$1,339
7	\$1,480
8	\$1,691
Each additional person	\$211

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EMERGENCY ALLOTMENT



DHSS will still support individuals who qualify for SNAP



**Employment
Resources**



**Financial
Coaching**



**Mental
Health,
Substance
Use & Crisis
Support**



**Child Care
Resources &
Referrals**



**Aging &
Disability
Resources**



**Food
Assistance**



**Emergency
Assistance**



**Housing
Resources**

*Need Additional Help? Call Delaware's **2-1-1 Helpline***

COMMUNICATIONS STRATEGY

Audiences

INTERNAL

- DHSS Division Leadership & Staff
- DSS Benefits Call Center Staff
- Constituent Relations
- Delaware State Agencies
- Offices of the Governor and Lt. Governor and other Statewide Officials

EXTERNAL

- SNAP Benefit Recipients
- Community Partners and Advocates
- Elected Offices
- Medical Provider Community and Health Care Facilities
- Consumer Advocates and Advisory Committees

Tactics

DIRECT MEMBER OUTREACH

- Mail (Letters)
- ASSIST Self Service Portal
- DHSS Website Content and Banners
- Social Media Content and Graphics

*Messages to be translated to Spanish/Haitian Creole

PUBLIC OUTREACH

- Webinars and Briefings for Key Stakeholder Groups
- Community Partner and Provider Communications Toolkits
- Outreach Materials Social Media and Video
- E-newsletter Content
- Press Releases

Appendix: CAA Provisions

PHE Unwinding

Fixed end date for Medicaid continuous coverage, gradual phasedown of enhanced federal match, and new Guardrails*

Extension through 2024 of several Medicare telehealth flexibilities authorized under the PHE.

U.S. Territories

Extension of higher federal Medicaid match rates for Puerto Rico, American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, and the U.S. Virgin Islands.

Maternal Health

Permanent state option to extend 12-months postpartum coverage in Medicaid/CHIP.

Reauthorization of the Maternal, Infant, and Early Childhood Home Visiting Program and new virtual home visiting option.

**Today's focus*

Appendix: CAA Provisions

Children & Adolescent Health

Requirement to provide children with 12 months continuous Medicaid/CHIP eligibility, effective January 1, 2024

Extension of CHIP funding through fiscal year (FY) 2029.

Enhancements to the provision of Medicaid/CHIP services while a youth is incarcerated in a public institution

Behavioral Health

Reauthorizes behavioral health programs and expands access to opioid/substance use disorder (SUD) prevention, treatment, and recovery support services.

Requires the United States Department of Health and Human Services (HHS) to issue guidance on crisis response.

Appendix: CAA Provisions

Home and Community-Based Services (HCBS)

Extended funding for the Medicaid Money Follows the Person Rebalance Demonstration program.

Extended protections against spousal impoverishment for recipients of HCBS.

Appendix: CMS Reporting Requirements

The State of Delaware will submit the following:

February 15, 2023

Renewal Distribution Plan

February 15, 2023

Eligibility System Configuration and Testing Plans

April 8, 2023

Baseline Unwinding Data

The State of Delaware will submit the following on a monthly basis from April 1, 2023 to June 30, 2024:

- Number of Clients for Whom Coverage is Renewed
- Number of Clients for Whom Coverage is Passively Renewed
- Number of Clients Whose Coverage is Terminated
- Number of Clients Whose Coverage is Terminated for Procedural Reasons
- Number of Clients Who are Enrolled in Separate CHIP
- Number of Clients for Whom Coverage is Renewed
- Total Call Center Volume
- Average Call Center Wait Time
- Average Call Center Abandonment Rate

APPENDIX: TRANSITION TO OTHER COVERAGE

Federally Facilitated Marketplace (FFM) Actions

Member creates account at HealthCare.gov

Member verifies identity and starts a new Marketplace application

Member completes their application and reviews eligibility results**

Member compares Marketplace plans and enrolls in coverage

If a member is found ineligible for Medicaid/CHIP by the State due to federal regulations:



DHSS Actions

State sends letter to members found ineligible for Medicaid/CHIP with information about Delaware's two FFM Navigator organizations

Member contacts Navigator and establishes relationship

Navigators assist member in successfully completing FFM steps

Appendix: Communications Materials

End of SNAP Emergency Food Benefits

Find communications and outreach materials related to the end of SNAP Emergency Food Benefits at:

[DE.GOV/SNAPCHANGES](https://de.gov/snapchanges)

End of Medicaid Continuous Coverage

Find communications and outreach materials related to the restart of the annual Medicaid renewal process at:

[DE.GOV/MEDICAIDRENEWALS](https://de.gov/medicaidrenewals)

**Additional materials will be added as they become available.*