





Agenda

Background

Public Health Emergency Protections

Public Health Emergency Unwinding

Renewals and Notices

MAGI Expanded Adult Program

Summary



Background

In 2022, Congress passed the Families First Coronavirus Recovery and Relief Act (FFCRA) which required states to maintain the same level of medical coverage for anyone who was receiving or began receiving medical coverage while the Public Health Emergency (PHE) was in place.



The State of Oregon implemented temporary policies and processes, including:

Restrict Termination of Medical Benefits (except for certain reasons such as when a member deceased, incarcerated, moved out of state or decides to close benefits)

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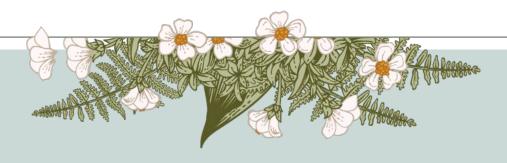
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- Enhance Hospital Presumptive Eligibility

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- Restrict Reduction of Benefit Levels
- Enhance Hospital Presumptive Eligibility
- Accept Members' Statements as Verification (except for citizenship)

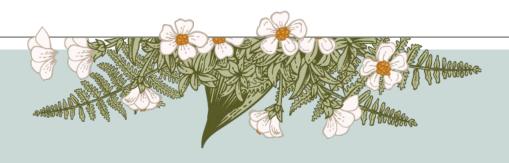


In late 2022, Congress passed the Consolidated Appropriations Act, which ended the continuous coverage requirement effective April 1, 2023.





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* ALL Medical Recipients as of March 31, 2023, must undergo a renewal without Public Health Emergency protections



The Consolidated Appropriations Act requires states to start the transition to what will become the state's normal policy and operations effective April 1, 2023. This is called the "Unwinding Period" which last for 14 months from April 2023 to June 2024. During this unwinding period:

- ALL Medical Recipients as of March 31, 2023, must undergo a renewal without Public Health Emergency protections
- Requests for Information (RFI), Benefit Reduction and Termination of Medical Benefits will be acted on

Renewals and Notices

- Renewals will begin in the first 10 months of the unwinding period and must be completed within 14 months
- 4/1: First round of "unwinding renewals" will begin
- 6/1: First reminder notice sent to members whose renewal initiated in April
- 7/1: Second reminder notice sent to members whose renewal initiated in April
- 7/31: Renewals initiated in April will be processed for closure

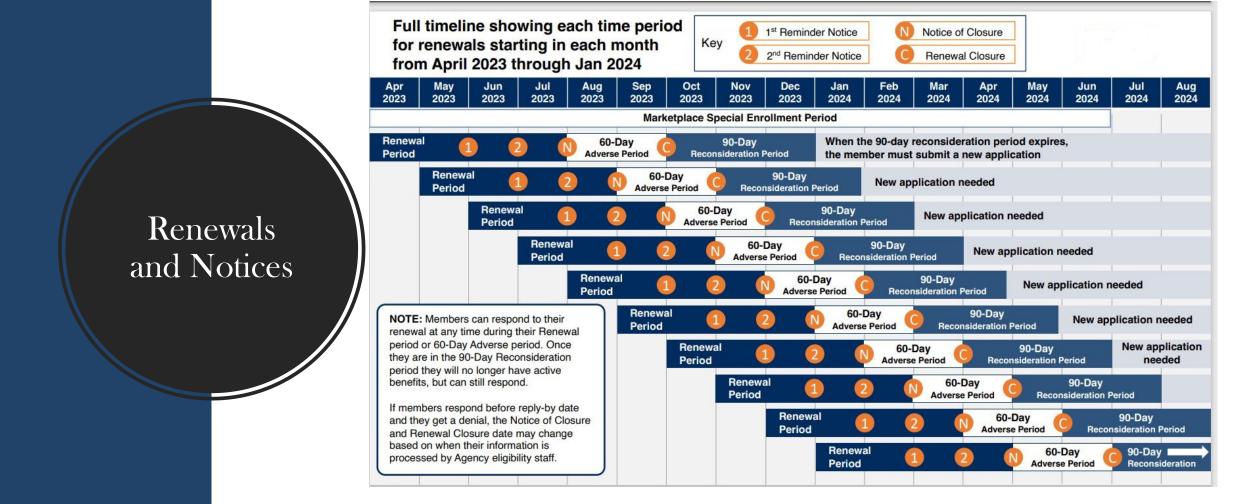
Renewals and Notices

- 8/1: 60-Day Adverse Period Begin
- If the member responds during the 60-day adverse period, coverage continues
- If the member does not respond after the 60th day, coverage will end
- 9/30: Last day of benefits for members who closed due to nonresponse on 8/1 whose renewal was initiated in April
- 10/1: 90-Day Reconsideration Period Begins
- > 90 more days to respond and resume the renewal process

Renewals and Notices

Key Dates for Unwinding Renewal Groups

| Med Renewal Date | Date ONE kicks off renewal process | Renewal notice mail date (no later than) | 1 st Reminder notice | 2 nd Reminder Notice | Reply by Date | Close Notice mail date (non- responders) | Closure Date (non-responders) |
|------------------|---|--|---------------------------------|---------------------------------|---------------|---|----------------------------------|
| 6/30/2023 | 4/4/2023 | 5/1/2023 | 6/1/2023 | 7/1/2023 | 7/31/2023 | 8/1/2023 | 9/30/2023 |
| 7/31/2023 | 5/4/2023 | 6/1/2023 | 7/1/2023 | 8/1/2023 | 8/31/2023 | 9/1/2023 | 10/31/2023 |
| 8/31/2023 | 6/4/2023 | 7/1/2023 | 8/1/2023 | 9/1/2023 | 9/30/2023 | 10/1/2023 | 11/30/2023 |
| 9/30/2023 | 7/4/2023 | 8/1/2023 | 9/1/2023 | 10/1/2023 | 10/31/2023 | 11/1/2023 | 12/31/2023 |
| 10/31/2023 | 8/4/2023 | 9/1/2023 | 10/1/2023 | 11/1/2023 | 11/30/2023 | 12/1/2023 | 1/31/2024 |
| 11/30/2023 | 9/4/2023 | 10/1/2023 | 11/1/2023 | 12/1/2023 | 12/31/2023 | 1/1/2024 | 2/29/2024 |
| 12/31/2023 | 10/4/2023 | 11/1/2023 | 12/1/2023 | 1/1/2024 | 1/31/2024 | 2/1/2024 | 3/31/2024 |
| 1/31/2024 | 11/4/2023 | 12/1/2023 | 1/1/2024 | 2/1/2024 | 2/29/2024 | 3/1/2024 | 4/30/2024 |
| 2/29/2024 | 12/4/2023 | 1/1/2024 | 2/1/2024 | 3/1/2024 | 3/31/2024 | 4/1/2024 | 5/31/2024 |
| 3/31/2024 | 1/4/2024 | 2/1/2024 | 3/4/2024 | 4/1/2024 | 4/30/2024 | 5/1/2024 | 6/30/2024 |



Request for Information

During the COVID-19 Public Health Emergency, we have been able to use a person's self-attestation for most medical eligibility factors without needing proof or other documentation.

This policy is changing effective April 1, 2023. Request for Information (RFI) will be automatically generated when verification is required by the program.

New MAGI Expanded Adult Program

In 2024, Oregon will offer the Basic Health Program (BHP) for adults

- allow individuals to receive OHP Plus-equivalent coverage with countable income up to 200% of the Federal Poverty Level (FPL).
- Oregon won't implement the Basic Health Program until 2024
- to avoid ending coverage during the unwinding period, Oregon has received approval to create a temporary Medicaid program called MAGI Expanded Adult Program

New MAGI Expanded Adult Program

Temporary Medicaid Expansion

In order to maintain coverage gains achieved during the pandemic, Oregon is temporarily expanding the Medicaid income threshold up to 200%. This expansion will continue from April 2023 through to July 2024 in order to provide the state with enough time to establish a permanent coverage options for individuals 138-200% of the Federal Poverty Level (FPL). While this temporary Medicaid expansion is in place, members with incomes up to 200% FPL will able to:

- Continue accessing all Oregon Health Plan benefits except for Long Term Services and Supports (LTSS)
- Continue with no enrollee costs
- Maintain their current provider and Coordinated Care Organization
- Continue OHP-covered treatments and medications

| Temporary Medicaid Expansion eligibility | Income calculation for 138-200% FPL | | |
|--|-------------------------------------|----------|--|
| The temporary Medicaid expansion does not change | Family size | 200% FPL | |
| the eligibility requirements for OHP members, it only | 1 | \$29,160 | |
| expands the income eligibility threshold for OHP to 200% | 2 | \$39,440 | |
| FPL. | 3 | \$49,720 | |
| | 4 | \$60,000 | |

New MAGI Expanded Adult Program



The MAGI Expanded Adult program is effective April 1, 2023, and will be available until the Basic Health

- *Lose eligibility for other medical benefits due to an increase of countable income;
- Are 19 64 years of age;
- ❖ Have household income greater than 138% FPL through 200% FPL;
- ❖ Meet the dependent Minimum Essential Coverage (MEC) check: No dependent children in the home who are uninsured;
- Meet citizenship or non-citizen status requirements
- * Are not entitled to or enrolled in Medicare benefits under part A or B; and
- Are not receiving SSI benefits.

What to Do to Avoid Closure of Medical Benefits



Submit renewal application timely



If you receive Request for Information (RFI) Notice, respond to it by the due date



Report any change (especially contact information, income, household change, etc.) timely

Members Can Submit Information

Upload on mobile app (easiest) • Upload on Applicant Portal Mail info • Fax Walk into office and drop off

Effective April 1, 2023, Oregon will begin the "unwinding" of many medical policy changes that were made in response to the COVID-19 public health emergency (PHE)

Processing medical renewals and acting on benefit reductions and closures

Implementation of new policies and procedures; and

Establishing new temporary medical program called the MAGI Expanded Adult program.

Summary



Questions



Thank you



