HCPF Call with County Leadership

Kim Bimestefer
Executive Director
March 2, 2021

COLORADO
Department of Health Care
Policy & Financing

Agenda

- Informational Updates
  - ➢ New HCPF Mission Statement
- COVID-19 Update
  - ➢ Application and Locked-In coverage data
- Legislative and Budget Updates
  - ➢ PHE budget supplemental
- Q & A

Kudos to our County Partners

Returned Mail Center:

Thank you to Otero, Pueblo and Crowley Counties for volunteering to be our next pilot sites!

County Incentives Program/contracts:

For July – December 2020 period, we had 64/64 counties meet 3 out of 4 performance benchmarks and 59/64 counties meet 4 out of 4 performance benchmarks
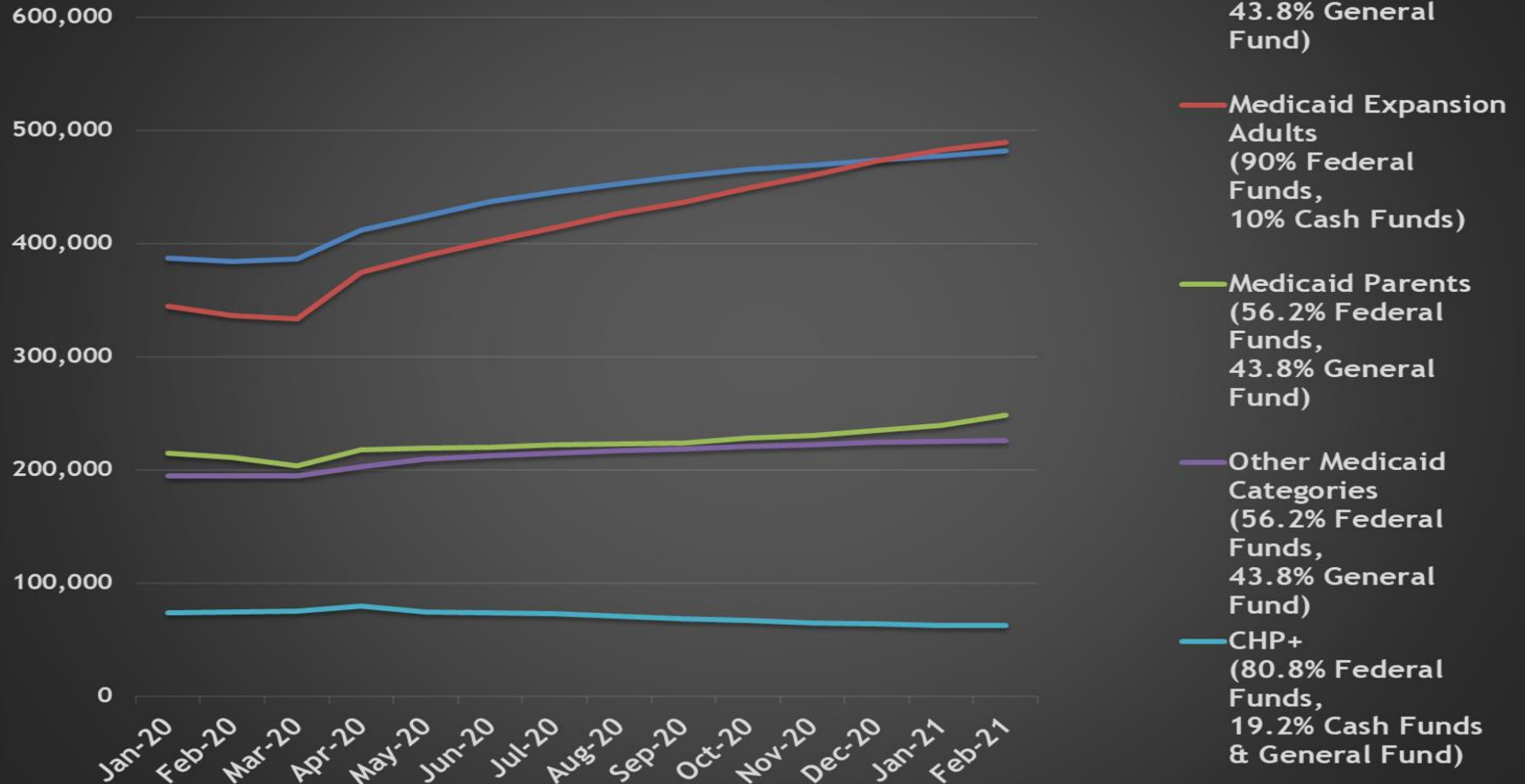
Thank you!

Our Mission:

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.

COVID-19 Update

Medicaid & CHP+ Eligibility as of February 17, 2021

Medical Assistance Enrollment through 02/16/2021

|	New Members 2020-2021	Disenrolled Members 2020-2021	Continuous Coverage	Locked into a higher benefit category	Net Change in enrollment	Total enrollment 2020-2021	COVID-19 Testing Only
January	35,250	37,968			-1,708	1,263,187	
February	27,272	33,527			-6,255	1,256,932	
March	33,634	40,575			-6,941	1,249,991	
April	42,441	4,578	36,456	2,816	37,863	1,287,854	139
May	26,456	6,867	33,274	5,364	19,589	1,307,443	155
June	28,111	6,204	23,950	5,217	21,907	1,329,350	139
July	26,948	6,147	26,358	5,851	20,801	1,350,151	204
August	27,246	6,323	30,271	4,689	20,923	1,371,074	148
September	25,971	6,428	21,862	4,930	19,543	1,390,617	125
October	24,103	6,359	31,038	6,500	17,744	1,408,361	121
November	24,024	7,251	23,032	5,531	16,773	1,425,134	266
December	22,968	6,602	20,394	5,474	16,366	1,441,500	303
January	19,712	7,106	37,779	8,874	12,606	1,454,106	234
February	7,535	7,603	22,091	5,846	-68	1,454,038	145
March			19,644	5,014			
Total			326,149	66,106			1,979

Changes in Continuous Coverage Population
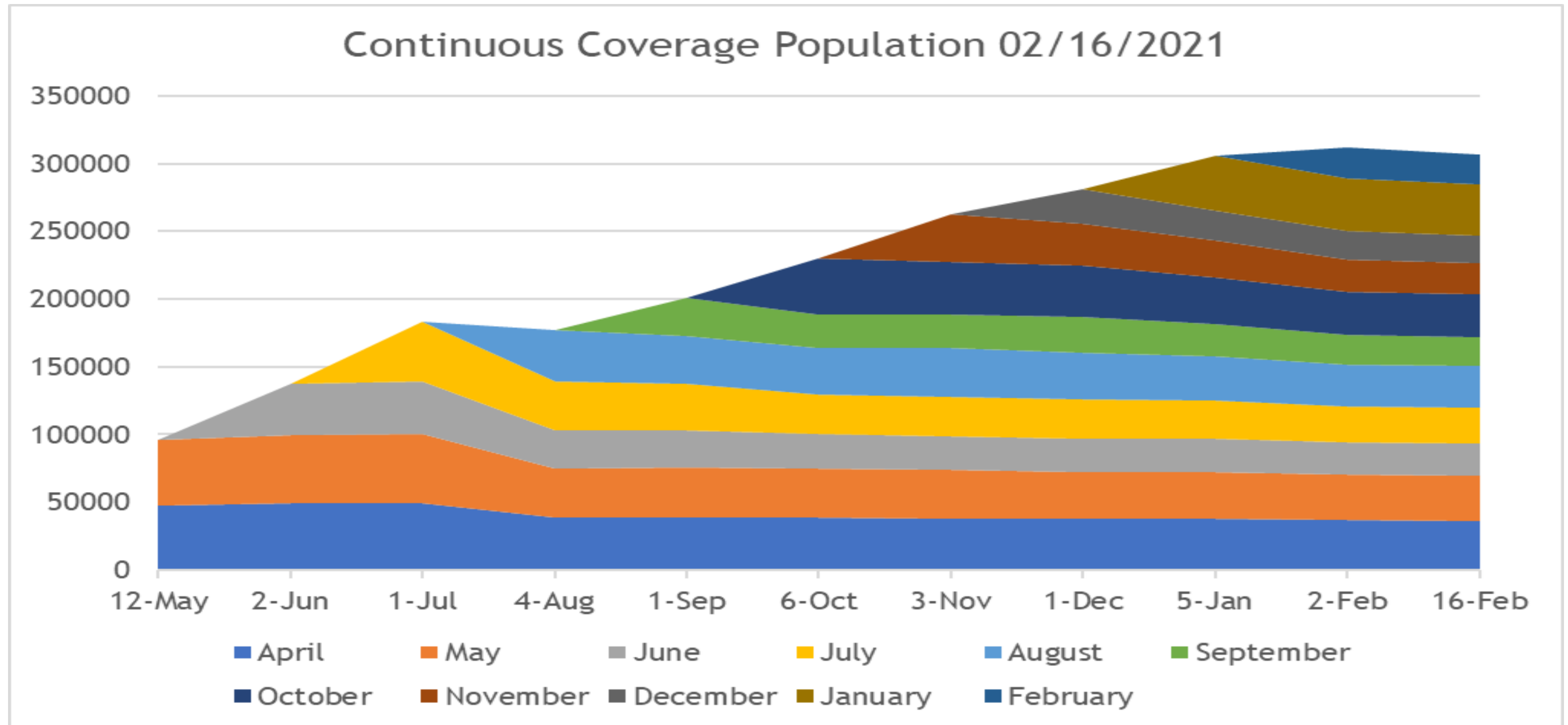
This shows by month how many members are added to the Continuous Coverage population. Beginning in July, retroactivity in the continuous coverage population is captured, meaning that as eligibility is confirmed, the population decreases over time by about 25%.

Applications Pending Daily - by Program (30-Day)

Apps Pending in Last 30 Days - Program Breakdown
(1/14/21 - 2/12/21)
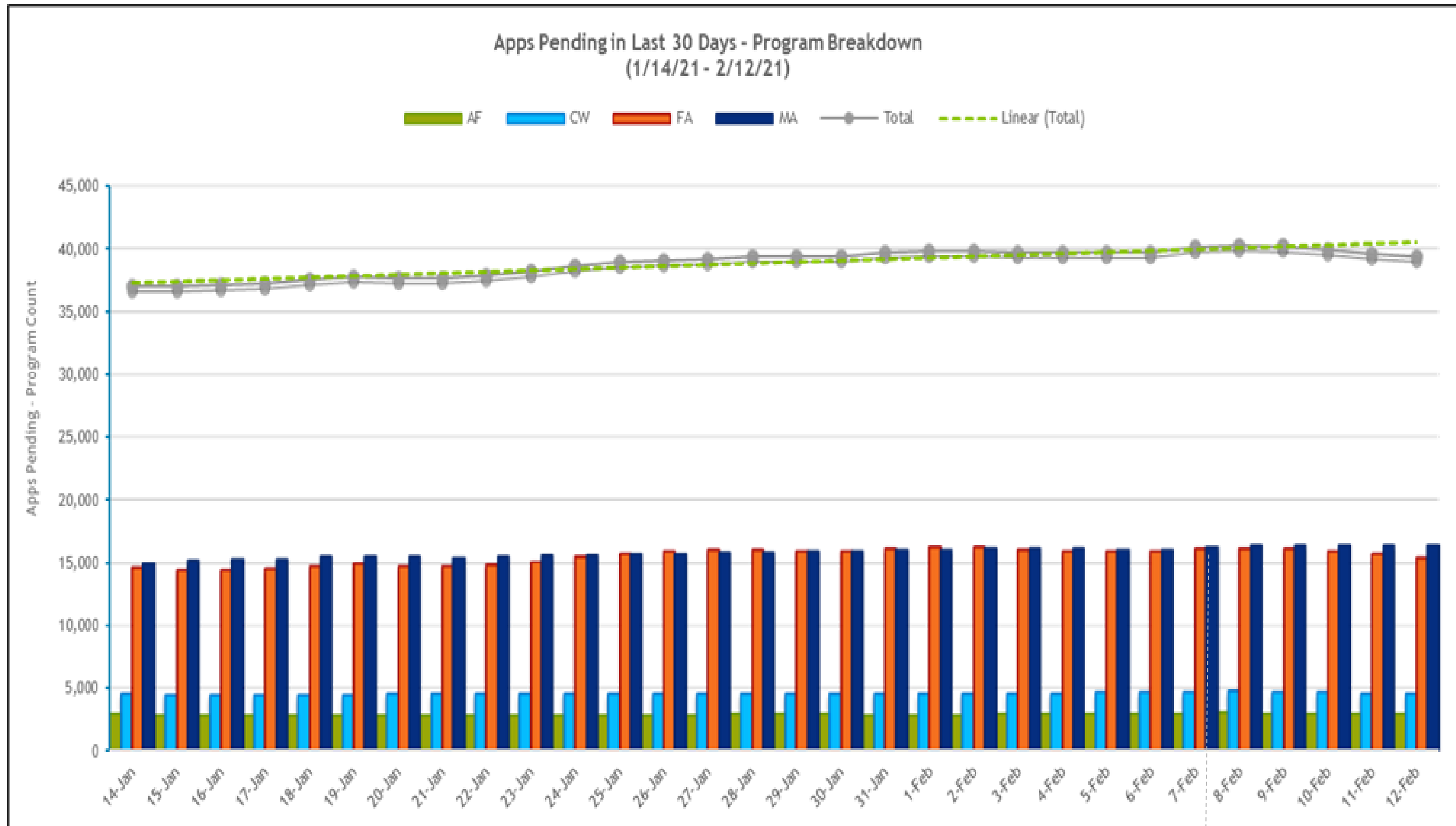
Key

AF = Adult Financial
CW = Colorado Works
FA / SNAP = Food Assistance *
MA = Medical Assistance

Medical Assistance (MA) Apps Pending Daily over the last 30 days

MA Apps Pending in Last 30 Days
(1/14/21 – 2/12/21)
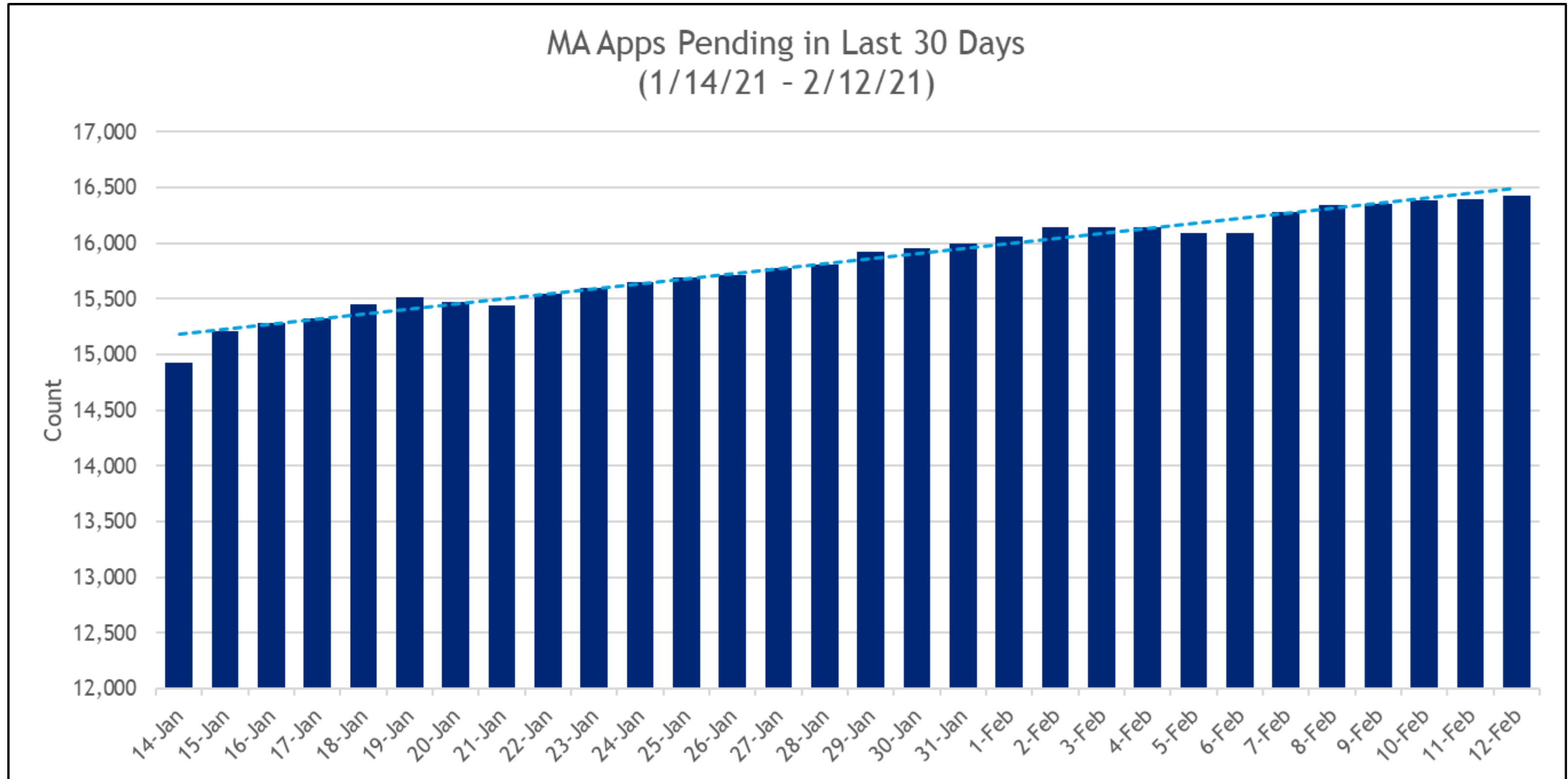
Medical Assistance - Monthly applications-received and authorized

Applications Received and Authorized-Monthly
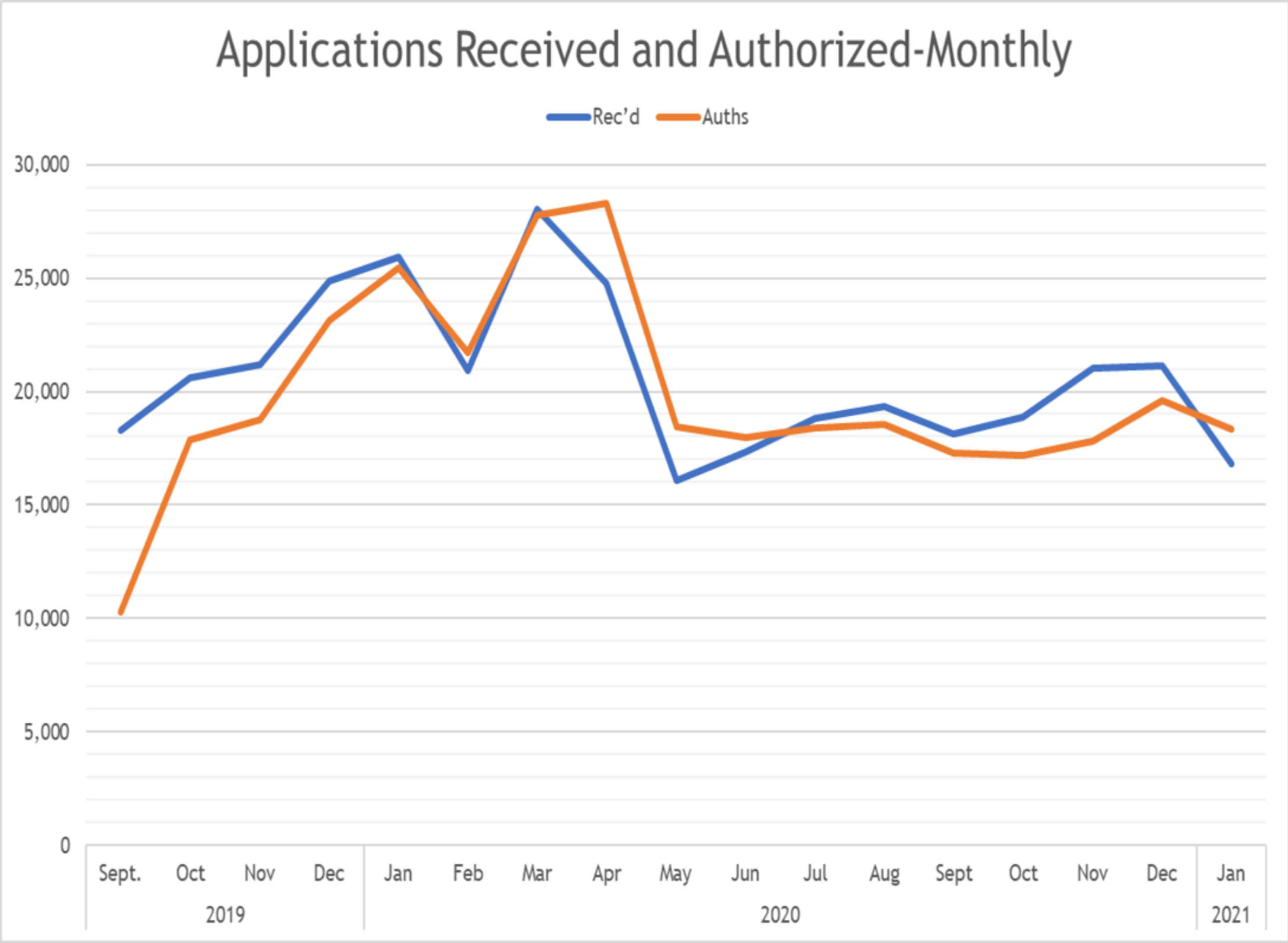
More applications are received than authorized, dating back to transformation. There was a period between April and June, when eligibility sites authorized more than received, but since then pending has been accumulating.

Medical Assistance - How long it takes to make an application determination
## In the past 30 days, 48% of applications had a determination made within 5 days (1/19-2/17).

| # DAYS IT TAKES FOR A DETERMINATION TO BE MADE									
	0 - 1	2 - 5	6 – 10	11 – 15	16 – 30	31 – 45	46 – 59	60 +	Total
Medical Assistance	11,651	3,849	6,628	2,573	4,287	2,084	240	662	31,974

- 36% of medical assistance applications have an eligibility determination made within 1 day

- 48% of medical assistance applications have an eligibility determination made within 5 days

- 97% of medical assistance applications have an eligibility determination made within 45 days

- Standard is that 95% of applications receive a determination within 45 days
  - 902 (3%) of applications took more than 45 days for an authorization
  - Of those 902, 112 (12%) were Non-MAGI
    - 8% of all applications authorized were Non-MAGI
  - Of those 902, 31 (3%) were LTC and HCBS
    - <1% of all applications authorized were LTC and HCBS

Unique new applications for all programs (PEAK Usage)
Prior to March 2020, an average of 35% of new applications were received through PEAK. Since March 2020 that has increased to an average of 55%, with a high of 64% in April.
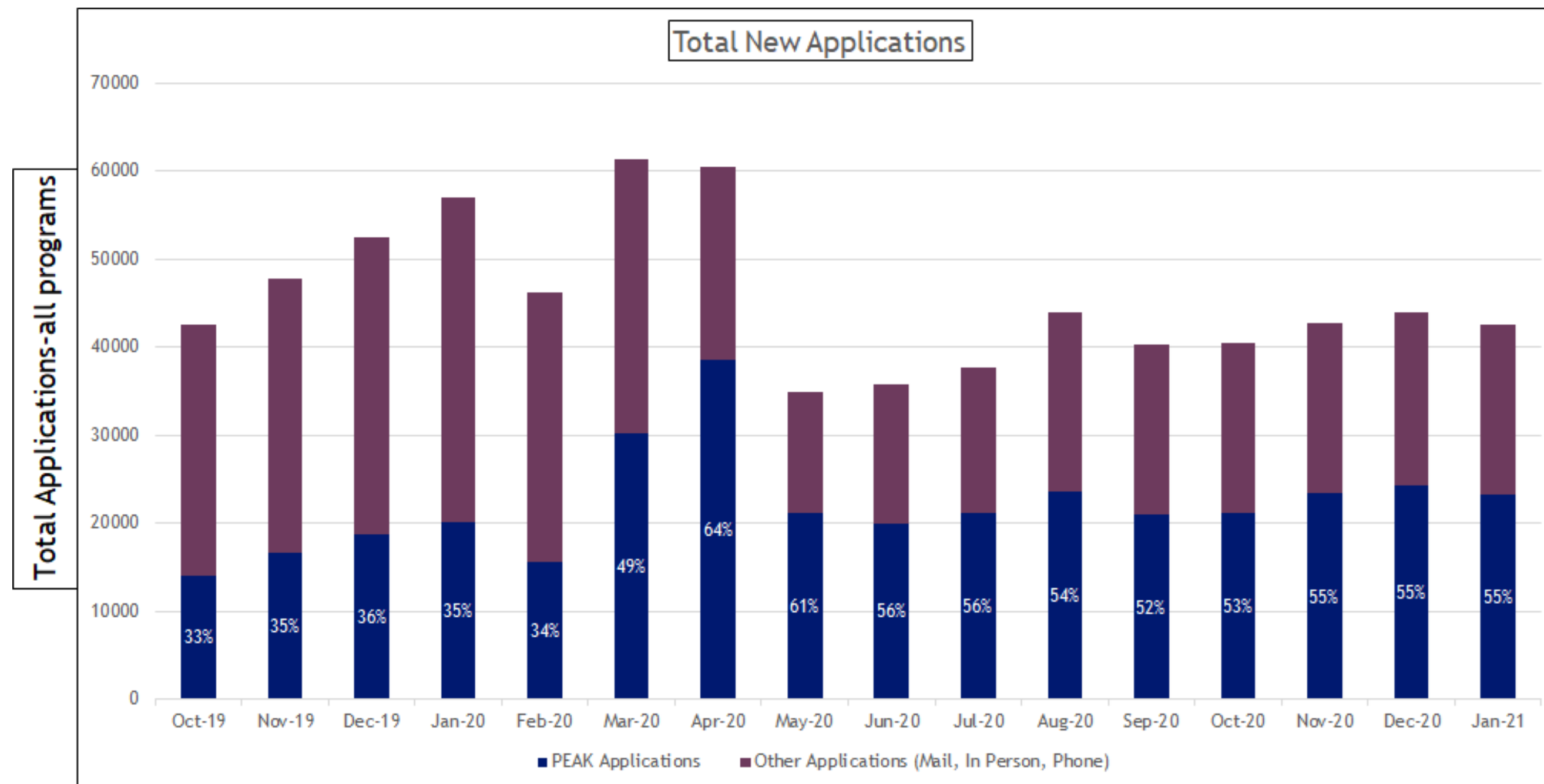
Long Term Care and Home and Community Based Services Application Processing (1/19-2/17)

LTC & HCBS

- 0-1
- 2-15
- 16-45
- 46-89
- 90 +

21%
42%
25%
6%
6%
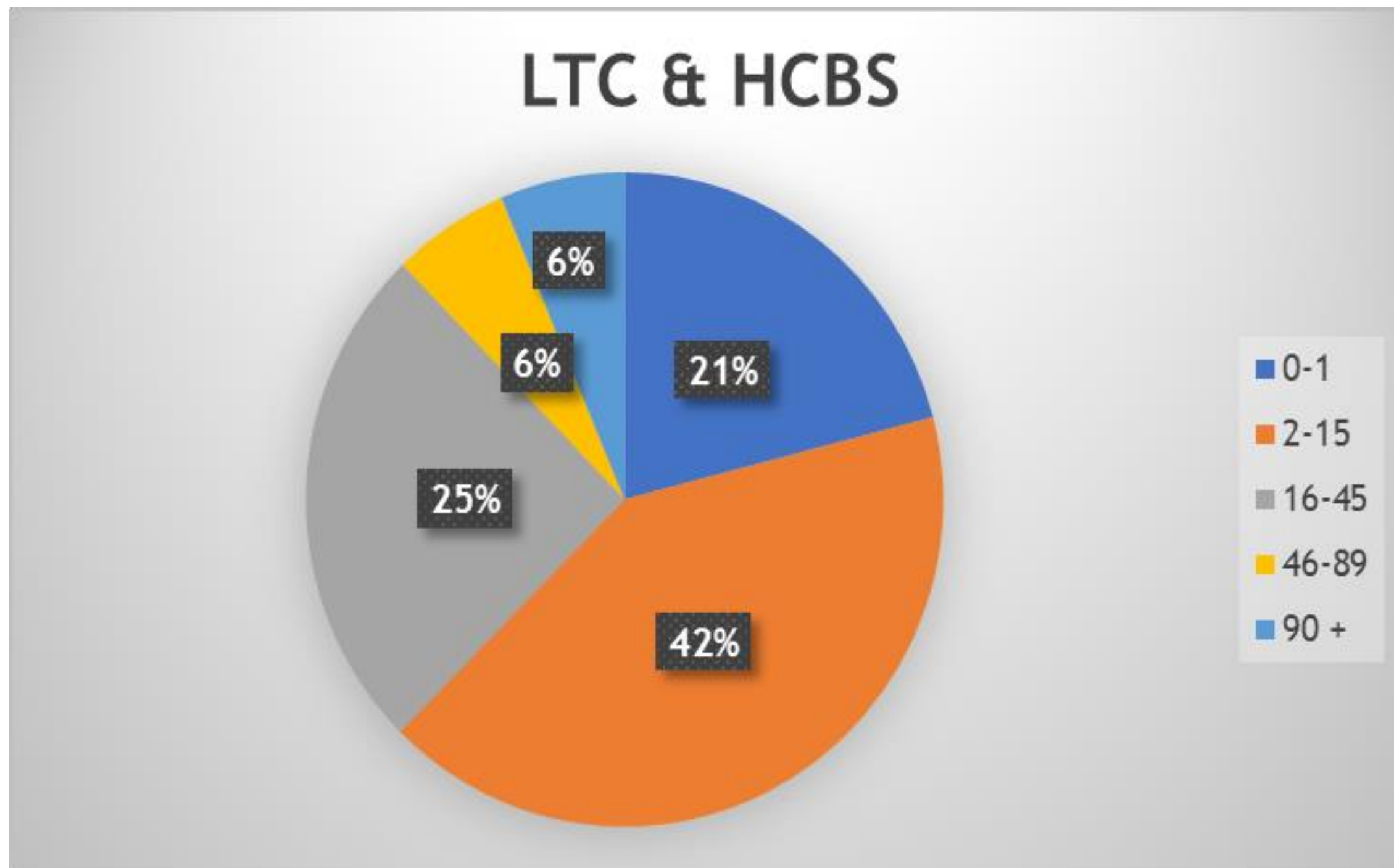
- LTC and HCBS applications accounted for <1% (253) of all new applications authorized (31,974) in the last 30 days

- 6% (16) of LTC and HCBS applications took more than 90 days to be authorized

Overview of 2021 Eligibility Initiatives

COVID-19 Project
- End continuous enrollment
- End self-attestation and COVID-19 testing
- Eligibility review
  - Leverage RRR packet

RRR Revamp
- Redo flow of RRR logic, minimizing RRRs sent out
- Implement upfront income verification
- Revamp of the RRR packet

Member/User Experience
- Enhance PEAK RRR module
  - Increase member usage
  - Better experience for eligibility workers
- Enhance Health First Colorado app

Budget and Legislative Updates

HCPF Budget Update

FY 2020-21

- Total Funds: $11,868,612,482

- General Funds: $2,951,087,367

FY 2021-22

- Total Funds: $12,338,119,949

- General Funds: $3,509,775,853

PHE Budget Supplemental

- Joint Budget Committee (JBC) budget supplemental to address county and state workload related to the end of the PHE
  - ➢ County administration funding – eligibility, appeals and customer service resources (tied to Staffing Plan)
    - FY 2021-22: $18,815,401 for member redeterminations & appeals

  - ➢ County Grant Program funding for counties who cannot contribute local share due to COVID budgetary impacts
    - FY 2021-22: $1.2 million

  - ➢ Eligibility Overflow Processing Center
    - FY 2021-22: $1,853,731

Next Steps for Supplemental

- JBC elected to delay consideration of the supplemental until March 4, except the overflow processing center (approved)

- We appreciate your continued support of this request as we will have a large workload at the end of the PHE

- Please continue planning for staffing scenarios for your county and please continue working renewals and work on hand with the objective of having minimal backlog coming into the PHE redeterminations period.

Considerations for PHE Staffing Plan

Consider Medical Assistance workload tied to PHE:
- COVID Locked-In Report, Eligibility Reviews, Appeals, Member Experience: calls, complaints, etc.

<u>Customer service/member experience</u> must be addressed –
- Are Medical Assistance applicants and members getting their calls answered timely?
- Do they have a positive member experience?
- Do you have a feedback mechanism and processes in place to address complaints?

- How are you addressing high-needs and vulnerable populations (Long Term Care, Home and Community Based Services, etc.)?

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HCPF Agenda Bills

Case Management Redesign

- Helps Department build a high-performing conflict-free system to serve all populations.

- Streamlines operations, maintains federal compliance, increases efficiencies

Skilled Nursing Facilities: Establishing a Demonstration of Need and Technical Changes

- Allows the Department to require a demonstration of need, based on specific criteria, for the approval of new nursing facilities that seek to serve Medicaid clients. Ensures stability, access and high quality care.

- Bill also allows five Medicaid beds at any facility to reduce "transfer trauma."

Q & A

Send topics for next meeting to:
Breanne.benbenek@state.co.us

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Thank You!

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