ACHD Health Enrollment Team &

End of the Federal Public Health Emergency

Adams County Board of Health
April 13, 2023
Three things to remember today

• The ACHD Health Enrollment Team (HET) helps people get and stay enrolled in Medicaid, CHP+, and the Connect for Health Colorado marketplace.

• Adams County residents enrolled in Medicaid will be impacted by the end of the federal continuous coverage provision.

• The state, county, and health department are actively working to help people keep their coverage.
ACHD HEALTH ENROLLMENT TEAM
Why is Health Enrollment part of ACHD?

What are the three most important characteristics of a happy, healthy, and thriving community?

1. Social Factors
2. Safety
3. Access to Care
4. Economic Security
5. Environment

What are the three most important health problems in your community?

1. Health Behaviors
2. COVID-19
3. Substance Use
4. Access to Care
5. Mental Health
How do people get health coverage?

Source: Colorado Health Access Survey from the Colorado Health Institute
We assist with many types of applications

- Health First Colorado (Colorado’s Medicaid Program) for children and adults
- Child Health Plan Plus (CHP+)
- Presumptive Eligibility Medicaid for children and pregnant people
- Emergency Medical Services for people without documentation
- Family Planning & Related Services coverage
- Connect for Health Colorado plans
- Colorado Connect Marketplace plans
We help clients get and stay enrolled

• Analyze household composition to determine eligibility for coverage and financial assistance

• Gather and submit documentation to ensure applications are able to be processed and approved

• Educate clients on how to use benefits and navigate systems

• Provide services in community settings through outreach and co-location
We use community feedback to inform Policy & Advocacy efforts that improve access to care

• All Kids Covered Coalition
• Connect for Health Colorado Community Focus Group
• Cover All Coloradans Stakeholder Group
• Covering Kids & Families Coalition and Advisory Board
• Quarterly Community Consultation with Resettlement Agencies
2023 Enrollment Numbers

106
New applications completed in 2023

184
Non-enrollment assistance interactions

58
Average minutes spent with client per application

97%
Approval rate of Medicaid and CHP+ applications (versus 50% RTE using PEAK alone)
PUBLIC HEALTH
EMERGENCY &
CONTINUOUS
COVERAGE
Federal Public Health Emergency

- A public health emergency (PHE) declaration was issued in January 2020.
- The Biden Administration announced it would end the PHE on May 11, 2023.
- The end of the PHE will primarily impact consumer payments, provider billing and reimbursement, and required reporting on COVID numbers.
  - The widest-ranging impact will likely be higher costs for COVID tests
  - Additional changes will come when federal supplies of vaccines, treatments, and tests are depleted, though the timing of that is yet to be determined and is not tied to the PHE
  - The PHE will not directly impact Medicaid continuous coverage

Continuous Coverage & the Consolidated Appropriations Act

- The PHE ensured anyone who qualified and enrolled in Medicaid & CHP+ was guaranteed to keep their health coverage throughout the pandemic, called the “continuous coverage requirement”

- The Consolidated Appropriations Act passed in December 2022 “decoupled” the continuous coverage requirement from the PHE
  - Ends the Medicaid continuous coverage requirement beginning in April 2023
  - Mandates states return to normal eligibility operations and processes
  - Additional impacts on people with limited income, including:
    - Ends the SNAP emergency allotment funding
    - Makes permanent the American Rescue Plan Act’s state plan option to provide 12 months of postpartum coverage in both Medicaid and CHP+
    - Two-year extension of federal CHIP funding and provisions

Source: Consolidated Appropriations Act, 2023: Medicaid and CHIP Provisions Explained, Georgetown University Health Policy Center
Enrollment in Medicaid increased 39% during the pandemic

1 in 4 Coloradans are now enrolled in Medicaid

All 1.7 enrollees will go through the renewal process beginning in March 2023
  - Colorado will take 14 months to complete all renewals
  - Each individual’s renewal month will align with their already established annual renewal month

HCPF estimates 44% of enrollees are no longer eligible for Medicaid or CHP+
  - For those ineligible due to incomplete verification (29%), the HET can help with renewal packets and submitting documentation
  - For people who are now over income for Medicaid (29%), the HET can help with C4HCO applications

Impact of Continuous Coverage in Colorado

195,863 Adams County residents are enrolled in Medicaid
90,186 children
105,677 adults

Sources:
February 2023 Monthly Caseload Report, Colorado Department of Health Care Policy & Financing
Medicaid Continuous Coverage Map, Adams County Health Department
Barriers to Completing Renewals

- **The Renewal packet** is 16 pages long, on average
- Renewal packets are only sent in English and Spanish
- If the client is signed up for electronic notices only, they will get an email telling them to log in to PEAK without other details
- Not all members will receive renewal packets, adding to confusion about if someone is due for renewal or not
- If a member receives a renewal packet, they need to sign and return it even if they have no changes to report
- Children with Medicaid are the **least** likely to return their renewal packets
- And more…
STATE AND LOCAL PLANS FOR THE END OF CONTINUOUS COVERAGE
Department of Health Care Policy & Financing

• Toolkits about preparing for renewals and how to take action
  • Sample correspondence
  • Key terms
  • Automatic renewal process or “ex parte” information
  • Using PEAK to renew guide and videos
  • Other coverage options

• Quarterly webinars for community-based organizations, advocates, and providers

• Communications and social media

• Community Ambassador outreach project

• Coordination with Connect for Health Colorado
Adams County Human Services

• Increasing staffing in the call center, front desk, and processing teams

• Targeted outreach to customers
  • Mass texting campaign
  • Benefits in Action partnership

• Continue existing efforts, such as the Outreach team
Adams County Health Department

• Health Enrollment Team
  • Provide 1:1 assistance with completing renewal packets
  • Engage in policy processes and implementation, such as sign-on letters for a Special Enrollment Period
  • Educate ACHD staff through presentations or meetings
  • Coordinate efforts with Colorado Access (RAE) and Arapahoe County Public Health

• Health Equity & Strategic Initiatives Division staff
  • Continue COVID-19 health equity and outreach work
  • Promote information-sharing with CBOs, providers, and partners about the unwind and renewal process
  • Host and present at 4/10 Adams County Health Alliance Meeting
“I have been dealing with potentially terminal medical issues that have affected my ability to work and resulted in loss of employment and recently insurance coverage and am also in the process of appealing disability denial, all of which has been overwhelming and exasperating - on top of the neurological issues I'm experiencing.

The sole exception to the pain and frustrations I've endured, was my brief interaction with [the HET] today. Her kindness, patience, and time spent sharing her knowledge in helping me navigate an otherwise confusing process that had previously left me overwhelmed-made all the difference in my life. [She] was professional while pleasant and supportive, making what I had delayed out of fear of how complicated it would be - she made it easy…

She genuinely made a significant impact on my life just through the course of the time she spent with me. I wish all Colorado state departments and processes could be so easy and follow this example, realizing how much having access to a person directly even if via zoom, and their insight and time to walk through something like this - how that individual person's help and support can truly change a life. Thank you.”

- C4HCO Customer Feedback, 3/31/2023
ACHD Health Enrollment Team
Contact Information

Call 303-363-3013

Email HealthEnrollment@adcogov.org


* HET staff members speak English, Spanish, Arabic, and Amharic – all other language available through the language line
<table>
<thead>
<tr>
<th>Coverage Type</th>
<th>What is it?</th>
<th>Eligibility</th>
<th>2023 income eligibility for a household of 4</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health First Colorado (Colorado’s Medicaid Program)</td>
<td>A free or low-cost health coverage for Coloradans who qualify</td>
<td>CO residents or lawfully present children and pregnant women within certain income requirements (68-195% FPL)</td>
<td>$42,600 and below</td>
<td>Physical health, Dental, and Behavioral health (mental health and substance use)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Pays for doctor visits, emergency care, preventive care such as screening and immunizations, and other procedures and treatments</td>
</tr>
<tr>
<td>Child Health Plan Plus (CHP+)</td>
<td>Public low-cost health coverage for children and pregnant individuals who qualify. It is for people who earn too much to qualify for Health First Colorado, but not enough to pay for private health insurance.</td>
<td>Lawfully present or CO resident children and pregnant women under 260% FPL without other health insurance</td>
<td>$42,612-78,000</td>
<td>Primary Care, Emergency Care and Urgent Care, Hospital Services, Dental Care (for children and pregnant women), Prescriptions, Immunizations, Maternity Care (prenatal, delivery and postpartum care), Mental/Behavioral Health Care, Vision (for children only)</td>
</tr>
<tr>
<td>Connect for Health Colorado (Colorado’s State Marketplace)</td>
<td>Official marketplace to shop for private health insurance plans. The only place to get financial assistance for those plans.</td>
<td>No income requirements. An individual must (1) Be lawfully present in the United States; (2) Reside in and/or be a resident of Colorado (3) File income taxes for the coverage year</td>
<td>$35,245 to 65,250 for lower monthly premiums &amp; reductions in copays and deductibles</td>
<td>All plans are required to cover Essential Health Benefits (EHBs). The specifics and costs will depend on insurance plan selected. Vision and dental can be purchased independently. *Must enroll during Open Enrollment or during a Special Enrollment Period</td>
</tr>
</tbody>
</table>
## Additional Medicaid & Marketplace Programs

<table>
<thead>
<tr>
<th>Program</th>
<th>Eligibility</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Emergency Medicaid</strong></td>
<td>Individuals who are otherwise Medicaid-eligible but are without documentation</td>
<td>Life-threatening emergencies, including Labor &amp; Delivery and dialysis</td>
</tr>
<tr>
<td><strong>Family Planning and Related Services</strong></td>
<td>People residing in Colorado with incomes over 133% but under 260% FPL</td>
<td>No co-pay for covered family planning and family planning related benefits (associated medically necessary services provided in a family planning setting as part of or as follow-up to a family planning visit)</td>
</tr>
<tr>
<td><strong>Family Planning Services</strong></td>
<td>People residing in Colorado who do not meet citizenship requirements but meet all other eligibility criteria for Health First Colorado</td>
<td>No co-pay for covered family planning services (services provided in a family planning setting with the intent to help members choose if, or when, to become pregnant)</td>
</tr>
<tr>
<td><strong>Colorado Connect marketpace enrollment</strong></td>
<td>Individuals who are otherwise C4HCO-eligible but are without documentation</td>
<td>All plans are required to cover Essential Health Benefits (EHBs). The specifics and costs will depend on insurance plan selected. <em>Must enroll during Open Enrollment for financial assistance</em></td>
</tr>
<tr>
<td>*<em>Non-MAGI Programs</em></td>
<td>Age 65+, blind, or with a disability by Social Security Administration standards, as well as other income and citizenship qualifications based on program</td>
<td>Varies by program. Examples include Old-Age Pension, Breast &amp; Cervical Cancer Program, Refugee Medical Assistance, and Buy-In Programs</td>
</tr>
</tbody>
</table>

*HET does not assist with enrollment for Non-MAGI programs*
Eligibility Guidelines for Medicaid 2023

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Parents &amp; Caretaker Relatives 68% Poverty Level</th>
<th>Adults (Ages 19-65) 133% Poverty Level</th>
<th>Children (Ages 0-18) 142% Poverty Level</th>
<th>Pregnant Women 195% Poverty Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>826</td>
<td>1616</td>
<td>1725</td>
<td>2369</td>
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<tr>
<td>2</td>
<td>1117</td>
<td>2186</td>
<td>2334</td>
<td>3205</td>
</tr>
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<td>3</td>
<td>1409</td>
<td>2755</td>
<td>2942</td>
<td>4040</td>
</tr>
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<td>4</td>
<td>1700</td>
<td>3325</td>
<td>3550</td>
<td>4875</td>
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<tr>
<td>5</td>
<td>1991</td>
<td>3895</td>
<td>4158</td>
<td>5710</td>
</tr>
<tr>
<td>6</td>
<td>2283</td>
<td>4464</td>
<td>4766</td>
<td>6546</td>
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<td>7</td>
<td>2574</td>
<td>5034</td>
<td>5375</td>
<td>7381</td>
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<td>8</td>
<td>2865</td>
<td>5604</td>
<td>5983</td>
<td>8216</td>
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<tr>
<td>9</td>
<td>3156</td>
<td>6173</td>
<td>6591</td>
<td>9051</td>
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<tr>
<td>10</td>
<td>3448</td>
<td>6743</td>
<td>7199</td>
<td>9887</td>
</tr>
</tbody>
</table>

1 Co-payments may apply; no co-pays for American Indians, Alaska Natives, or for a pregnant woman and her household.

Effective 1/1/2023 to 12/31/2023 Tax Filing Thresholds for a Tax Dependent or Child:

- Earned Income $13,850
- Unearned Income $1,250
Eligibility Guidelines for CHP+ 2023

<table>
<thead>
<tr>
<th>Poverty Level</th>
<th>143-156% F-</th>
<th>157-159% F+</th>
<th>160-170% G-</th>
<th>171-185% G+</th>
<th>186-200% J</th>
<th>201-213% K</th>
<th>214-225% L</th>
<th>226-235% M</th>
<th>236-260% O</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>2335 - 2564</td>
<td>2565 - 2613</td>
<td>2614 - 2794</td>
<td>2795 - 3040</td>
<td>3041 - 3287</td>
<td>3288 - 3500</td>
<td>3501 - 3698</td>
<td>3699 - 3862</td>
<td>3863 - 4273</td>
</tr>
<tr>
<td>3</td>
<td>2943 - 3232</td>
<td>3233 - 3294</td>
<td>3295 - 3522</td>
<td>3523 - 3833</td>
<td>3834 - 4143</td>
<td>4144 - 4413</td>
<td>4414 - 4661</td>
<td>4662 - 4868</td>
<td>4869 - 5386</td>
</tr>
<tr>
<td>4</td>
<td>3551 - 3900</td>
<td>3901 - 3975</td>
<td>3976 - 4250</td>
<td>4251 - 4625</td>
<td>4626 - 5000</td>
<td>5001 - 5325</td>
<td>5326 - 5625</td>
<td>5626 - 5875</td>
<td>5876 - 6500</td>
</tr>
<tr>
<td>5</td>
<td>4159 - 4568</td>
<td>4569 - 4656</td>
<td>4657 - 4978</td>
<td>4979 - 5417</td>
<td>5418 - 5857</td>
<td>5858 - 6237</td>
<td>6238 - 6589</td>
<td>6590 - 6882</td>
<td>6883 - 7614</td>
</tr>
<tr>
<td>6</td>
<td>4767 - 5236</td>
<td>5237 - 5337</td>
<td>5338 - 5706</td>
<td>5707 - 6210</td>
<td>6211 - 6713</td>
<td>6714 - 7150</td>
<td>7151 - 7553</td>
<td>7554 - 7888</td>
<td>7889 - 8727</td>
</tr>
<tr>
<td>7</td>
<td>5376 - 5905</td>
<td>5906 - 6018</td>
<td>6019 - 6435</td>
<td>6436 - 7002</td>
<td>7003 - 7570</td>
<td>7571 - 8062</td>
<td>8063 - 8516</td>
<td>8517 - 8895</td>
<td>8896 - 9841</td>
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<tr>
<td>8</td>
<td>5984 - 6573</td>
<td>6674 - 6699</td>
<td>6700 - 7163</td>
<td>7164 - 7795</td>
<td>7796 - 8427</td>
<td>8428 - 8974</td>
<td>8975 - 9480</td>
<td>9481 - 9901</td>
<td>9902 - 10955</td>
</tr>
<tr>
<td>9</td>
<td>6592 - 7241</td>
<td>7242 - 7380</td>
<td>7381 - 7891</td>
<td>7892 - 8587</td>
<td>8588 - 9283</td>
<td>9284 - 9887</td>
<td>9888 - 10444</td>
<td>10445 - 10908</td>
<td>10909 - 12068</td>
</tr>
<tr>
<td>10</td>
<td>7200 - 7909</td>
<td>7910 - 8061</td>
<td>8062 - 8619</td>
<td>8620 - 9380</td>
<td>9381 - 10140</td>
<td>10141 - 10799</td>
<td>10800 - 11408</td>
<td>11409 - 11915</td>
<td>11916 - 13182</td>
</tr>
</tbody>
</table>

- Letters correspond to the rating codes in CBMS
- Co-payments may apply
- No co-pays for American Indians, Alaska Natives, or for a pregnant woman and her household.
- Enrollment fees are no longer required for applications and renewals received after 07/01/2022
- Effective 1/1/2023 to 12/31/2023 Tax Filing Thresholds for a Tax Dependent or Child: Earned Income $13,850 and Unearned Income $1,250
# Income Levels for Financial Help for Connect for Health Colorado Marketplace Insurance 2022

<table>
<thead>
<tr>
<th>Tax Household Size</th>
<th>Lower monthly premiums AND reductions in copays and deductibles</th>
<th>Lower monthly premiums</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$17,130 to 32,200</td>
<td>$Above 32,200</td>
</tr>
<tr>
<td>2</td>
<td>$23,169 to 43,550</td>
<td>$Above 43,550</td>
</tr>
<tr>
<td>3</td>
<td>$29,207 to 54,900</td>
<td>$Above 54,900</td>
</tr>
<tr>
<td>4</td>
<td>$35,245 to 65,250</td>
<td>$Above 65,250</td>
</tr>
<tr>
<td>5</td>
<td>$41,283 to 77,600</td>
<td>$Above 77,600</td>
</tr>
<tr>
<td>6</td>
<td>$47,321 to 88,950</td>
<td>$Above 88,950</td>
</tr>
</tbody>
</table>
Medicaid (Health First Colorado) and CHP+

- Medicaid for Adults
- Presumptive Eligibility Medicaid and CHP+ for pregnant women and for children under age 19
- Emergency Medicaid* for labor and delivery, pregnancy planning, or life-threatening medical emergencies
- Medicaid change forms to ensure your information is up-to-date
- Add-a-Baby forms for newborns with a parent already enrolled in Medicaid

*for people who do not meet immigration or citizenship requirements for Medicaid
Marketplace Health Insurance Plans

- Connect for Health Colorado marketplace insurance plans
  - Colorado Option standardized plans
- Colorado Connect insurance plans for people without documentation
  - Financial assistance only available during Open Enrollment

FindHelp scheduling tool: www.assistance network.findhelp.com
We have unique qualities that make us different

- One eligibility technician from ACHSD to process applications and fix problems before denial
- Presumptive eligibility enrollment gives real-time eligibility to pregnant people and children
- Resource referral to providers, prescription assistance, food access, and more
- Problem-solving and teaching approach, health literacy focus
Current and Past Co-location and Outreach

- Aurora Mental Health & Recovery (current colocation)
- Every Child Pediatrics (previous colocation)
- Aurora Community Connections enrollment events
- Visiting OBGYNs, pediatricians, and other providers
- Tabling at events:
  - Farmers Markets
  - Adams County Fair
  - Muslim Youth for Positive Development
  - 9 Health Fair
  - Derby Days
  - Welby Days
HET Outreach Priorities

1. Enrollment events
2. Education about getting and using health insurance
3. Medicaid & Marketplace APTC-eligible attendees
4. Individuals who are not English-speaking
5. Health or health-care focus
6. Children, families, and schools
7. Aurora or Adams County locations
Community Engagement: Findings (all stakeholders)

What are the three most important characteristics of a happy, healthy, and thriving community? Adams County, 2021

Top Characteristics:
1. Social Factors
2. Safety
3. Access to Care
4. Economic Security
5. Environment
6. Housing
7. Food access
8. Freedom/Autonomy
9. Health Behaviors
10. Mental Health
Community Engagement: Findings (all stakeholders)

What are the three most important health problems in your community?

Adams County, 2021

Top Problems:
1. Health Behaviors
2. COVID-19
3. Substance Use
4. Access to Care
5. Mental Health
6. Housing
7. Environment
8. Safety
9. Economic Security
10. Social Factors
Access to Care

- Access to care was often mentioned by community members as a **basic human need**, along with housing, food, and clothing.
- Respondents noted that access is influenced by many factors, including insurance, cost, ability to navigate the health system, ability to be seen by a provider, the time it takes to get an appointment, and transportation to and/from appointments and services.
- In addition to access services, case management and care coordination was noted as an important way to navigate services.
- Community members noted that access to care includes the full spectrum of care: from preventative services to referral and ability to receive treatment.

<table>
<thead>
<tr>
<th>Code</th>
<th># Mentions</th>
<th>% of Mentions in Category</th>
<th># Mentions of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Care (Total)</td>
<td>156</td>
<td>100%</td>
<td>15.2%</td>
</tr>
<tr>
<td>Access to MH, Phys HC Svs</td>
<td>86</td>
<td>55.1%</td>
<td>8.4%</td>
</tr>
<tr>
<td>Access to Resources</td>
<td>47</td>
<td>30.1%</td>
<td>4.6%</td>
</tr>
<tr>
<td>Case management, care coord</td>
<td>1</td>
<td>0.6%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Access: General</td>
<td>14</td>
<td>9.0%</td>
<td>1.4%</td>
</tr>
<tr>
<td>Specialty Care</td>
<td>1</td>
<td>0.6%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Access COVID</td>
<td>1</td>
<td>0.6%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Oral health</td>
<td>6</td>
<td>3.8%</td>
<td>0.6%</td>
</tr>
</tbody>
</table>
What will not be affected

• Access to COVID-19 vaccinations and certain treatments, such as Paxlovid and Lagevrio, will generally not be affected.
• FDA’s EUAs for COVID-19 products (including tests, vaccines, and treatments) will not be affected.
• Major Medicare telehealth flexibilities will not be affected.
• Medicaid telehealth flexibilities will not be affected.
• The process for states to begin eligibility redeterminations for Medicaid will not be affected.
• Access to buprenorphine for opioid use disorder treatment in Opioid Treatment Programs (OTPs) will not be affected.
• Access to expanded methadone take-home doses for opioid use disorder treatment will not be affected.

Source: HHS Fact Sheet: COVID-19 Public Health Emergency Transition Roadmap
What will be affected

- Certain Medicare and Medicaid waivers and broad flexibilities for health care providers are no longer necessary and will end.
- Coverage for COVID-19 testing for Americans will change.
- Reporting of COVID-19 laboratory results and immunization data to CDC will change.
- Certain FDA COVID-19-related guidance documents for industry that affect clinical practice and supply chains will end or be temporarily extended.
- FDA’s ability to detect early shortages of critical devices related to COVID-19 will be more limited.
- Public Readiness and Emergency Preparedness (PREP) Act liability protections for may be impacted.
- The ability of health care providers to safely dispense controlled substances via telemedicine without an in-person interaction is affected; however, there will be rulemaking that will propose to extend these flexibilities.

Source: HHS Fact Sheet: COVID-19 Public Health Emergency Transition Roadmap