



Missouri Can Address State Medicaid Enrollment Challenges Through Administrative Changes

Missouri has experienced one of the steepest drops in Medicaid enrollment in the nation.¹ While a small share of the decline in enrollment may be attributable to economic factors, the bulk of the decline in Missouri's enrollment appears directly correlated with new renewal procedures and information systems enacted in Missouri in July of 2018. **Of particular concern, a large portion of families who lost Medicaid coverage still meet income eligibility requirements for Medicaid.**

Missouri should undertake a number of administrative changes in order to address the immediate challenges created by new renewal procedures and ensure that every income-eligible child and parent is enrolled in Medicaid. Missouri should:

- Increase staffing adequacy at the Department of Social Services Call Center and Local Resource Centers
- Place a Temporary Moratorium on Quarterly Reviews and on Automated Closures
- Create a Specialized Unit of Trained Workers to Assist Families at Risk of Losing Medicaid
- Implement Express Lane Eligibility and Increasing Utilization of No-Touch Renewals
- Provide Families Access to Update Online Accounts
- Place Specialized Enrollment Counselors at Every Resource Center to Help Families Apply and Renew Eligibility

A survey of health care providers conducted by Kids Win Missouri, Missouri Budget Project and the Missouri Coalition of Children's Agencies indicated that 87% of patients who lost Medicaid still met income eligibility requirements, but lost coverage due solely to challenges in the renewal process. The vast majority of these (over 84%) were unaware of the coverage loss until scheduling or attending an appointment.

Renewal Procedures Trigger Enrollment Decline

New renewal procedures and information systems enacted in Missouri appear to have triggered MoHealthNet's large enrollment decline. In 2018, MoHealthNet annual reviews were resumed following the implementation of a new computer system. This system does not electronically verify income or employment information, as almost all states do, and has relied heavily on families returning paper renewal forms.³ Even if a family has recently verified income or employment information within another state program (such as food assistance), this information is not automatically updated within the Medicaid computer system – a glitch of which families are often unaware.

Several factors related to this renewal process have created barriers for families in renewing their eligibility.⁴

- **Families did not receive renewal paperwork.** For a variety of reasons, low-wage families who rely on Medicaid move frequently.⁵ Thus when renewals were resumed after a lengthy delay, in many cases renewal notices were sent to an outdated address.
- **Submitted paperwork was lost or not processed.** Paperwork was submitted by the family, but was never received or was not processed in a timely manner to ensure renewal.
- **Families did not submit paperwork or did not understand the renewal process.** A large number of families did not understand the process for a variety of reasons or did not promptly respond to renewal notices. A commonly reported issue was that renewal letters were sent only in English, leaving those with limited English proficiency unable to respond.
- **Renewal notices were received too late.** Families did not receive the renewal letter

with sufficient time to respond or gather needed documentation.

These renewal problems were exacerbated by staffing issues and high volume at Call Center and Local Resource Centers. Over 75% of families who attempted to resolve an issue over the phone waited over one hour to receive assistance. In many cases, calls were dropped or disconnected, or went unanswered entirely as families received a “high call volumes” message. Similarly, nearly 40% of those attempting to resolve an issue in person waited over one hour for assistance.

Missouri Could Address Immediate Challenges Through Administrative Changes

By undertaking a number of administrative changes, Missouri can address the immediate challenges created by the new enrollment procedures and better ensure that every income-eligible child and parent is enrolled in Medicaid. These changes include:

- Increasing Staffing Adequacy at the Department of Social Services Call Center and Local Resource Centers
- Ensuring that Specialized Enrollment Counselors are at Every Resource Center to Help Families Apply and Renew Eligibility
- Placing a Temporary Moratorium on Quarterly Reviews and on Automated Closures
- Creating a Specialized Unit of Trained Workers to Assist Families at Risk of Losing Medicaid
- Implementing Express Lane Eligibility and Increasing Utilization of No-Touch Renewals
- Provide Families Access to Update Online Accounts

Improve Staffing of the Call Center

Staffing issues and high volume at the Call Center have worsened the challenges to families trying to renew eligibility.⁶ Moreover, data provided by the Department of Social Services confirms that the Call Center is not currently equipped to handle the significant number and/or complexity of calls it has been receiving since the new renewal procedures were implemented.

- In June of 2018, the Call Center deflected (dropped or not answered) 75% of the calls it received (315,112 of 421,943 total calls). By comparison, in June of 2017, 30% of calls were deflected.
- In the most recent month for which data is available, June of 2019, 64% of calls - two of every three - were dropped or unanswered.⁷
- In addition, for families whose call is answered, the wait time (often well over one hour) is untenable.

➤ Increasing staffing of the Call Center and providing training to ensure that staff are able to handle complex calls could be instrumental in helping to ensure that all eligible kids and parents are enrolled in Medicaid.

Increase Access to Assistance at Local Family Support Division Resource Centers

Missouri's enrollment paperwork is lengthy and complex, and in many cases families don't understand what documentation they are required to submit. Yet, families who've attempted to access help at the Local Family Support Division Resource Centers have been met with additional barriers.

- Families are no longer assigned to a case worker, but instead are often asked to leave their application in a box.
- In addition, many of the Local Resource Centers are only open during normal business hours on week days when parents are working.

➤ Instead, Missouri should ensure that specially-trained "Community Information Specialists," who are able to assist families directly with their questions and paperwork, are available as intended at every Local Resource Center.

➤ Further, office hours should be extended to increase access for working families.

➤ Additionally, providing families access so they may update online accounts would ease the strain on workers and improve communication with families.

Place a Moratorium on Automated Closures & Quarterly Reviews

Until the Department addresses the systems issues contributing to the enrollment decline, Missouri should place a moratorium on automated closures.

- The Department of Social Services reports that it contacts families six times prior to ending their Medicaid coverage.
- However, if the Department has been mailing correspondence to an outdated address or texting an inaccurate phone number, the family is unlikely to receive any of the notices.

- Require the Department to have direct interaction with a family before their coverage ends.
- Create a Special Unit of trained workers tasked with making personal contact with families at risk of closure and working intensively to find solutions to barriers in returning enrollment and renewal paperwork.
- Refrain from beginning automated quarterly reviews of the Medicaid caseload until the Department resolves the systems issues. Instituting quarterly reviews at this time would only serve to complicate an already stressed system and will likely result in additional loss of Medicaid among families who are still income eligible for coverage.

Streamline the Renewal Process

A number of options currently exist to streamline the renewal process using data from other public programs or other information available to the agency.

- The Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA) included many provisions designed to give states the tools they need to effectively enroll eligible children in Medicaid and the Children’s Health Insurance Program (CHIP).
- The Centers for Medicare and Medicaid Services (CMS) allows for streamlined methods of eligibility verification for children and parents.

➤ **Implement Express Lane Eligibility**

One of the key tools that CHIPRA created is the express lane eligibility (ELE) option.

Using data found in other public programs (referred to as ELE agencies) such as SNAP, TANF, WIC, Child Care can be used to determine and/or renew eligibility.⁸

Alabama, South Carolina both use SNAP and TANF, and Louisiana uses SNAP and National School Lunch Program as ELE agencies.⁹

➤ **Increase Utilization of No-Touch or Ex-Parte Renewals**

This process is referred to as “no touch renewals” and is described by CMS as an “ex-parte” renewal.

No-Touch Renewals redetermine eligibility for Medicaid based on reliable information contained in the beneficiary’s account [enrollee’s case record] or other more current information available to the agency, including information accessed through electronic data sources.¹⁰

A recent study demonstrated success in other states using these processes.¹¹

NOTES

1. The enrollment decline for children is the largest in the country; Georgetown University Health Policy Institute, Center for Children and Families, “New Data Find Troubling Decline in Child Enrollment in Medicaid and CHIP Continues in Many States,” June 19, 2019.
2. The Medicaid Enrollment Survey was conducted from May 16 – June 20, 2019 and garnered responses from 37 health care providers who serve patients in 46 of Missouri’s 114 Counties, or covering about 40% of the state’s geography. These counties include: Adair, Audrain, Barton, Boone, Callaway, Carroll, Clark, Cole, Cooper, Franklin, Greene, Howard, Iron, Jackson, Jasper, Jefferson, Knox, Lafayette, Lewis, Lincoln, Macon, Marion, McDonald, Mercer, Moniteau, Monroe, Montgomery, Newton, Osage, Pike, Putnam, Ralls, Randolph, Reynolds, Schuyler, Scotland, Shelby, St. Charles, St. Francois, St. Louis City, St. Louis County, Stone, Sullivan, Warren, Washington and Webster. The survey respondents collectively serve patients in nearly every region of the state and represent rural, urban and suburban areas.
3. Legal Services of Eastern Missouri, "Medicaid Fact Sheet: Historic Loss of Medicaid & CHIP for Missouri’s Kids"
4. IBID #2
5. IBID #3, Legal Services of Eastern Missouri
6. IBID #2
7. Data provided by the Missouri Department of Social Services, Risk Assessment Unit
8. Centers for Medicaid and Medicare, Letter to State Officials on Express Lane Eligibility dated February 4, 2010, available at: <https://www.medicaid.gov/federal-policy-guidance/downloads/sho10003.pdf>
9. Centers for Medicaid and Medicare, “Express Lane Eligibility for Medicaid and CHIP Coverage,” available at <https://www.medicaid.gov/medicaid/outreach-and-enrollment/express-lane/index.html>
10. “Coverage Expansion Learning Collaborative: Medicaid/CHIP Renewals: State Practices, Lessons Learned and Opportunities,” CMS Medicaid and CHIP Learning Collaborative, August 2015. Accessed online on February 2, 2016 at <https://www.medicaid.gov/state-resource-center/mac-learningcollaboratives/downloads/coveragelc-medicaid-chip-renewals.pdf>
11. Georgetown University Health Policy Institute, Center for Children and Families, “Making Medicaid Work Better: Lessons from States on Implementing Ex Parte Renewals,” April 7, 2016