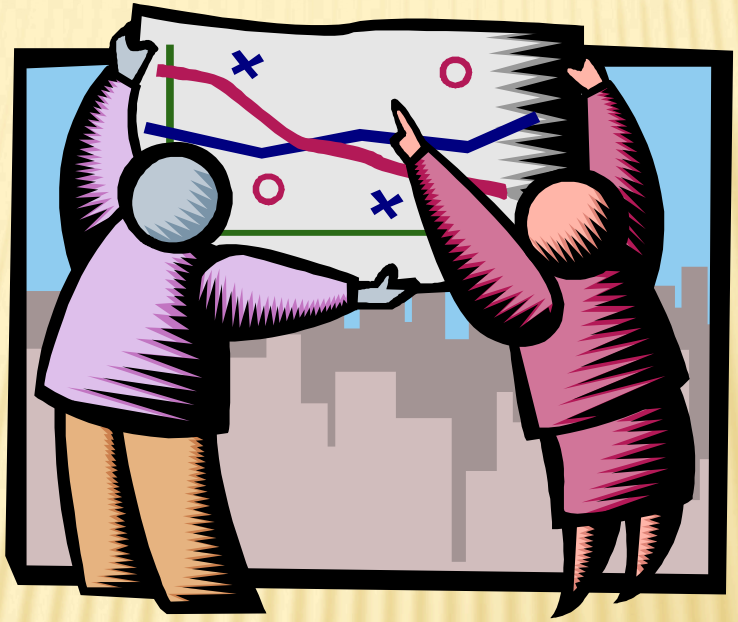
MEDICAID & CHIP ENROLLMENT STRATEGIES IN LOUISIANA



Medicaid and CHIP Payment & Access Commission
Washington, DC
February 20, 2014

J. Ruth Kennedy, Medicaid Director
La. Dept of Health & Hospitals

DEPARTMENT OF HEALTH AND HOSPITALS
Medicaid

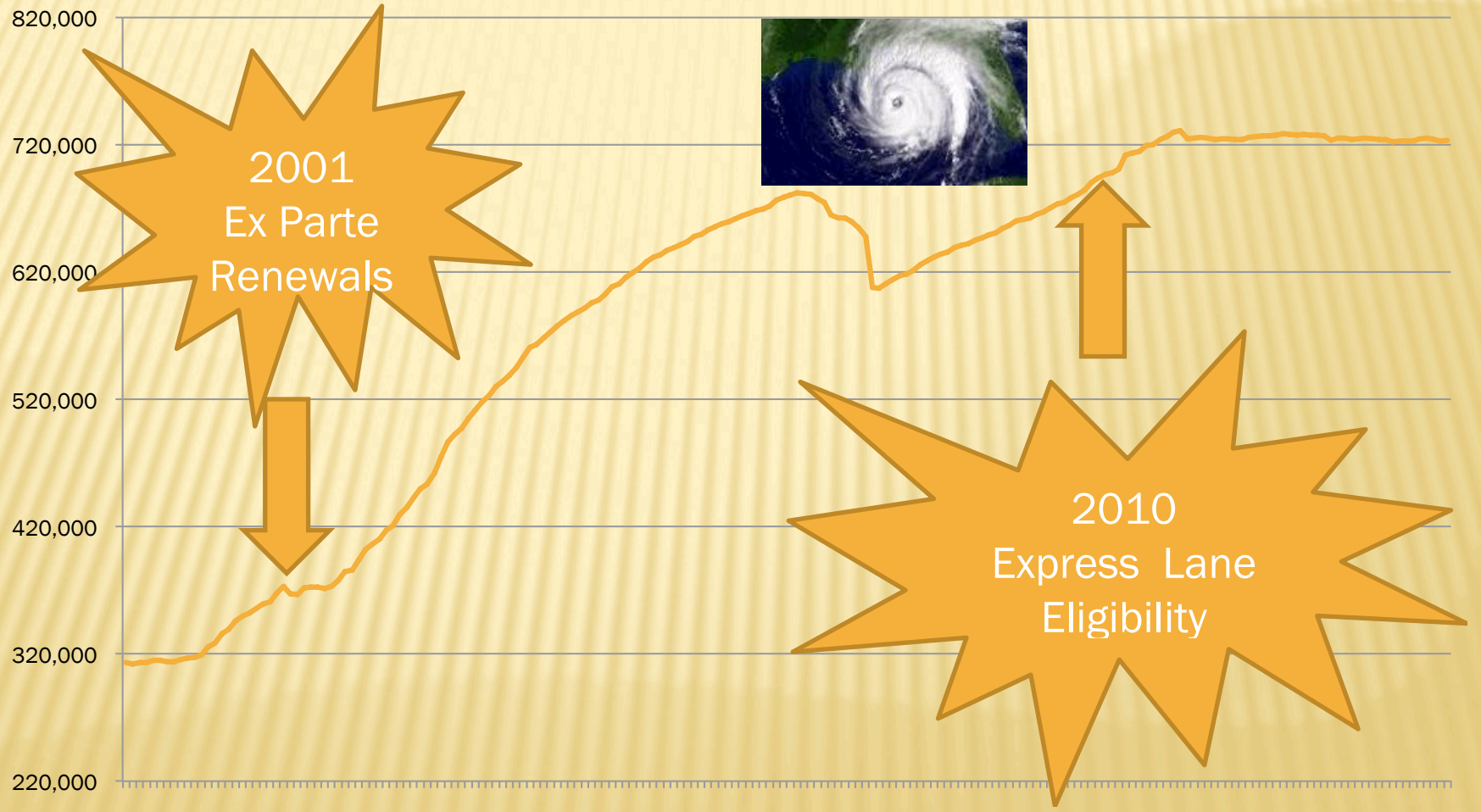
OVERVIEW OF TODAY'S REMARKS

- Summary and timeline for eligibility performance measure implementations in Louisiana
- Our experience with ex parte and administrative renewals
- Fully capitalizing on the potential of Express Lane Eligibility (ELE)
- Conclusions from 15 years "in the trenches," working to increase enrollment of eligible people in Medicaid and CHIP

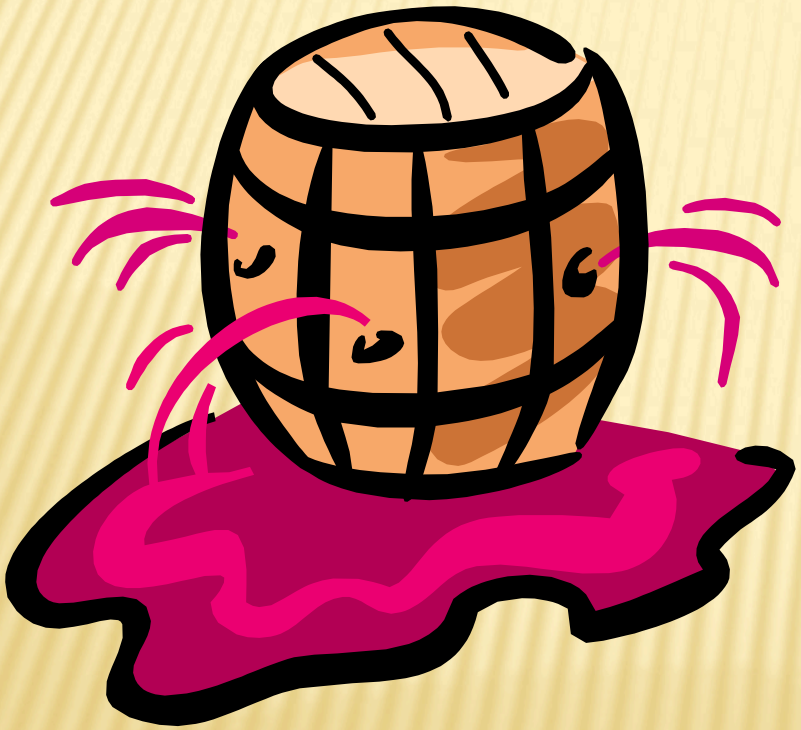
PERFORMANCE BONUS MEASURES

MEASURE	LOUISIANA IMPLEMENTATION DATE
12 Months Continuous Eligibility	1998
No Assets Test	1992 (M); 1998 (C)
No Face-to-Face Interview	1998
Joint Application; Same Verifications	1998
Administrative/*Ex Parte* Renewals	2001
Presumptive Eligibility	N/A
Express Lane Eligibility	2010 (**Medicaid only**)
Premium Assistance Option	N/A (*Section 1906 Program for Medicaid & Medicaid Expansion-CHIP*)

CHILDREN ENROLLED IN LOUISIANA MEDICAID & CHIP – 1997-2014

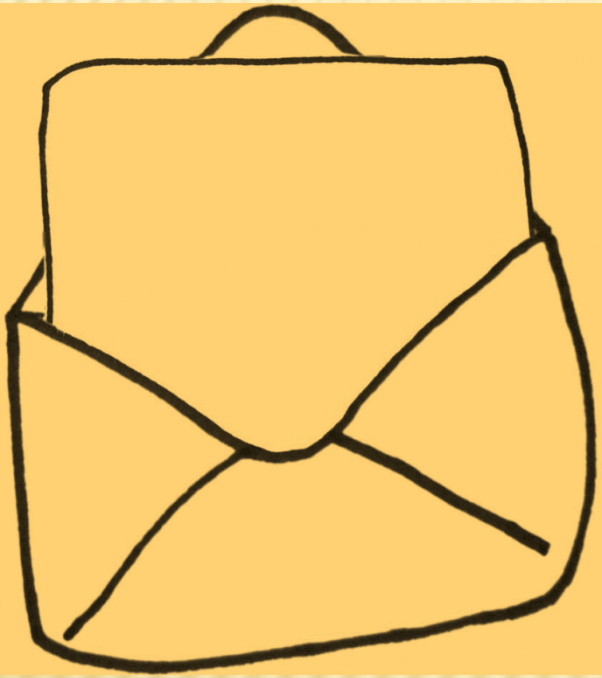


RENEWAL WOES IDENTIFIED IN EARLY 2000 : OUR "HOLE IN THE BUCKET"



- Renewal Closures
  - Overwhelming majority for "procedural" reasons
  - Exceeded the number of "new" children
- Bigger problem in Medicaid than CHIP

A WATERSHED EVENT – APRIL 7, 2000 STATE MEDICAID DIRECTOR'S LETTER



- Federal guidance on *ex parte* redeterminations
- States directed to review **policies, procedures** and **practices**
- Identify any unintended consequences of welfare reform

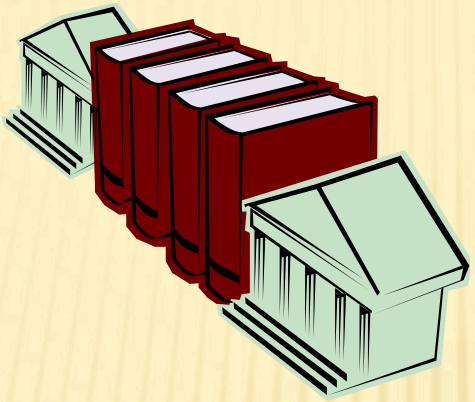
EX PARTE ELIGIBILITY RENEWALS INTRODUCED

- In July 2001, expanded ex parte renewal to all children in active Food Stamp case
- In essence, "adjunctive eligibility"
- By May 2003, 57% of all Medicaid renewals were via ex parte method
- # 1 factor in Louisiana's large enrollment increases between 2001 and 2005

ADMINISTRATIVE RENEWALS

- Defined in LA as system driven reviews of eligibility that involve eligibility worker only if a change is reported
- Classification as “passive” would be mischaracterization
- Data-driven identification of enrollees with very low probability of change, resulting in ineligibility, e.g.
  - Single parent household
  - Less than $500 monthly income for three years
  - Child living with caretaker relative
- Developed using formal Process Improvement (Plan-Do-Study-Act) model; extensive testing
- Key tenet—for Medicaid/CHIP eligibility, if income is below income cap, precise amount is not required

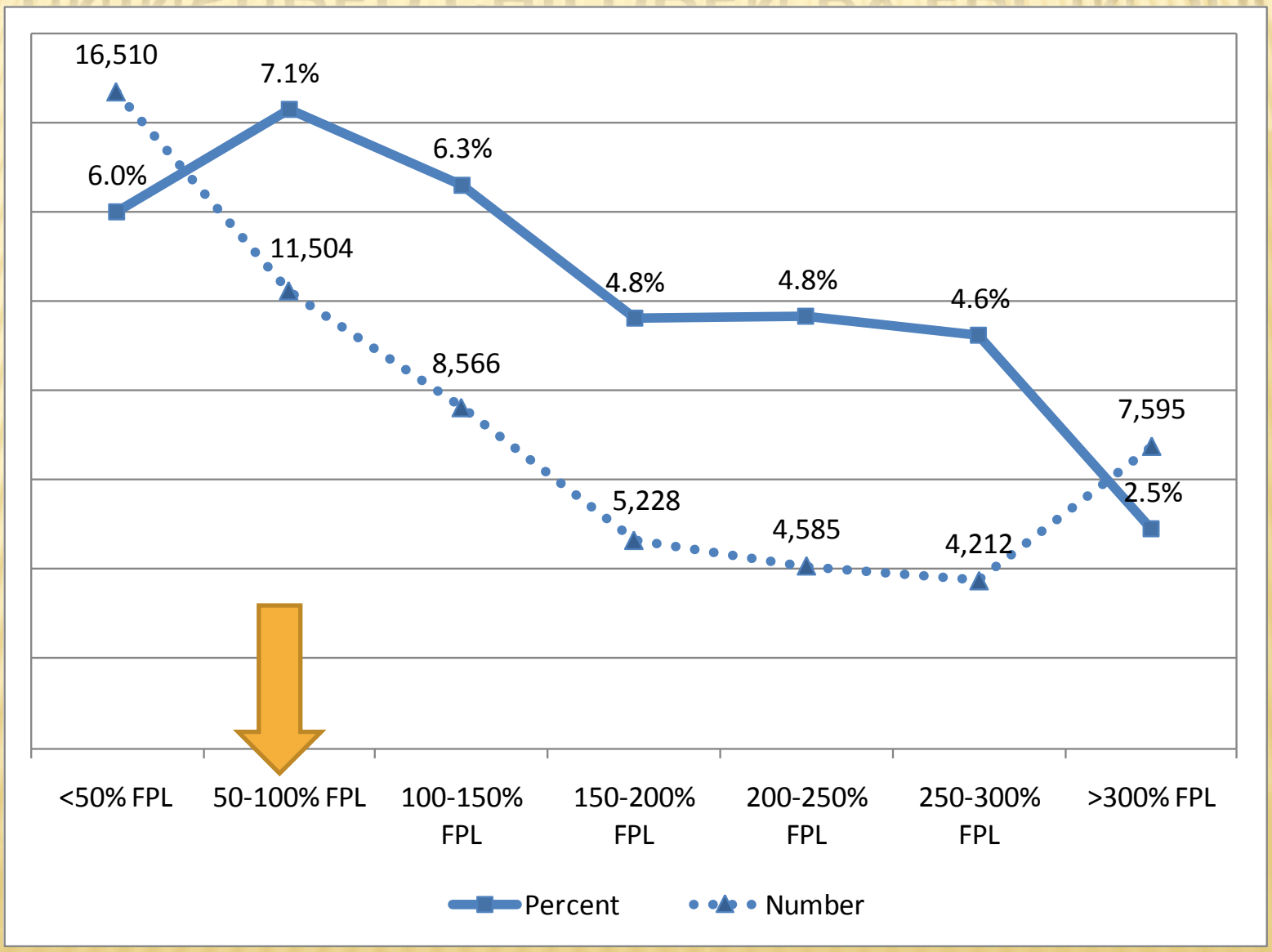
ELE IS THE LAW IN LOUISIANA!



The department, upon enactment by Congress of legislation allowing the same may utilize income determinations made by the Food Stamp Program, WIC, or National School Lunch Program for determining income eligibility for the Louisiana Medicaid program or LaCHIP.

La. R.S. 46:977.8 [2007]

LA UNINSURED CHILDREN BY FPL IN 2009



WHY WE BELIEVE ELE IS IMPORTANT FOR LOUISIANA'S KIDS

- Highest % of state's uninsured kids are from 50% to 100% FPL
  - Literacy issues
  - "Simplicity" of enrollment is relative
  - Complicated lives
- Different agencies determine Medicaid/CHIP and SNAP eligibility
  - Parental priorities
  - Maslow's hierarchy of needs
- Administrative savings
- Reduction in churning

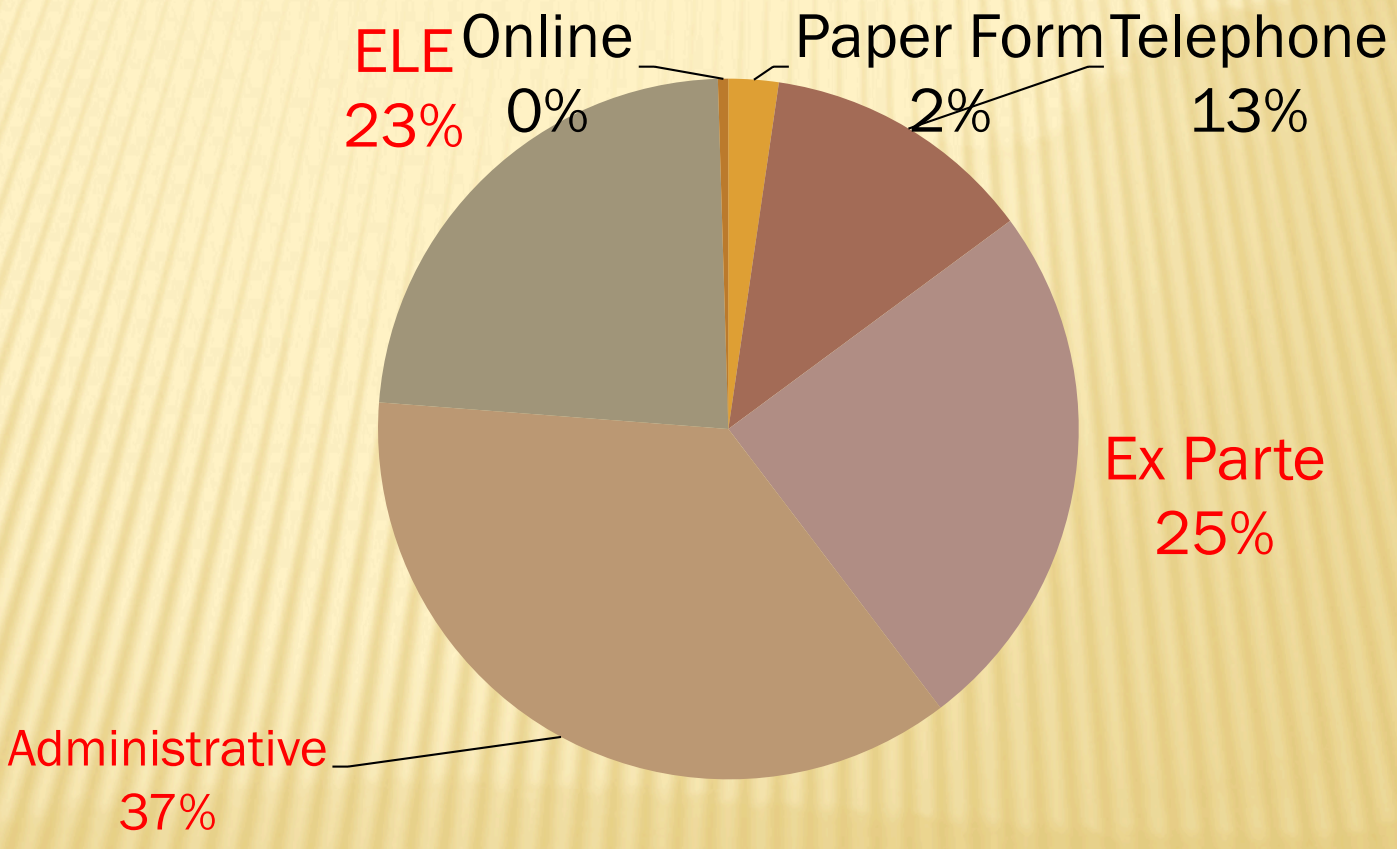
MOVING BEYOND *EX PARTE*/ ADMINISTRATIVE RENEWALS TO ELE

- Even further reduction in administrative costs
- Even less need for any caseworker action
- Reduces exposure to eligibility errors
  - ELE cases excluded from Quality Control and PERM reviews
- Further simplifies eligibility—in Louisiana, all children eligible for SNAP are eligible for Medicaid
- Performance bonuses based on Medicaid enrollment increase

SIMPLIFICATION ISN'T SIMPLE (OR QUICK) –OUR ELE TIMELINE

- Immediately started intensive planning after CHIPRA was signed in February 2009
  - Eligibility systems programmers focused major resources making system changes
  - State Administrative Rulemaking process
- Internal marketing – the need to pursue, despite fiscal impact in face of reductions to Medicaid budget ($4M)
- State Plan Amendment submitted to CMS n December 2009
- CMS approval January 22, 2010
- First 10,545 children enrolled via ELE February 10, 2010
- Automatic renewals based on SNAP enrollment November 2010

LOUISIANA MEDICAID RENEWALS BY TYPE—DECEMBER 2013



FACTORS THAT IMPACTED OUR ABILITY TO ADOPT AND INSTITUTIONALIZE MEASURES

- Strong executive support for
  - Increasing enrollment of eligible children in Medicaid, as well as CHIP
  - Simplifying and streamlining application and renewal processes for families
- Statutory changes and/or legislative approval not required
- Twelve month continuous eligibility policy
- Medicaid and CHIP administratively "de-linked" totally from TANF and SNAP (different agency) since 1992
- Totally paperless Medicaid and CHIP eligibility case records
- Eligibility workers in Louisiana are state employees (and not unionized)
- Unwavering belief that while resource intensive, in the end--

the juice would be worth the squeeze!

SOME FINAL THOUGHTS

- Extend Express Lane Eligibility (ELE) option for states beyond 12/31/14 when it is scheduled to sunset (per American Taxpayer Relief Act of 2012)
- Further refine the definition of ELE to be more than just a “lead file” (if bonus payments continue to be tied to the adoption)
- Expand the option to include adults if you are serious about enrolling eligible people
- Recognize that enrollment (and costs for services) will increase
- Consider enhanced match to states for individuals who are automatically enrolled or re-enrolled through ELE

NEVER DOUBT THAT A SMALL GROUP OF THOUGHTFUL, CARING PEOPLE CAN CHANGE THE WORLD INDEED, IT IS THE ONLY THING THAT EVER HAS!

— DR. MARGARET MEAD

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