



Eligibility, Enrollment, and Renewal Processes

Case Study Findings



Medicaid and CHIP Payment and Access Commission

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Overview

- Background on changes under the Patient Protection and Affordable Care Act (ACA)
- Case studies
- Key themes
- Looking forward

Background on ACA Changes

- Intended to simplify and streamline processes
- Maximize automation and real-time determinations
- Use of multiple modes of application, including online
- Reliance on electronic data sources to verify eligibility

Case Studies

- Contract with the State Health Access Data Assistance Center (SHADAC) at the University of Minnesota School of Public Health
- Focus on populations where eligibility is determined using modified adjusted gross income (MAGI):
 - Auto-enrollment and renewal
 - Use of electronic data sources
 - Integration across health and human services
- Six diverse states: Arizona, Colorado, Florida, Idaho, New York, and North Carolina

Case Studies

- Study states took different approaches to streamlining Medicaid eligibility processes, reflecting state priorities and capabilities
- All states focused on the transition to MAGI-based determinations and use of electronic data sources for verification
- They also had to balance the need for accurate eligibility determinations with efforts to make enrollment as streamlined as possible

Key Themes

- Multi-benefit online applications enhance beneficiary access to programs and reduce burden, but eligibility systems are complicated to maintain
- Electronic data interfaces facilitate high rates of real-time eligibility determinations, auto-renewal, and reduce churn
- Robust rules engines are critical, but workers still need to understand policy

Key Themes, continued

- Complex and varied program rules remain a challenge for integration of MAGI Medicaid and other programs
- Despite streamlined processes, demand for enrollment assistance is high

Looking Forward

- Accommodating Medicaid policy changes
- Efforts to improve beneficiary notices
- Investment of staff resources and funding to improve application and eligibility systems



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