

# All-State Medicaid and CHIP Call July 26, 2022



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# Agenda

- Affordable Connectivity Program
- Recent CMCS Releases:
  - Ukrainian Fact Sheet
  - 2022 Medicaid and CHIP Beneficiary Profile
  - Managed Care Oversight CIB
- Unwinding FAQs
- Open Mic Q and A



THE WHITE HOUSE  
WASHINGTON

# Affordable Connectivity Program

July 26, 2022

# Overview of Affordable Connectivity Program (ACP)

- The ACP provides eligible households up to **\$30/month** (or \$75/month on Tribal lands) off internet bills, as well as a one-time \$100 discount off a connected device.
- Eligibility:
  - Households with **income at or below 200% of the poverty level** (\$55.5k for a family of four); OR
  - Automatic eligibility without regard to income **where at least one household member receives certain other federal benefits, including Medicaid**, SNAP, SSI, WIC, Reduced Price School Lunch, and more; OR
  - Households eligible for internet provider's existing low-income internet plan.

# GetInternet.gov: Fully covered high-speed internet

- To save households even more, the Biden-Harris Administration secured commitments from leading internet providers to offer ACP-eligible high-speed internet plans that are fully covered.
- As a result, **millions of households—including every household where a member receives Medicaid—can get free, high-speed internet**.
- In May, we launched **GetInternet.gov**—a one-stop shop to check eligibility, sign up, and find fully covered plans. (Available in Spanish & English; can also call (877) 384-2575.)
- Last week, the Vice President announced that **1 million new households** have enrolled in ACP home internet plans since we launched GetInternet.gov.
- But we know **tens of millions more are eligible** but have yet to claim their benefit.

# The Upshot

- Every single household that gets Medicaid is entitled to up to \$30/month off their internet bill today.
- Millions of them can get high-speed internet at no out-of-pocket cost.
- Americans should go to GetInternet.gov to check eligibility and sign up.

# How you can help

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- **Directly contact eligible or likely eligible households**—e.g., texting and mail notifications
- **Use every tool to tell families about GetInternet.gov**—e.g., your websites, a P.S. in your other messages, physical and call waiting room PSA, etc.
- **Enter data-matching agreements** ([Leigh.Lee@usac.org](mailto:Leigh.Lee@usac.org))
  - CMS already has a data-matching agreement with FCC, but state databases update faster. Need states to data-match other databases, too (SNAP, WIC, income, School Lunch, SSI)
  - CO, FL, IN, KY, MI, MN, NV, NM, PA, UT currently match Medicaid, but not other data.

# Health Coverage Options for Certain Ukrainian Nationals

## Fact Sheet

- On May 21, 2022, the President signed new legislation that created new health coverage options for Ukrainian Nationals that recently entered the U.S.<sup>1</sup>
- On July 13, CMS released a new fact sheet to inform states about new eligibility and health coverage options for Ukrainian nationals and offer additional technical information regarding implementation.
- CMS' fact sheet, *Health Coverage Options for Certain Ukrainian Nationals*, is available at:  
<https://www.medicaid.gov/medicaid/eligibility/downloads/hlth-cov-opt-fr-cer-ukrainian-natnls.pdf>

<sup>1</sup> Section 401, **Additional Ukraine Supplemental Appropriations Act, 2022** (P.L. No: 117-128, enacted May 21, 2022).



# New Medicaid and CHIP Eligibility for Ukrainian Humanitarian Parolees

- Ukrainian nationals who enter the U.S. as parolees *on or between February 24, 2022 and September 30, 2023* are **eligible for Medicaid or CHIP to the same extent as refugees, without a five-year waiting period**, if they meet all other eligibility requirements for coverage in the state.
- Ukrainian nationals who are paroled into the U.S. *after September 30, 2023* and are:
  - the spouse or child of a parolee described above, or
  - the parent, legal guardian, or primary caregiver of a parolee described above who is determined to be an unaccompanied childwill also be **eligible for Medicaid and CHIP to the same extent as refugees.**
- Ukrainian parolees who are eligible under this legislation are considered “qualified non-citizens” for purposes of Medicaid and CHIP eligibility and are **eligible for benefits to the same extent as refugees.**

# Medicaid and CHIP Eligibility for Ukrainian Nationals with Temporary Protected Status (TPS)

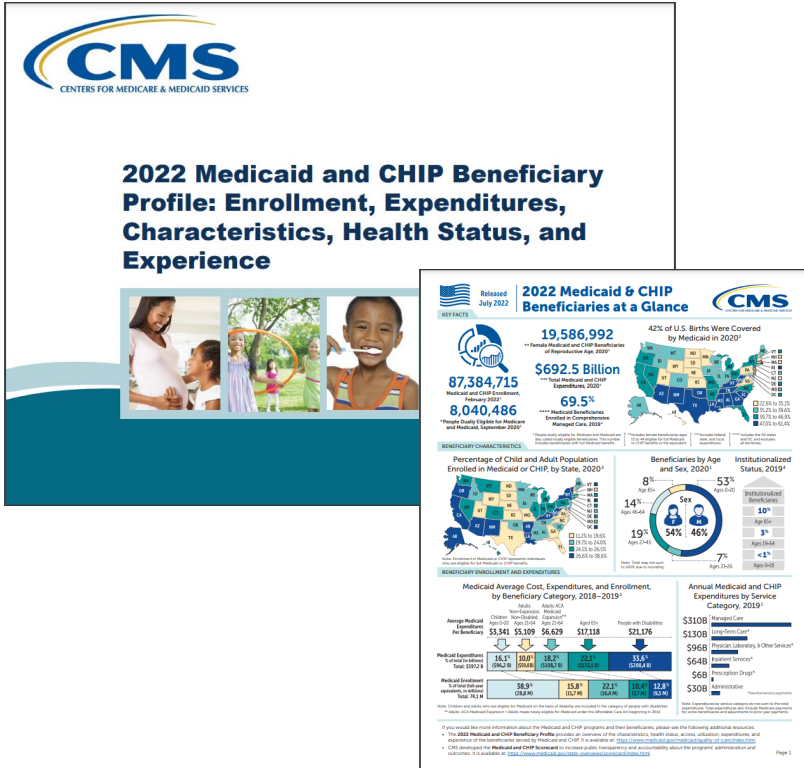
- Ukrainian Nationals who have been living in the U.S. since April 19, 2022 may be granted Temporary Protected Status (TPS).
- Ukrainian nationals who are either granted TPS or have a pending application for TPS and have been granted employment authorization, are eligible for Medicaid and CHIP if they meet all other eligibility requirements and are:
  - 1) Either a child under age 21 (under age 19 for CHIP) or a pregnant individual; and
  - 2) Living in one of the 39 states and territories that have opted to cover lawfully residing individuals under age 21 (under age 19 for CHIP) and/or pregnant individuals.<sup>1</sup>

<sup>1</sup> Commonly referred to as the “CHIPRA 214 option.”

# General Eligibility and Enrollment Considerations for Medicaid and CHIP

- **Fixed Address Not Required:** States may not deny Medicaid and CHIP eligibility because the individual has not resided in the state for a minimum specified period or does not have a fixed address.
- **Intent to Reside for Individuals Planning to Move:** If an individual is moving to a different state, the individual may apply for Medicaid and CHIP in the state in which they intend to reside. Individuals moving to another state do not need to wait until they arrive to apply for coverage in their new state.
- **Presumptive Eligibility Option to Enroll Ukrainian Nationals:** Hospitals participating in Hospital Presumptive Eligibility (HPE) or other qualified entities designated by the state to participate in the state's Presumptive Eligibility (PE) program may immediately enroll Ukrainian nationals who are likely eligible under a state's Medicaid or CHIP program for a temporary period of time.
- **Outstationed Eligibility Workers Can Support Enrollment at Remote Sites:** States can outstation state or county eligibility workers at any location that is assisting Ukrainians to help facilitate enrollment of these individuals into coverage.
- **Reasonable Opportunity Period to Verify Immigration Status Applies:** If a state is not able to verify an Ukrainian national's immigration status promptly, and the individual has attested to having an eligible immigration status and is found otherwise eligible for Medicaid or CHIP, the state is required to furnish benefits during the 90-day reasonable opportunity period (ROP).

# Medicaid and CHIP Beneficiary Profile



- On July 15<sup>th</sup>, 2022, CMS released the 2022 Medicaid and CHIP Beneficiary Profile and infographic, which **provide an overview of the characteristics, health status, access, utilization, expenditures, and experience of care of beneficiaries served by Medicaid and CHIP.**
- The Beneficiary Profile and infographic are available at: <https://www.medicaid.gov/medicaid/quality-of-care/index.html>

# Medicaid and CHIP Managed Care Monitoring and Oversight Tools

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Centers for Medicare & Medicaid  
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## CMCS Informational Bulletin

**DATE:** July 6, 2022  
**FROM:** Daniel Tsai, Deputy Administrator and Director  
**SUBJECT:** Medicaid and CHIP Managed Care Monitoring and Oversight Tools

The purpose of this Center for Medicaid and CHIP Services (CMCS) Informational Bulletin (CIB) is to provide additional tools for states and the Centers for Medicare & Medicaid Services (CMS) to improve the monitoring and oversight of managed care in Medicaid and the Children's Health Insurance Program (CHIP).

### Introduction

In a [CIB dated June 28, 2021](#), CMS recognized the need to develop tools to help states improve their monitoring and oversight of Medicaid and CHIP managed care programs. The June 2021 CIB also released a reporting template for the Managed Care Program Annual Report, announced the development of a web-based reporting portal for the collection of all required managed care reports, and released two technical assistance toolkits for state use. CMS also committed to developing additional tools for monitoring and oversight of managed care.

Today, CMS is providing an update on the web-based reporting portal. We are also releasing two additional reporting templates, related to Medical Loss Ratio (MLR) and network adequacy and access assurances; a new technical assistance toolkit for states to oversee access in Managed Long-Term Services and Supports (MLTSS) programs; and initial recommended practices and strategies for ensuring timely and accurate payment to Indian health care providers.

### Web-Based Reporting Portal for the Collection of Required Managed Care Reports

In June 2021, CMS announced its intention to develop a web-based reporting portal, creating a single submission process and repository for all state reporting requirements related to managed care. These reports include: the Managed Care Program Annual Report required in 42 CFR § 438.66(e), the Medical Loss Ratio (MLR) Summary Report required in 42 CFR § 438.74(a), and the Network Adequacy and Access Assurances Report required in 42 CFR § 438.207(d).

The web-based portal will be built within the Medicaid Data Collection Tool (MDCT) currently used by CMS to collect, and states to submit, several required Medicaid and CHIP reports including CARTS, SEDS, and QMR. A separate module titled "MDCT-Managed Care Reporting" will be built to house the managed care reports.

MDCT-Managed Care Reporting will consist of fillable forms to be filled out by States based on the data they collected using the indicators contained in the Excel template. The structured data

- On July 6<sup>th</sup>, 2022, CMS released a CIB that provides additional tools for states and CMS to improve the monitoring and oversight of managed care in Medicaid and CHIP.
- The CIB is available at:  
<https://www.medicaid.gov/federal-policy-guidance/downloads/cib07062022.pdf>

# State Unwinding Q&As

1. **1902(e)(14) Waiver for SNAP-Related Beneficiaries Over 65:** Will CMS authorize 1902(e)(14)(A) waiver authority to allow states to use SNAP data to support MAGI redeterminations for individuals over 65 years old?
2. **1902(e)(14) Waiver for TANF-Related Beneficiaries:** Will CMS allow 1902(e)(14)(A) waiver authority to allow states to use Temporary Assistance for Needy Families (TANF) data to support MAGI redeterminations?

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# Questions

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