

MEDICAID CLIENT VOICE COUNCIL

ENGAGE

Volume 1

The Medicaid Client Voice Council seeks to amplify voices and increase feedback from the clients of Medicaid-funded programs.



DHS Secretary Cindy Gillespie

"To actually have a group of our clients who have agreed to work with us to improve our services and to make sure we're being responsive and providing what is needed is huge."

BEING SAID

"I joined this Council to help bridge the gap between program administrators and those who actually use the service, and well, who better to learn from than someone who experiences it firsthand."

Naythan Dyke, Council member





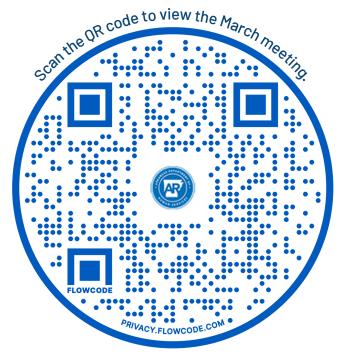


MEET YOUR NEW CHAIRPEOPLE

Meet Alison Caballero, appointed chairperson & Jerry Watson, elected co-chairperson.



VIEW THE LAST MEETING



RULES OF ENGAGEMENT

During the meeting, Council members decided on rules of engagement. Among other things, the council members agreed to allow presenters and fellow members to speak without interruption, to keep comments brief and focused, to remain respectful when opinions differ, and to speak openly and honestly about the topics being discussed.



Next Council Meeting Tuesday, May 17, 11 a.m.-2.p.m. AFMC Campus



Sarah Schmidt, Deputy Director of DPSQA

ENDING THE PUBLIC HEALTH EMERGENCY WITH AS LITTLE IMPACT AS POSSIBLE

The Covid-19 pandemic disrupted the lives of Americans in major ways. To help ensure that a disruption in Medicaid services did not make things even worse for lower income Arkansans, the state Medicaid program and the Arkansas Department of Human Services (DHS) agreed to provide continuous enrollment until the public health emergency ends.

That means that no Arkansans can be removed from the Medicaid rolls for a change in income or eligibility unless they moved out of state, died, requested to end their coverage, or were incarcerated.

During the public health emergency, the DHS Division of County Operations (DCO) continued to conduct Medicaid renewals and sending letters explaining that clients were no longer eligible or requesting additional information. However, coverage for those clients continued. Today, over 280,000 Arkansans have had their coverage extended due to the public health emergency.

As a result, the Kaiser Family Foundation reports that Medicaid and CHIP enrollment swelled during the pandemic to a record 85 million people (a 19 percent increase since the start of the pandemic).

Once the federal government announces the end of the public health emergency – and they have promised to give states a 60-day notice – DHS will send out new renewals, prioritizing those who had their coverage extended and those who have not had a redetermination in the last 12 months. We call this the "winddown" period.

Many individuals and families will lose coverage because they are no longer eligible. That is the normal "churn," or cycling off of a program, that Medicaid experiences outside of a pandemic. Those individuals may be eligible for affordable, comprehensive coverage through the Health Insurance Marketplace, or through an employer. DHS will let them know that they may be eligible for other coverage and will send essential information to the Marketplace.

Others who remain eligible could lose coverage because renewal paperwork is not completed and returned timely or because we do not have current contact information and cannot reach them.

"We know how important coverage can be to the people who have it, so we are working hard to make this transition as smooth as possible," said DCO Director Mary Franklin.



"There will, no doubt, be issues that come up, but we are committed to doing everything we can to reduce the chances that someone who is eligible will lose coverage, even temporarily."

DHS is taking a multi-prong approach to help prevent eligible people from losing coverage.

- DHS has set up a new Address Update call center to help clients quickly and easily update information such as their mailing address, phone number, and email address. In March the call center began calling clients. Clients also can call and update their information, though a public messaging campaign about that option will not start until mid to late April.
 - Clients can update their information online by creating an access.arkansas.gov account, by phone at 844-872-2660 OR in person at any DHS county office.
- DHS and its leadership will be monitoring the renewal process and adjusting processes during the unwinding period. DHS has centralized oversight so that someone from the Secretary's office is monitoring all aspects of the unwinding and is creating indepth data reports that will allow the Department to monitor what is happening with renewals, closures, and appeals. This will be created and used prior to the unwinding to ensure data are accurate and are the right sets to help with the operations of unwinding.

- DHS has recently hired two vendors to provide surge capacity for processing renewals and applications to help eliminate a backlog of applications, renewals, and changes. That surge capacity will remain in place through the unwinding. DHS also is exploring the best options for adding needed to legal and clerical staff to manage the fair hearing request process.
- The eligibility system has been designed to manage this transition in phases and testing of the system will take place before the unwinding begins.
- In addition to traditional notices from DHS, the Department is launching an outreach campaign to encourage clients to update their contact information and to be ready to respond if they get a renewal letter in the mail. The campaign will include:
 - Outreach through Medicaid providers, including PASSES, qualified health plans, non-emergency transportation providers, and others. Providers will be given lists of clients at-risk of losing coverage and asked to contact them.
 - Traditional and social media messaging, including paid social media outreach.
 - Text and emails through our eligibility and enrollment system
 - Messaging sent through the Arkansas
 Department of Health and its local health
 units as well as other state agencies and
 community organizations that may
 interact regularly with Medicaid clients.



DHS understands that transitioning back to normal operations is more than the eligibility and enrollment process. For each Medicaid program, DHS is determining what aspects of the program are impacted by a return to normal operations and what actions need to be taken. That includes a determination about whether:

- Operational changes are needed
- · Rules or policies need to be updated
- Information technology systems need to be changed
- There are financial or contractual impacts
- There are client impacts, including needed communication
- There are provider impacts, including needed communication
- Messaging sent through the Arkansas
 Department of Health and its local health
 units as well as other state agencies and
 community organizations that may interact
 regularly with Medicaid clients.



THE COUNCIL





ALISON CABALLERO LITTLE ROCK



JERRY WATSON PINE BLUFF



DEANDRIEA BASS-CARRIGAN CONWAY



CASANDRA GLOVER SEARCY



DARONDA WILLIAMS PRESCOTT



BRADLEY LEDGERWOOD CASH



AMANDA SANDERS MOUNTAIN HOME



DEBRA ECKL LITTLE ROCK



NAYTHAN DYKE FORT SMITH



REBA SHIPLEY JONESBORO



KETTY KONISKE POCAHONTAS



MICHELE LAPPIN WHITE COUNTY



LAURA CARTWRIGHT FAYETTEVILLE



FRANK HELLMER LITTLE ROCK



ERIKA BUENROSTRO DEQUEEN