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Contact:

Greg Turner, Ball Consulting Group, LLC

Phone: 617-243-9950; Email: greg@ballcg.com

BCBSMA Foundation Report Urges ‘Stakeholder Action’ to Reduce Risk of MassHealth Coverage Loss

Member Redeterminations, Suspended During COVID-19 Pandemic, Set to Resume April 1

BOSTON (March 23, 2023) – A report released today by the [Blue Cross Blue Shield of Massachusetts Foundation](#) has found that while Massachusetts is well-prepared overall to minimize coverage losses as MassHealth resumes its standard member renewal process, risks remain for marginalized communities that have historically faced barriers to health care.

The report provides a “stakeholder action checklist” and outlines key strategies to ensure that individuals who remain eligible stay covered, as MassHealth, the state’s Medicaid agency, restarts redeterminations for members on April 1. The redeterminations were suspended during the COVID-19 public health emergency. The report warns that the risk of coverage loss is especially acute for people of color, people who don’t speak English as a first language, and individuals who are homeless or who experience unstable housing.

“MassHealth has developed and is deploying a multipronged plan to increase and optimize outreach to members, a major initiative aimed at ensuring that people who are eligible for coverage can retain that coverage,” said Audrey Shelto, President and CEO of the Blue Cross Blue Shield of Massachusetts Foundation. “We are all mindful that certain groups are at particular risk for losing MassHealth coverage, and that includes the rising number of people who do not have a permanent address where they receive mail. It also includes people of color, who were more likely to experience disruptions in their address, income or employment during the pandemic – circumstances that may add steps to the redetermination process.”

Massachusetts and other states received enhanced Medicaid funding through the Families First Coronavirus Response Act, the first federal stimulus package passed by Congress in 2020 after the pandemic emerged. As a condition of the increased funding, states agreed to maintain continuous coverage for Medicaid members – even if circumstances affected their eligibility – throughout the COVID-19 public health emergency.



In Massachusetts, MassHealth enrollment grew by more than 25 percent to nearly 2.4 million members during the three years following the continuous coverage requirement. An act of Congress has set March 31 as an end date for continuous coverage, and members will begin to lose coverage if their eligibility cannot be verified or if they cannot be contacted. In some cases, individuals who no longer qualify for MassHealth may become newly eligible for Health Connector coverage but not successfully enroll through that subsidized health insurance marketplace.

MassHealth has developed a plan to increase outreach to members and work collaboratively with community-based organizations and Medicaid managed care plans. The Foundation's report features a "Stakeholder Action Checklist" to help providers, managed care plans, accountable care organizations, community-based organizations, and businesses play a role in member outreach. The checklist references downloading shareable materials to help spread the word about the redetermination process; helping individuals complete renewal forms; and giving feedback to MassHealth on coverage loss trends and issues with renewals.

"It is critical that everyone involved in health care in Massachusetts uses all the tools at their disposal to promote the stability and continuity of coverage that was made possible during the pandemic," Shelto said. "We are well prepared for potential disruptions but we must remain focused on these tactics and getting the word out to MassHealth members who may be at risk."

The report also outlines the following strategies, all of which MassHealth is implementing, to help maintain coverage for eligible individuals:

- **Processing pending redeterminations over a 12-month "unwinding" period** permitted by the federal government, to allow extra time to reach members for whom health care coverage and access are most critical.
- **Enhancing the renewal verification process**, particularly by increasing ex-parte renewals that use existing data sources, without requiring paperwork or documentation from an individual.
- **Investing in community-level outreach**, including a linguistically and culturally appropriate public education campaign led by Health Care For All to reach individuals where they live and work.
- **Partnering with Medicaid managed care plans**, including one-on-one meetings and open office hours to answer questions related to their roles and responsibilities during the unwinding period.
- **Deploying a communications and outreach strategy**, such as creating MassHealth call center scripts to help gather updated contact information, mailing notices in blue



envelopes to catch members' attention, and identifying priority populations including seniors, individuals with disabilities, and people who are immigrants or refugees.

- **Leveraging data to ensure up-to-date contact information**, specifically by using national public databases to cross-check addresses and phone numbers.
- **Strengthening workforce capacity**, such as boosting the eligibility and enrollment workforce by 120 agents through an external vendor and increasing its own call center staff to fill gaps.
- **Maintaining strong oversight and monitoring**, including through the use of a publicly posted dashboard that shows key metrics of the redetermination process.
- **Ensuring smooth transitions to the Health Connector**, the state's health insurance marketplace, for those no longer eligible for MassHealth coverage.

The report, titled "Reducing Coverage Loss: A 2023 Update on the End of the Federal Continuous Coverage Requirement in MassHealth," was commissioned by the Foundation's Massachusetts Medicaid Policy Institute and produced by Manatt Health. The report is available online at the following link:

<https://www.bluecrossmafoundation.org/publication/reducing-coverage-loss-2023-update-end-federal-continuous-coverage-requirement>

About the Blue Cross Blue Shield of Massachusetts Foundation

The mission of the Blue Cross Blue Shield of Massachusetts Foundation is to ensure equitable access to health care for all those in the Commonwealth who are economically, racially, culturally or socially marginalized. The Foundation was established in 2001 with an initial endowment from Blue Cross Blue Shield of Massachusetts. It operates separately from the company and is governed by its own Board of Directors. For more information, visit www.bluecrossmafoundation.org.

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