

Administrative Renewals

Nicole Huffman, Health Care Policy Analyst

February 16, 2017

Income Maintenance Advisory Committee (IMAC) Meeting



Overview

- Provisions in the Affordable Care Act require agencies to redetermine health care eligibility without requiring information from members if able to do so based on reliable information in the member's case or other more current information available, including data exchanges.
- If benefits can be continued through an administrative renewal, we must notify the member of their eligibility and the information we used to determine their eligibility.
- If benefits cannot be continued, we must provide a Pre-Printed Renewal Form (PPRF) to the member.
- This project intends to reduce agency workload, improve customer service, and reduce health care churning.

Implementation

- PPRFs were automated in September 2016.
- The pilot has begun with IM Central. We will share more information with consortia once we analyze the initial results and workload impact.
- Statewide implementation of administrative renewals is planned for May 2017. Health care cases with renewals due June 30 will be evaluated for administrative renewals on May 13.
- Along with the statewide implementation in May, certain Long Term Care (LTC) cases will be included in the administrative renewal process.

LTC Administrative Renewals

- Beginning in May 2017, individuals who are eligible for Group A Community Waivers and/or Medicare Premium Assistance (QMB) due to their eligibility for SSI will be included in the new administrative renewal process.
- Individuals eligible for Group A Community Waivers through 1619(b), BadgerCare Plus, EBD Medicaid, or Adoption Assistance, as well as Group B/B+, will continue to be excluded.
- In response to consortia requests, a report of Group A Community Waivers cases with eligibility through SSI due for renewal prior to June 30 was distributed through TAPP.

LTC Administrative Renewal Letter

- We are required to notify members of the information we used to determine their eligibility following an administrative renewal.
- Cases with individuals eligible only for Group A Community Waivers and/or QMB through SSI eligibility will be sent a unique administrative renewal letter without a case summary.
- The regular administrative renewal letter with case summary will be generated for a case open for Group A Community Waivers and/or QMB through SSI with other health care.
- If a case is also open for FoodShare, a 45-day renewal letter will also be generated for FoodShare if/when FoodShare is due for a renewal.

LTC Administrative Renewal Letter

MILWAUKEE
MILWAUKEE
ENROLLMENT SERVICES
PO BOX 05676
MILWAUKEE WI 53205

Mailing Date: 05/15/2017



State of Wisconsin

Case #: 000000010

Milwaukee Enrollment Services

Worker: A BCDEFG

Phone #: 1-888-947-8888

Fax #: (414) 438-8888

Use fax # to send verifications.



The State of Wisconsin is an equal opportunity service provider. This letter contains information that affects your benefits. If you need this material in a different format because of a disability or if you need this letter translated or explained in your own language, please call 1-888-947-8888. These services are free.

Your Health Care Benefits Have Been Renewed

Each year, we must review the information we have on file for you to see if you can keep getting <Community Waivers and/or Medicare Premium Assistance (QMB)> benefits. Based on our review, your benefits have been renewed. Your benefits will continue until there is a change in your case.

Your benefits have been renewed because our records show you are getting Supplemental Security Income (SSI) Medicaid. Because you qualify for that program, you qualify for <Community Waivers and/or Medicare Premium Assistance (QMB)>.

Call your agency at the number at the top of this letter if you have any questions or to report a change in any information we have on file. Otherwise, you do not need to take any action.

Project Impact

- Statewide Administrative Renewal Implementation:
 - Decreased IM workload.
 - Decreased member burden.
 - Decreased verification requests.
 - Decreased health care churning.
- LTC Administrative Renewals:
 - Group A Community Waiver individuals with eligibility based on SSI may not have been receiving correspondence from IM consortia, so this will not only be a new letter, but a new method of communication with these individuals.
 - We worked with LTC experts to develop a clear and concise letter, but as with any changes, there may be questions directed to the consortia.

Communication and Training Activities

- Operations Memo 17-J1 published January 5.
 - Amended February 10 for clarification related to the worker alert and processing for failed administrative renewal case summaries.
 - Another amendment will be published by April 7 regarding the inclusion of certain LTC cases in the administrative renewal process beginning in May 2017.
- We discussed administrative renewals at TAPP on January 13 and February 3.
- The IM New Worker Training modules now include administrative renewal content.
- EBD/LTC Process Support on April 10.
- BadgerCare Plus and Medicaid Eligibility Handbooks will be updated in early May.
- Pilot results will be shared at future IMAC meetings.

Questions?

- Questions regarding the project can be directed to Nicole Huffman at NicoleL.Huffman@dhs.wi.gov
- Agencies should follow their current process for contacting the CARES Call Center to report any case or system issues during the pilot or after statewide implementation.