



**2023** Agent and Broker Summit

# **Navigating the Medicaid Unwinding Period:** *Ensuring Consumers Stay Covered*

**Centers for Medicare & Medicaid Services (CMS)**  
**Center for Consumer Information & Insurance Oversight (CCIIO)**

May 24, 2023

# Disclaimer

*The information provided in this presentation is intended only as a general, informal summary of technical legal standards. It is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This presentation summarizes current policy and operations as of the date it was presented. Links to certain source documents have been provided for your reference. We encourage audience members to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information about the requirements that apply to them. The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.*

*This document generally is not intended for use in the State-based Marketplaces (SBMs) that do not use HealthCare.gov for eligibility and enrollment. Please review the guidance on our Agent and Broker Resources webpage (<http://go.cms.gov/CCIOAB>) and Marketplace.CMS.gov to learn more.*

*Unless indicated otherwise, the general references to "Marketplace" in the presentation only include Federally-facilitated Marketplaces (FFMs) and State-based Marketplaces on the Federal Platform (SBM-FPs).*

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# Agenda

- 01** Objectives
- 02** Unwinding Video
- 03** Transitions of Coverage Timeline
- 04** CMS Updates
- 05** Unwinding Special Enrollment Period
- 06** Coverage Transition Scenarios
- 07** Open Discussion; Live Question and Answer Session

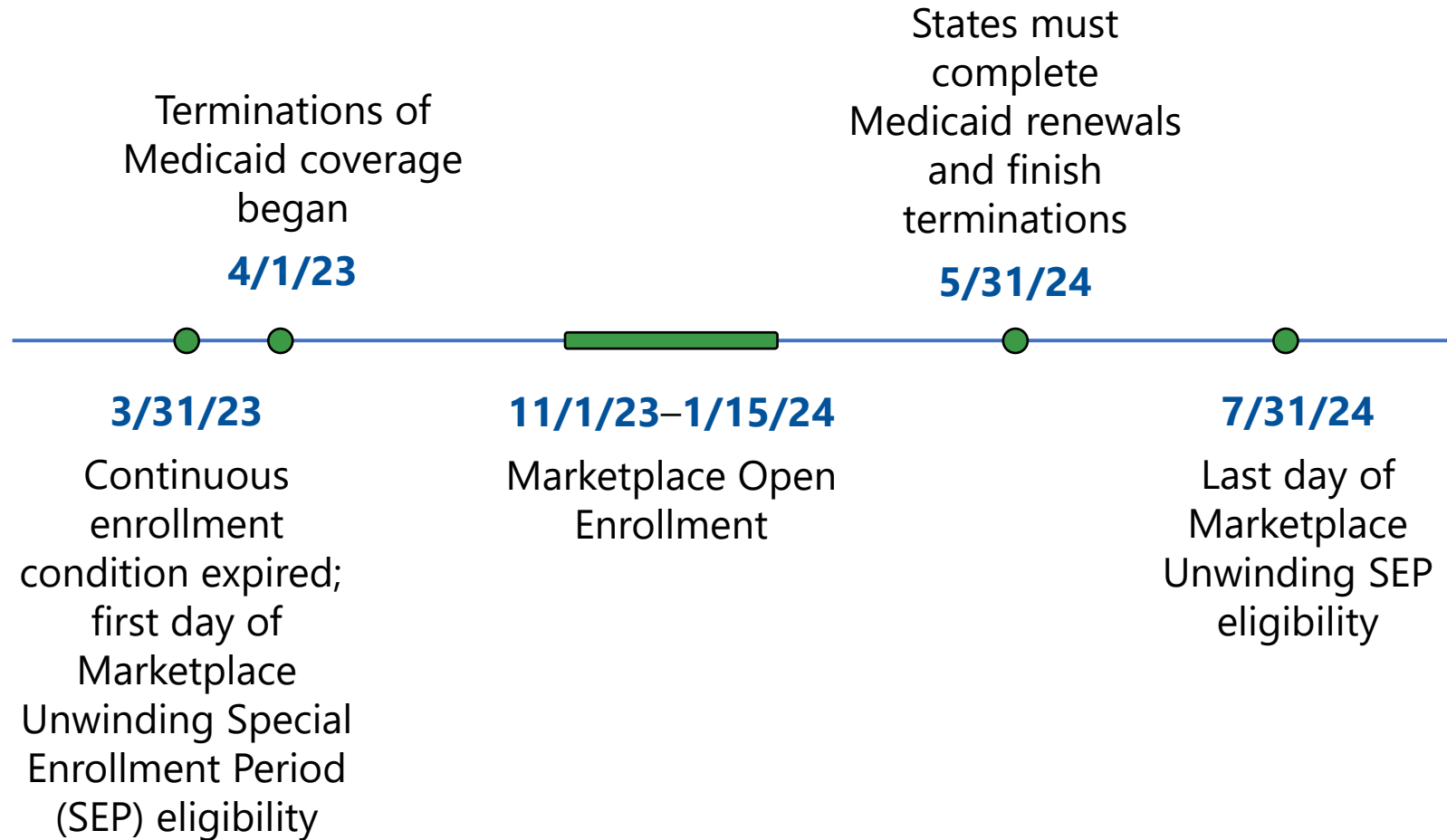


# Session Objectives

- » Check in with agents and brokers on the initial weeks of Medicaid to Marketplace transitions.
- » Collaborate on effective practices for engaging with consumers.
- » Discuss any questions agents and brokers may have.



# Transitions of Coverage Timeline



# Medicaid to Marketplace Transitions: CMS Updates

CMS has implemented a multifaceted effort to help facilitate continuity of coverage for impacted consumers as they transition from Medicaid to the Marketplace during the unwinding period.

- » In addition to working with states to improve the completeness and accuracy of contact information received in account transfers, CMS:
  - Updated verification logic to minimize the amount of required additional paper documentation after application submission; and
  - Updated and streamlined notices and emails for account transfers and eligibility results.
- » The Marketplace is leveraging a multi-pronged approach to reach consumers who lose Medicaid or Children's Health Insurance Program (CHIP) coverage through a variety of communications and encouraging them to sign up for a health plan through the Marketplace. These communications include Marketplace Enhanced Outreach, new reminder letters, and additional phone and email outreach.
- » CMS is also partnering with states, consumer advocates, health plans, Navigators and assisters, agents and brokers, departments of insurance, and many others as part of a robust stakeholder engagement strategy that leverages the reach and impact of national, state, and local partners in our collective efforts to ensure individuals remain connected to coverage.

# Unwinding SEP

To ensure continuity of coverage, consumers should complete a Marketplace application as soon as they receive a determination of ineligibility from their state Medicaid agency.

» To receive the SEP, consumers must:

1. Submit a new application or update an existing application between March 31, 2023, and July 31, 2024 and answer "Yes" to the application question asking if their Medicaid coverage recently ended or will soon end; and
2. Attest to a Medicaid coverage loss between March 31, 2023, and July 31, 2024. Consumers will then have **60 days** from the day they submit their application to select a new plan for Marketplace coverage.

# Coverage Transition Scenario 1

- » Jocelyn has been enrolled in Medicaid since 2021. In March 2022, Jocelyn was promoted and now earns \$38,600 (approximately \$3,208 per month).
- » In June 2023, Jocelyn starts receiving notices from both the Marketplace and her state Medicaid agency.
- » She is not sure how to proceed but finds your contact information when searching for help online.

**How should you best assist Jocelyn?**





## Coverage Transition Scenario 1 Answer

- » Jocelyn has been enrolled in Medicaid since 2021. In March 2022, Jocelyn was promoted and now earns \$38,600 (approximately \$3,208 per month).
- » In June 2023, Jocelyn starts receiving notices from both the Marketplace and her state Medicaid agency.
- » She is not sure how to proceed but finds your contact information when searching for help online.

**How should you best assist Jocelyn?**



- » **You should ask Jocelyn to locate the letter from her state Medicaid agency to confirm she has lost Medicaid coverage and when. You should then assist her with submitting a Marketplace application to assess eligibility.**
- » **When filling out the application question on Medicaid denial, encourage Jocelyn to attest that she lost Medicaid coverage recently and enter the date included on the letter from her state Medicaid agency.**

## Coverage Transition Scenario 2

- » William has been enrolled in Medicaid coverage since 2020.
- » In August 2023, William is attempting to fill a prescription when he discovers his Medicaid coverage has been terminated. William has not had a change in income or living situation since he was originally determined eligible for Medicaid.
- » William comes to you to request enrollment assistance for a Marketplace application.

**How should you best assist William?**



## Coverage Transition Scenario 2 Answer

- » William has been enrolled in Medicaid coverage since 2020.
- » In August 2023, William is attempting to fill a prescription when he discovers his Medicaid coverage has been terminated. William has not had a change in income or living situation since he was originally determined eligible for Medicaid.
- » William comes to you to request enrollment assistance for a Marketplace application.

**How should you best assist William?**



- » **You should ask William to locate the letter from his state Medicaid agency to confirm he has lost Medicaid coverage and when. You should then help him submit a Marketplace application to assess eligibility.**
- » **If William lost Medicaid for procedural reasons, when filling out the application question on Medicaid denial, you should encourage William to attest that he did not lose Medicaid due to a recent change in eligibility.**
- » **If the Marketplace assesses that William may be eligible for Medicaid, you should encourage William to contact his state Medicaid agency.**

## Coverage Transition Scenario 3

- » Kathy recently lost Medicaid coverage and is requesting your assistance with enrolling in Marketplace coverage. Kathy's son, however, has still been able to use his Medicaid coverage.
- » Kathy's household received several notices from the Marketplace and their state Medicaid agency.
- » Kathy is unsure if she needs to enroll in a Marketplace plan with her son or if he can remain on Medicaid.

**How can you best assist Kathy?**



## Coverage Transition Scenario 3 Answer

- » Kathy recently lost Medicaid coverage and is requesting your assistance with enrolling in Marketplace coverage. Kathy's son, however, has still been able to use his Medicaid coverage.
- » Kathy's household received several notices from the Marketplace and their state Medicaid agency.
- » Kathy is unsure if she needs to enroll in a Marketplace plan with her son or if he can remain on Medicaid.

**How can you best assist Kathy?**



- » **You should ask Kathy to locate the letters from their state Medicaid agency to confirm the status of their Medicaid coverage.**
- » **If Kathy's son has not lost Medicaid coverage, you should either assist Kathy in applying for an individual Marketplace plan, or a Marketplace family plan.**
- » **Note: Kathy and her son would not be eligible for financial assistance for a Marketplace family plan.**

## Coverage Transition Scenario 4

- » Omar has recently lost Medicaid coverage and has requested assistance through Help On Demand.
- » Omar has a heightened awareness of potential scams and would like to be sure you are legitimate and can be trusted with his information.

**How can you best assist Omar?**



## Coverage Transition Scenario 4 Answer

- » Omar has recently lost Medicaid coverage and has requested assistance through Help On Demand.
- » Omar has a heightened awareness of potential scams and would like to be sure you are legitimate and can be trusted with his information.

**How can you best assist Omar?**



- » **You can assist Omar by directing him to Find Local Help to verify your status as a registered agent or broker.**
- » **You can also direct him to your state's Department of Insurance to verify your insurance license, or to the Registration Completion List on HealthCare.gov to verify your National Producer Number (NPN).**
- » **Finally, if you are affiliated with an insurance company, Omar can call the insurance company to verify your affiliation.**



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# Appendix A

*What is the Unwinding Period?*





# What is the Unwinding Period?

- » To keep people in coverage during the COVID-19 Public Health Emergency (PHE), under what is known as the “continuous enrollment condition,” the federal government offered additional funding to states that paused terminations for most Medicaid (and in some cases, CHIP) beneficiaries beginning in March 2020.
- » Per a recent law, the continuous enrollment condition ended on March 31, 2023. Thus, states are required to resume regular eligibility and enrollment operations, including renewals and coverage terminations. This process is referred to as “the unwinding period.”
- » States can begin terminating Medicaid enrollment for individuals no longer eligible, effective as early as April 1, 2023.



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# Appendix B

*Application Questions*



# Application Questions (1/3)

## How should a consumer answer the Medicaid or CHIP coverage questions on the Marketplace application?

- » The application will first ask applicants if they had Medicaid or CHIP coverage that recently ended or will soon end:
  - Applicants should answer "Yes" if their Medicaid or CHIP coverage is ending due to unwinding or due to any other reason.
  - Consumers who did not already have Medicaid or CHIP and were denied upon application should respond "no" to this question.
- » If anyone answers "Yes," they will be asked to input the last day of coverage:
  - Consumers should input their last date of Medicaid or CHIP coverage as listed in their termination letter from their state agency.
  - Consumers unsure of their last day of coverage should provide their best estimate.

**HealthCare.gov**

← Back | 1 Set up – 2 **Household** – 3 Coverage & changes – 4 Review & submit

### Medicaid or CHIP coverage ending

Did Alex have North Carolina Medicaid or North Carolina Health Choice (NCHC) (CHIP) that recently ended or will end soon because they're no longer eligible?

☒ Yes

☐ No

**Enter the last day of Alex's coverage.**  
If you don't have it, give your best estimate.  
For example: 2 / 1 / 2022

Month      Day      Year

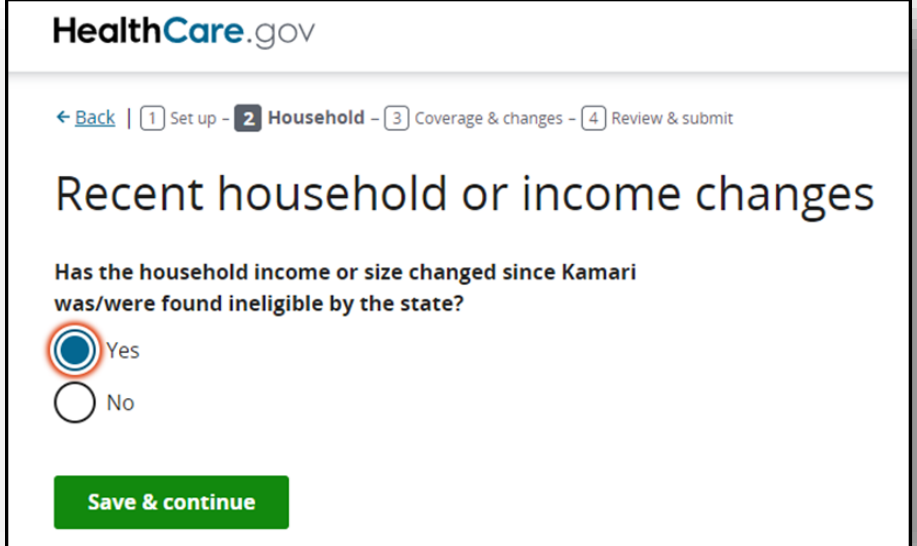
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**Save & continue**

## Application Questions (2/3)

If an applicant has lost Medicaid or CHIP coverage, the application will ask if the applicant's household income or size has changed since they received their coverage termination notice.

- » The application uses this information to evaluate whether the applicant should be sent back to the state Medicaid agency for a redetermination of Medicaid or CHIP eligibility, or if the applicant should instead only be evaluated for Marketplace coverage eligibility, including advance payments of the premium tax credit (APTC).



HealthCare.gov

[← Back](#) | **1** Set up - **2** Household - **3** Coverage & changes - **4** Review & submit

### Recent household or income changes

Has the household income or size changed since Kamari was/were found ineligible by the state?

☒ Yes

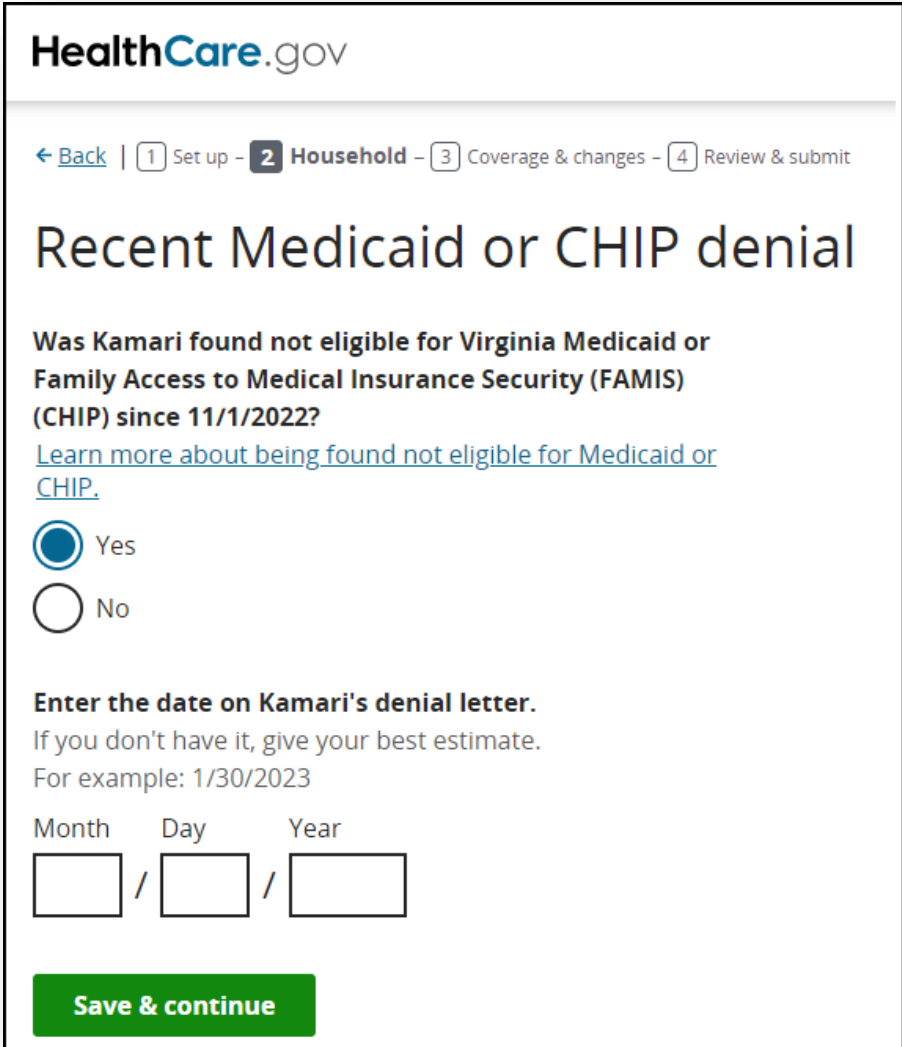
☐ No

**Save & continue**

## Application Questions (3/3)

For consumers who answered "no" to having Medicaid or CHIP coverage that recently ended or will end soon, the application will ask if they recently applied for **and were denied Medicaid or CHIP coverage**.

- » Consumers who **were told in the preceding 90 days by the state that they don't qualify for Medicaid or CHIP coverage** should answer "Yes" to this question.



HealthCare.gov

← Back | 1 Set up – **2 Household** – 3 Coverage & changes – 4 Review & submit

### Recent Medicaid or CHIP denial

Was Kamari found not eligible for Virginia Medicaid or Family Access to Medical Insurance Security (FAMIS) (CHIP) since 11/1/2022?

[Learn more about being found not eligible for Medicaid or CHIP.](#)

☒ Yes  
☐ No

Enter the date on Kamari's denial letter.  
If you don't have it, give your best estimate.  
For example: 1/30/2023

Month    Day    Year

/  /

**Save & continue**



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# Appendix C

*Additional Resources*



## Additional Resources

- » **Medicaid.gov webpage for resources on renewing Medicaid or CHIP coverage**  
(<https://www.medicaid.gov/resources-for-states/coronavirus-disease-2019-covid-19/unwinding-and-returning-regular-operations-after-covid-19/renew-your-medicaid-or-chip-coverage/index.html>)
- » **Informational bulletin regarding key dates during the unwinding period from the Center for Medicaid and CHIP Services regarding from January 5, 2023** (<https://www.medicaid.gov/federal-policy-guidance/downloads/cib010523.pdf>)
- » **Frequently Asked Questions regarding the Unwinding Special Enrollment Period published January 27, 2023**  
<https://www.cms.gov/technical-assistance-resources/temp-sep-unwinding-faq.pdf>
- » **Anticipated State Unwinding Timelines** <https://www.medicaid.gov/resources-for-states/downloads/ant-2023-time-init-unwin-reltd-ren-02242023.pdf>
- » **Frequently Asked Questions regarding the Medicaid Continuous Enrollment Condition Unwinding Marketplace published May 16, 2023** <https://www.cms.gov/files/document/faqs-marketplace-unwinding.pdf>

# Agent and Broker Resources

- Agent and Broker General Resources: [https://regtap.cms.gov/reg\\_librarye.php?i=4182](https://regtap.cms.gov/reg_librarye.php?i=4182)
- Agent and Broker Help Desk Information: <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/Agent-Broker-Help-Desks.pdf>
- Agent and Broker FAQs: <https://www.agentbrokerfaq.cms.gov/s/>





Agents and brokers are valued partners to all of us at CMS for the vital role you play in enrolling consumers in qualified health coverage.

We thank you for the trusted advice, support, and assistance you provide throughout the year and wish you continued success!