

Medi-Cal Redetermination



IPA Co-Branding Here (Optional)

Objectives of this Presentation

Create a shared understanding of the Medi-Cal Redetermination (Renewal) process:

- What it means to you and your patients, our members
- What IEHP can do to assist
 - Communication strategies
 - Renewal support
 - Sharing the Redetermination status through the Provider Portal

Overview

Annual Eligibility Redetermination Background

March 2020

Medi-Cal requirements waived

CMS temporarily waived certain Medi-Cal requirements and conditions in response to COVID-19.

Easing of these rules helped people keep their health coverage.

March 31, 2023

Continuous coverage requirement ends

California must conduct a full eligibility review annually for all Medi-Cal beneficiaries.

) July 1, 2023

Disenrollment of coverage resumes

A member will be discontinued/disenrolled from Medi-Cal if they don't complete the renewal process or if they are no longer eligible to Medi-Cal.

Consolidated Appropriations Act of 2023

Delinked the continuous coverage requirement from the Public Health Emergency (PHE).

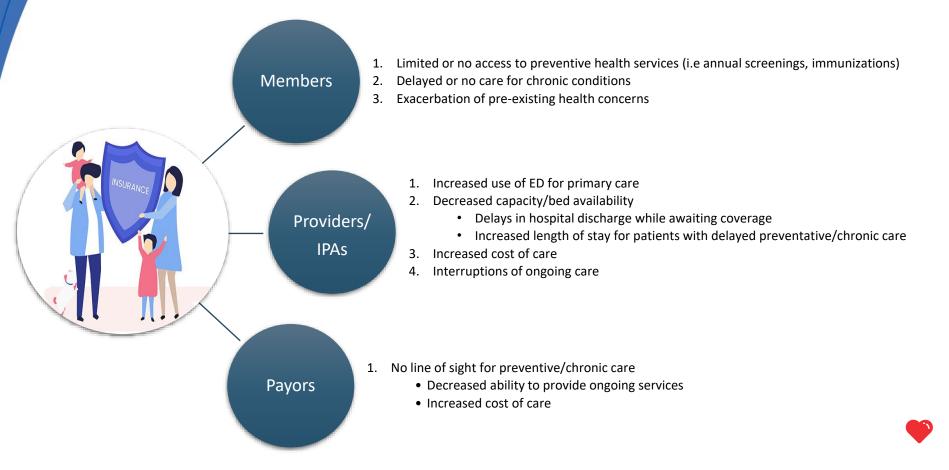
December 29, 2022

Unwinding of this continuous coverage requirement begins

The first batch of beneficiaries with a June 2023 renewal date will receive notifications from Counties starting in April.



Potential Impact



Awareness Strategic Approach and Tactics

Medi-Cal Redetermination Process

o Annually, your Medi-Cal patients must renew their eligibility

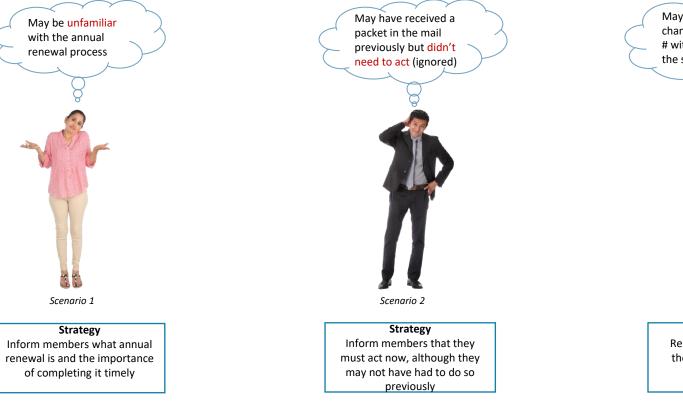
- The date patients must renew usually aligns with the month of their initial Medi-Cal application. For example, if they applied April 20, 2023, a patient will be required to renew April 2024. This allows for the Counties to take a *staggered* approach versus all patients renewing at the same time.
- Counties attempt to auto renew patients before reaching out to the patient directly.
- Once the County has determined a patient can't be auto-renewed, a packet is mailed and the patient has until the end of their renewal month to provide the required information.

Medi-Cal Redetermination Process (cont'd)

- Patients who are disenrolled from Medi-Cal as a result of not providing required information, are given 90 days to submit their information without needing to reapply for Medi-Cal. This is referred to as the 90-day Cure Period.
- If a disenrolled patient provides the necessary information during the 90-day cure period and continues to be eligible for Medi-Cal, the patient's eligibility can be reinstated back to the date of disenrollment.
- If the person waits until after the 90-day cure period, this is treated as a new application which could take up to 45 days to process and potentially delay access to care.



Member Behavioral Considerations



May have relocated or changed their phone # without informing the state or county

Scenario 3

Strategy Remind members to keep their contact information up-to-date

Strategy resources found HERE

Tactics Providers/IPAs Can Use For Awareness

For Members

Texting campaign

Social media campaign

Website messaging

Member Portal/App messaging

Member Services: on hold messaging

Member/Patient Newsletter

Videos with steps for Redetermination (i.e Youtube)

For the General Public

Provider/Staff communication

Press releases

Op-ed pieces

Speaking engagements, presentations or trainings

Templates can be found at: <u>Medi-Cal Continuous Coverage Unwinding Toolkit</u>

Messaging Tips to Support Members/Patients

1.

- Provide direct call to action
- a. "Don't Lose Your Medi-Cal"
- b. "Now is the Time"
- c. "Countdown to Important Date"
- d. For Renewal support, call IEHP at 1-888-860-1296, Monday-Friday, 8am-5pm



Simplify the process

a. Highlight key steps

- •Be specific with where to call or go online
- b. Note special details
 - •Example of renewal document
 - •Renewal forms "in a yellow envelope"
 - Provide contact information for assistance in completing forms





Direct Renewal Support Strategic Approach and Tactics

How can you Support Members/Patients?



Advise Members to keep their contact information current Advise Members to complete the Annual Eligibility Redetermination (AER) process

2

Direct Members to call 1-888-860-1296 Monday-Friday at 8am-5pm

2



Provide flyers to Members/patients

IEHP Eligibility Renewal Support Team

1.

Assist members in completing the renewal application

- Inbound/outbound calls
 - 1-888-860-1296, Monday-Friday, 8am-5pm
- Application print outs
- Online submission via BenefitsCal.com
- Connect with the county



Serve as a centralized eligibility hub for all eligibility- related issues

• On hold, disenrolled, out of area, etc.



Help members update contact info

• National change of address (NCOA), undeliverable mail, etc.



Recommendations for Providers/IPAs

Review workflows with your front office team to highlight patients with upcoming Redetermination dates.

- Provide flyers to patients who have not yet submitted their documents
- PCPs and IPAs should review their assigned Member Annual Eligibility Renewal rosters and create an outreach plan according to their capacity.



How to Check the Renewal Status

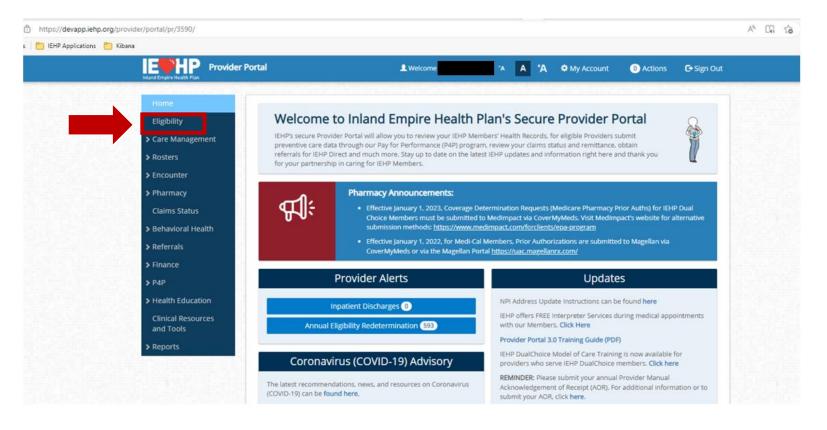
How to Check the Renewal Status

Step 1: Log in to the IEHP Provider Portal

and Empire Hoalth Plan			
	Secure Provid	ler Web Portal	
	Login ID		
	Password		
	Log In		
	Don't have an account? Register	Forgot your password? Reset Password	
	For Questions, Comments, or Passwor Relations Team at (909) 890-2054 or E		
	Resc	urces	
	Medi-Cal Formulary	Urgent Care Search	
	Medicare Formulary	Doctor Search	
	Medi-Cal PA Drug Criteria Summary Table	Hospital Search Clinical Practice Guidelines	
	Medicare PA Drug Criteria Summary Table	Clinical Practice Guidelines	

How to Check the Renewal Status

Step 2: Select "Eligibility" from the side bar of the Home page



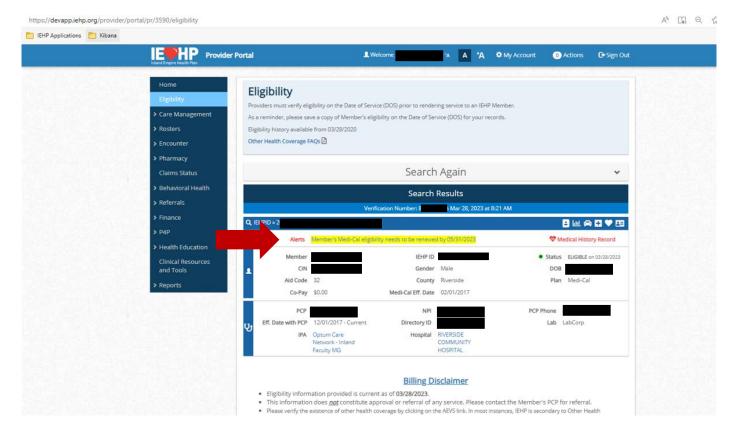
How to Check the Renewal Status

Step 3: Enter the member identifier from the Eligibility search page

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 Eligibility information provided is current as of 04/10/2023. This information does not constitute approval or referral of any service. Please contact the Member's PCP for referral. Please verify the existence of other health coverage by clicking on the AEVS link. In most instances, IEHP is secondary to Other Health Coverage (OHC), including Medicare. The claim must first be billed to the OHC. When billing IEHP as the secondary to OHC explanation of benefits or claim denial notice must be included. EDI submitters can include the primary payment information in the 	Clinical Resources	coverage, plu	lease click on the AEVS link.	×	SN, CIN, IEHP ID OS MM/DD/	or Last Name		y other health
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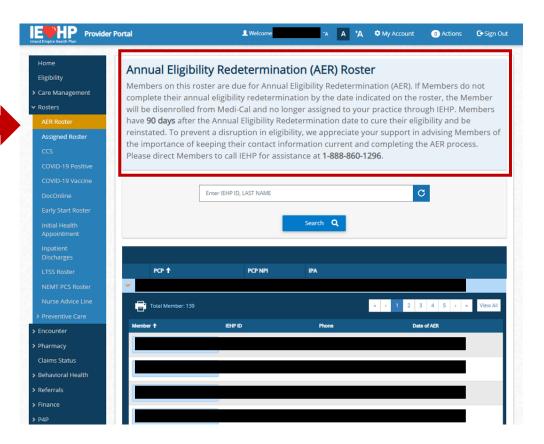
How to check the Renewal Status

Step 4: Review the member's renewal date next to the "Alerts" section



Roster Available for PCPs/IPAs

The message above the AER Roster will tell you what to do next.



IEHP Contacts

Eligibility Team

- Phone: 1-888-860-1296
- Hours: Monday-Friday at 8am-5pm
- DGECSLEADS@IEHP.ORG

Provider Services

- Phone: 909-890-2054 or 1-866-223-4347
- <u>ProviderServices@iehp.org</u>





Appendix

How to Gain Access to the IEHP Provider Portal

- 1. Reach out to the site owner in your organization to add you as a "Sub User."
 - Site owner will add a sub user under "My Account" settings.
 - If you do not know who your site owner is, please reach out to <u>ProviderServices@iehp.org</u>
- 2. Once you are added as a Sub User for your organization, you will be able to log in to the IEHP Provider Portal.

Accessing the Provider Portal

E

Website: https://providers.iehp.org/

- 1. Use your Login ID and Password, and click "Log In."
- 2. Once logged in, you will be taken to the home page.

Provider Portal			
	Secure Provi	der Web Portal	
	Login ID I Password Login Cont have an account? Register For Questions, comments, or Passwo Relations Team 4 (009) 800-0264 or E	Forgot your password? Reset Password Information, Call IEHP's Provider Mail us at ProviderService@iehp.org.	
	Reso	ources	
	Medi-Cal Formulary	Urgent Care Search	
	Medicare Formulary	Doctor Search	
	 Medi-Cal PA Drug Criteria Summary Table Medicare PA Drug Criteria Summary Table 	Hospital Search Clinical Practice Guidelines	

Accessing the Provider Portal (cont'd)

https://d

3. Reports also Accessible via Provider Portal

- Member Eligibility
- Care Management (Care Plans, and HRAs)
- Rosters (Direct Ancillary, Direct Specialty, NEMT PCS Roster)
- Claims Status
- Referrals (Status/Request)
- Finance (Claims RAs, Hospital P4P RAs, Prop 56 RAs)
- Clinical Resources and Tools
- 4. For any additional questions, please contact: ProviderServices@iehp.org

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Appointment Inpatient	PCP +	PCP NPI	IPA			
Appointment Inpatient Discharges	PCP +	PCP NPI		ork - Inland Faculty MG (00F		

Member Flyer Templates

Keep yourself and your family covered.



Medi-Cal covers vital health care services for you and your family, including doctor visits, prescriptions, vaccinations, mental health care, and more. So, if you have Medi-Cal, make sure you renew it when it's time.

Update your contact information

Report any new changes to your name, address, phone number, and email address, so your county can contact you.

Check your mall

Counties will mail you a letter about your Medi-Cal eligibility. You may need to complete a renewal form. If you're sent a renewal form, submit your information by mail, phone, in person, or online, so you don't lose your coverage.

Create or check your online account

You can sign up to receive alerts on your case. Create or log into your account to get these alerts. You may submit renewals or requested information online.

Complete your renewal form (If you get one)

If you received a renewal form, submit your information by mail, phone, in person, or online to help avoid a gap in your coverage.

For more details and to learn how to update your contact information, visit KeepMediCalCoverage.org



URGENT: RENEW IT OR LOSE IT!

Don't lose out on Medi-Cal.

Pick one way to renew your Medi-Cal coverage

Online: Visit www.BenefitsCal.com and choose the "Create an Account" link.

By Mail: Send the completed packet back to your county.

In Person: Visit your county Medi-Cal office in person.

By Phone: Call your local county Medi-Cal office:

- <u>Riverside County</u>: 1-877-410-8827, Monday-Friday, 8am-5pm.
- <u>San Bernardino County</u>: 1-877-410-8829, Monday-Friday, 7am-5pm.

Need help filling out the forms?

Call IEHP's Eligibility team at **1-888-860-1296**, Monday-Friday, 8am-5pm.

Your county will mail you a letter telling you if your Medi-Cal was renewed already. If not, you'll need to complete the packet and return it right away to your county Medi-Cal office.

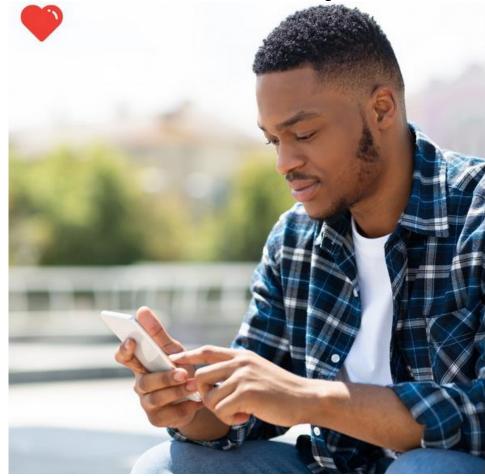
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*Flyers available in English, Spanish, Vietnamese and Chinese.

Social Media Example



ie



iehp_healthcare

iehp_healthcare Have you moved or changed your phone number recently?

It's important to provide your updated information to continue receiving Medi-Cal coverage information, such as renewal packets, benefit change notices or other important reminders.

You can easily update your information by creating an account at BenefitsCal.com.

#RiversideCounty #SanBernardinoCounty #MediCAL

View insights

O O A

Boost post

Eliked by lisa_michelle1031 and 9 others

NOVEM BER 20, 2022





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Thank You.

IE HP Inland Empire Health Plan Live Wholeheartedly.