



# Understanding the End of the Public Health Emergency and Its Impact on Medicaid Insurance Renewals in New York State

1115 Waiver Webinar Series:  
May 17, 2023

# Logistics

- Please send your questions in by using the Q&A box in Zoom



## ABOUT US

# Our Mission

To advance the growth and quality of cost effective and inclusive individual services for children and adults through innovation, collaboration and coordination.

# Our Purpose

Prepare members for Managed Care and the transition to value-based payment (VBP)

Independent Practice Association (IPA)  
of community-based organizations of  
varying sizes and scopes of services.

**2016**

Year Founded

**501c3**

Not-for-profit

**36**

Members  
(& Growing!)

# Meet Our Inclusive Alliance Members



# Overview of New York's 1115 NYHER Waiver Amendment

New York is requesting \$13.52B over five years to fund an 1115 Waiver Amendment.

The Amendment includes one goal and four main strategies:

**Goal:** Reduce health disparities, advance health equity, and support the delivery of social care

**Strategy #1**

Building a More Resilient, Flexible and Integrated Delivery System that Reduces Health Disparities, Promotes Health Equity, and Supports the Delivery of Social Care

**Strategy #2**

Developing and Strengthening Transitional Housing Services and Alternatives for the Homeless and Long-Term Institutional Populations

**Strategy #3**

Redesign and Strengthen System Capabilities to Improve Quality, Advance Health Equity, and Address Workforce Shortages

**Strategy #4**

Creating Statewide Digital Health and Telehealth Infrastructure

# Initiatives in the Waiver Amendment

## **Goal #1: Building a more resilient, flexible and integrated delivery system that reduces health disparities, promotes health equity, and supports the delivery of social care**

Health Equity Regional Organizations (HEROs)

Social Determinant of Health Networks (SDHNs) Development and Performance

Advanced Value Based Payment (VBP) Models that Fund the Coordination and Delivery of Social Care via an Equitable, Integrated Health and Social Care Delivery System

Ensuring Access for Criminal Justice-Involved Populations

## **Goal #2: Developing and strengthening supportive housing services and alternatives for the homeless and long-term institutional populations**

Investing in Supportive Housing Services and Alternatives for the Homeless and Long-Term Institutional Populations

## **Goal #3: Redesign and strengthen system capabilities to improve quality, advance health equity, and address workforce shortages**

COVID-19 Unwind Quality Restoration Pool for Financially Distressed Hospitals and Nursing Homes

Developing a Strong, Representative, and Well-Trained Workforce

## **Goal #4: Creating statewide digital health and telehealth infrastructure**

# HRSNs Funded by Other State Medicaid Waivers

State	Housing Supports	Air Quality	Food	Transportation	Medical Respite	Care Coordination	Interpersonal Violence/Toxic Stress	Linkage to Legal Support
Arkansas	X		X					
Arizona	X					X		
California	X		X		X	X		
Massachusetts	X	X	X			X		
North Carolina	X		X	X	X	X	X	X
Oregon	X	X	X	X		X		

Source: [Commonwealth Fund](#)

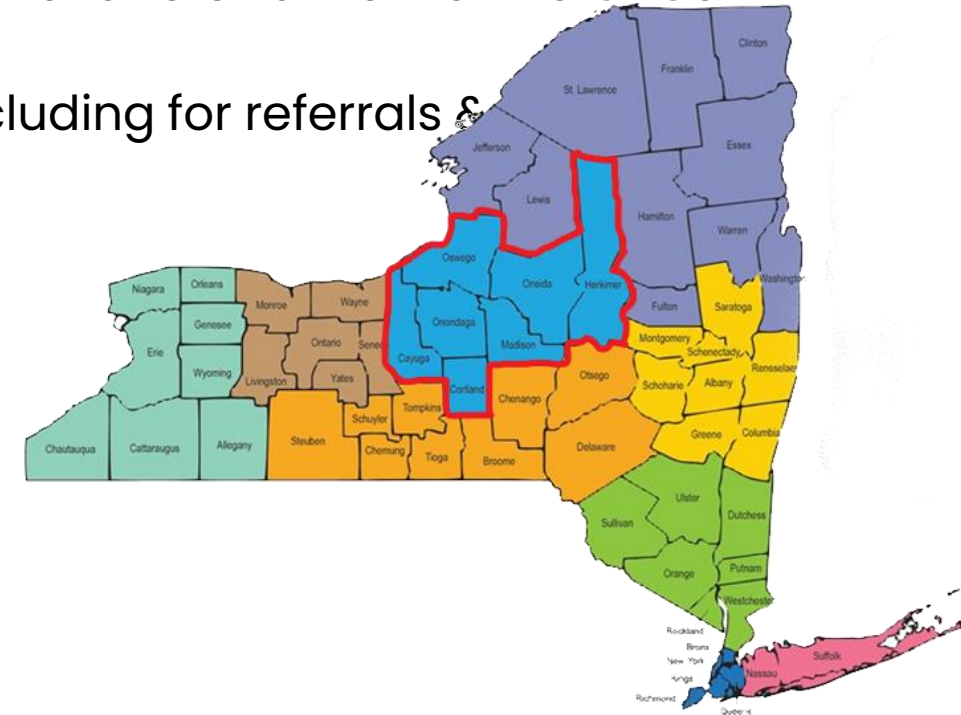
# 1115 NYHER Waiver Amendment Updates

- New York's 1115 NYHER Waiver Amendment Request is still pending approval by CMS (further delays & changes are expected)
- Despite other changes, the focus on CBO networks organized to deliver new, Medicaid-reimbursable health-related social need (HRSN) services & on improving health equity remains consistent
- Disruptions in Medicaid coverage will impact the roll-out of new, Medicaid-reimbursable HRSN services & can worsen health equity



## Inclusive Alliance's Qualifications to lead a Social Care Network

- Non-profit IPA structure for contracting, with representation in all HERO Region 7 counties and all SDOH categories (food, housing, transportation, employment, etc.)
- Experience participating in a referral platform (Unite Us) & communicating the benefits of being part of a referral network to CBOs
- Data warehouse & experience assessing CBO data capacity & IT security, including for referrals &
- Local CBO-lead, representative governance structure
- Collaborative approach with community partners
- Central administrative hub for contracting & payment evidence-based interventions delivered by CBOs
  - Pathways Community HUB
  - National Diabetes Prevention Program



# Next Month!

Inclusive Alliance's Next Monthly Informational Webinar:

- Wednesday, June 21<sup>st</sup> from 12pm to 1pm

# Stay Involved & Get in Touch!

Tania Anderson, President & Board Chair

∞ [Tania.Anderson@ariseinc.org](mailto:Tania.Anderson@ariseinc.org)

∞ 315-671-5111

Nicole Hall, Network Development Manager

∞ [Nicole.Hall@inclusivealliance.org](mailto:Nicole.Hall@inclusivealliance.org)

∞ 315-971-0398

Michael Rock, Network Development Manager

∞ [Michael.Rock@inclusivealliance.org](mailto:Michael.Rock@inclusivealliance.org)

∞ 315-887-8233

Lauren Wetterhahn, Executive Director

∞ [Lauren.Wetterhahn@inclusivealliance.org](mailto:Lauren.Wetterhahn@inclusivealliance.org)

∞ 315-899-1043



∞ [Sign up](#) for our Network Scoop newsletter

∞ Visit our website: [inclusivealliance.org](http://inclusivealliance.org)

# END OF THE PHE

End of the Public Health  
Emergency and Continuous  
Coverage  
Presented By: Megan Vadala  
and Kaitlin Zimmer



# Agenda



Medicaid Pharmacy Changes



Timeline of Events/Charts



End of Continuous  
Coverage/Contacts

# Pharmacy Changes

- As of April 1st , Medicaid will no longer be billing the primary health plans. They will only be billing Medicaid to cover prescriptions. Most clients will not experience changes in formularies, they may have issues with their current pharmacies.
- CHA (Community Health Advocates) can assist with researching the eMedNY Formulary to check prescription coverage and to verify the pharmacy is in Network.
- There have been reoccurring errors and misinformation spread by pharmacies and their staff. Please reach out to CHA to report any clients with pharmacy issues to be reported back to the state for retraining.
- NYRX Helpline 1-855-648-1909

# Public Health Emergency

- In March of 2020, Public Health Emergency was declared and the Families First Coronavirus Response Act was implemented. This act automatically extended Medicaid, Child Health Plus, and the Essential Plan for additional 12-month terms.
- Most enrollees have not had to renew their coverage at all during this time because of the extensions. This act also paused requirements for proof of income, citizenships/immigration, changes in mailing address, or transitions to Medicare that allowed clients to keep their coverage without lapse or penalty of nonpayment due to the PHE.
- As of December 29<sup>th</sup> 2022, The Federal Consolidated Appropriations Act was enacted to de-link the continuous coverage requirement from the PHE. This means that over 9 million people in New York will now have to update their applications to continue their healthcare coverage.

# LDSS v. NYSOH

## Medicaid Eligibility Categories


### MAGI

- Children under 19
- Childless Adults ages 19 to 64 without Medicare
- Pregnant Women
- Parents/Caretaker Relatives (even with Medicare and/or over 65)

### Non-MAGI

- 65+
- Disability
- Supplemental Security Income (SSI) recipients
- Spend down, MBI-WPD, MSP
- Cancer Programs, Former Foster Care
- Residents in LDSS-run adult homes, OMH-run residential settings

## MAGI vs. Non-MAGI Medicaid

	MAGI	Non-MAGI
Application Point	Marketplace  The Official Health Plan Marketplace	LDSS/HRA (if SSI – auto enrolled)
Coverage Period	1-year lock in regardless of income change	1-year, but change in income affects ongoing eligibility for adults

\*MAGI = Modified Adjusted Gross Income from tax return



## Annual Federal Poverty Levels for 2023 Enrollments

Family Size	2023 FPLs								2022 FPLs			
	Medicaid			EP 3 (<100% FPL=EP 4) for Aliessa Immigrants			EP 2 \$0 premium, no copays	EP 1 \$0 premium, with copays	QHP: APTCs CSR			Premiums Costing No More Than 8.5% of HH Income
	100%	133%	138%	100%	133%	138%	150%	200%	250%	300%	400%	>400%
1	\$14,580	\$19,392	\$20,121	\$14,580	\$19,392	\$20,121	\$21,870	\$29,160	\$36,450	\$43,740	\$58,320	Households may receive APTCs to ensure that they pay no more than 8.5% of household income for QHPs purchased through NYSOH.  This change is effective through 2025.
2	\$19,720	\$26,228	\$27,214	\$19,720	\$26,228	\$27,214	\$29,580	\$39,440	\$49,300	\$59,160	\$78,880	
3	\$24,860	\$33,064	\$34,307	\$24,860	\$33,064	\$34,307	\$37,290	\$49,720	\$62,150	\$74,580	\$99,440	
4	\$30,000	\$39,900	\$41,400	\$30,000	\$39,900	\$41,400	\$45,000	\$60,000	\$75,000	\$90,000	\$120,000	
5	\$35,140	\$46,737	\$48,494	\$35,140	\$46,737	\$48,494	\$52,710	\$70,280	\$87,850	\$105,420	\$140,560	
6	\$40,280	\$53,573	\$55,587	\$40,280	\$53,573	\$55,587	\$60,420	\$80,560	\$100,700	\$120,840	\$161,120	
7	\$45,420	\$60,409	\$62,680	\$45,420	\$60,409	\$62,680	\$68,130	\$90,840	\$113,550	\$136,260	\$181,680	
8	\$50,560	\$67,245	\$69,773	\$50,560	\$67,245	\$69,773	\$75,840	\$101,120	\$126,400	\$151,680	\$202,240	
For each additional person, add	\$4,720	\$6,837	\$7,094	\$4,720	\$6,837	\$7,094	\$7,710	\$10,280	\$12,850	\$15,420	\$20,560	

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	100%	133%	138%	100%	133%	138%	150%	200%	250%	300%	400%	>400%
1	\$1,215	\$1,616	\$1,677	\$1,215	\$1,616	\$1,677	\$1,823	\$2,430	\$3,038	\$3,645	\$4,860	Households may receive APTCs to ensure that they pay no more than 8.5% of household income for QHPs purchased through NYSOH.  This change is effective through 2025.
2	\$1,644	\$2,186	\$2,268	\$1,644	\$2,186	\$2,268	\$2,465	\$3,287	\$4,109	\$4,930	\$6,574	
3	\$2,072	\$2,756	\$2,859	\$2,072	\$2,756	\$2,859	\$3,108	\$4,144	\$5,180	\$6,215	\$8,287	
4	\$2,500	\$3,325	\$3,450	\$2,500	\$3,325	\$3,450	\$3,750	\$5,000	\$6,250	\$7,500	\$10,000	
5	\$2,929	\$3,895	\$4,042	\$2,929	\$3,895	\$4,042	\$4,393	\$5,857	\$7,321	\$8,785	\$11,714	
6	\$3,357	\$4,465	\$4,633	\$3,357	\$4,465	\$4,633	\$5,035	\$6,714	\$8,392	\$10,070	\$13,427	
7	\$3,785	\$5,035	\$5,224	\$3,785	\$5,035	\$5,224	\$5,678	\$7,570	\$9,463	\$11,355	\$15,140	
8	\$4,214	\$5,604	\$5,815	\$4,214	\$5,604	\$5,815	\$6,320	\$8,427	\$10,534	\$12,640	\$16,854	
For each additional person, add	\$429	\$570	\$592	\$429	\$570	\$592	\$643	\$857	\$984	\$1,285	\$1,714	

This document was created by the Community Service Society for pre-enrollment counseling purposes and should only be used as a reference. QHP affordability programs (APTC and CSR) will use 2022 FPLs until fall 2023. In addition, please remember that Medicaid eligibility levels are different for different age groups: Ages 19-64=138% FPL; 1-18=154%FPL; <1 and pregnant women=223% FPL. A complete guide to the different CHP premium eligibility thresholds is available at: [https://www.health.ny.gov/health\\_care/child\\_health\\_plus/eligibility\\_and\\_cost.htm](https://www.health.ny.gov/health_care/child_health_plus/eligibility_and_cost.htm)

## Annual Federal Poverty Levels for 2023 Enrollments, Children

Age	2023 FPLs								
<1	Medicaid or \$0 CHP				\$15 CHP	\$30 CHP	\$45 CHP	\$60 CHP	Full Premium CHP
1-18	Medicaid or \$0 CHP	\$0 CHP	\$15 CHP			\$30 CHP	\$45 CHP	\$60 CHP	Full Premium CH
<19, pregnant	Medicaid				\$15 CHP	\$30 CHP	\$45 CHP	\$60 CHP	Full Premium CHP
Family Size	100%	154%	222%	223%	250%	300%	350%	400%	>400%
1	\$14,580	\$22,454	\$32,368	\$32,514	\$36,450	\$43,740	\$51,030	\$58,320	
2	\$19,720	\$30,369	\$43,779	\$43,976	\$49,300	\$59,160	\$69,020	\$78,880	
3	\$24,860	\$38,285	\$55,190	\$55,438	\$62,150	\$74,580	\$87,010	\$99,440	
4	\$30,000	\$46,200	\$66,600	\$66,900	\$75,000	\$90,000	\$105,000	\$120,000	
5	\$35,140	\$54,116	\$78,011	\$78,363	\$87,850	\$105,420	\$122,990	\$140,560	
6	\$40,280	\$62,032	\$89,422	\$89,825	\$100,700	\$120,840	\$140,980	\$161,120	
7	\$45,420	\$69,947	\$100,833	\$101,287	\$113,550	\$136,260	\$158,970	\$181,680	
8	\$50,560	\$77,863	\$112,244	\$112,749	\$126,400	\$151,680	\$176,960	\$202,240	
For each additional person, add	\$4,720	\$7,916	\$11,411	\$10,526	\$12,850	\$15,420	\$17,990	\$20,560	

## Monthly Federal Poverty Levels for 2023 Enrollments, Children

Age	2023 FPLs								
<1	Medicaid or \$0 CHP				\$15 CHP	\$30 CHP	\$45 CHP	\$60 CHP	Full Premium CHP
1-18	Medicaid or \$0 CHP	\$0 CHP	\$15 CHP			\$30 CHP	\$45 CHP	\$60 CHP	Full Premium CHP
<19, pregnant	Medicaid				\$15 CHP	\$30 CHP	\$45 CHP	\$60 CHP	Full Premium CHP
Family Size	100%	154%	222%	223%	250%	300%	350%	400%	>400%
1	\$1,215	\$1,872	\$2,698	\$2,710	\$3,038	\$3,645	\$4,253	\$4,860	
2	\$1,644	\$2,531	\$3,649	\$3,665	\$4,109	\$4,930	\$5,752	\$6,574	
3	\$2,072	\$3,191	\$4,600	\$4,620	\$5,180	\$6,215	\$7,251	\$8,287	
4	\$2,500	\$3,850	\$5,550	\$5,575	\$6,250	\$7,500	\$8,750	\$10,000	
5	\$2,929	\$4,510	\$6,501	\$6,531	\$7,321	\$8,785	\$10,250	\$11,714	
6	\$3,357	\$5,170	\$7,452	\$7,486	\$8,392	\$10,070	\$11,749	\$13,427	
7	\$3,785	\$5,829	\$8,403	\$8,441	\$9,463	\$11,355	\$13,248	\$15,140	
8	\$4,214	\$6,489	\$9,354	\$9,396	\$10,534	\$12,640	\$14,747	\$16,854	
For each additional person, add	\$429	\$660	\$951	\$956	\$1,071	\$1,285	\$1,500	\$1,714	

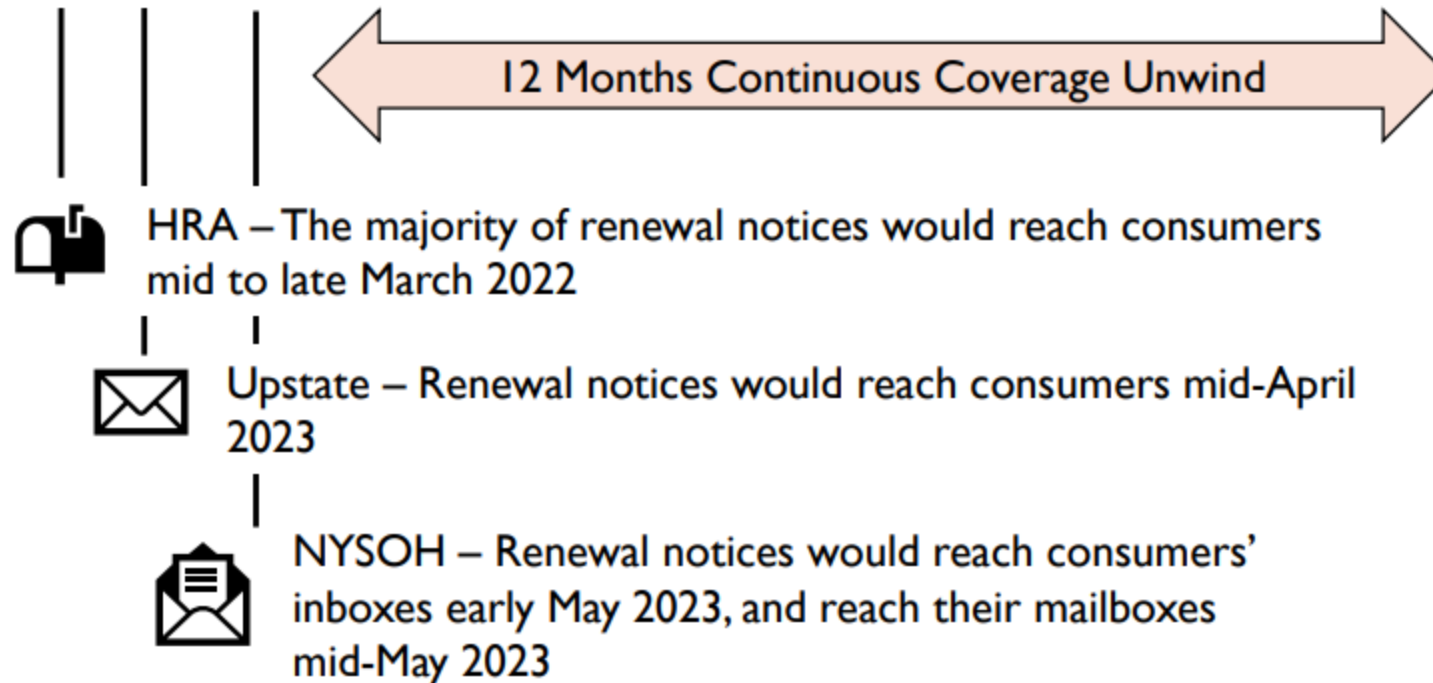
This document was created by the Community Service Society for pre-enrollment counseling purposes and should only be used as a reference. All public health insurance programs offered through NY State of Health will continue to use 2023 FPLs until early 2024. QHP affordability programs (APTC and CSR) will use 2022 FPLs until fall 2023. See:

[https://www.health.ny.gov/health\\_care/child\\_health\\_plus/eligibility\\_and\\_cost.htm](https://www.health.ny.gov/health_care/child_health_plus/eligibility_and_cost.htm)



# Unwind Timeline for Eligibility Consumer Notices

2022			2023												2024					
Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun



### The End of Continuous Coverage Renewal Timeline

First set of notices will go out April and May to kick off the first set of renewals.



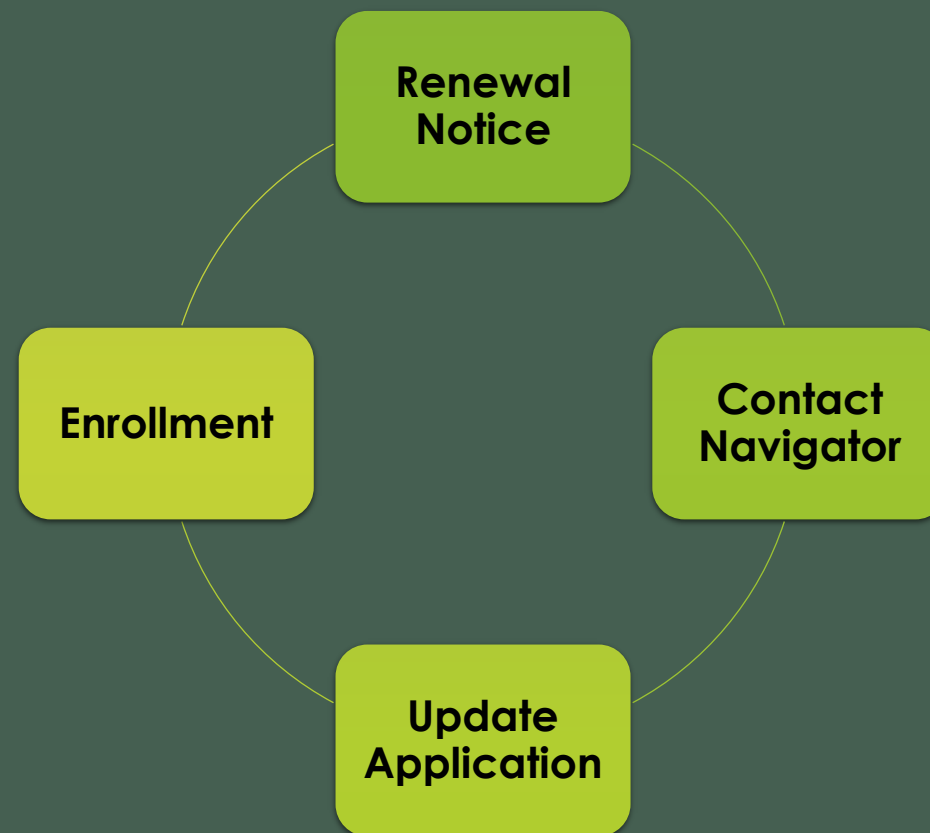
Health Insurance End Date:	Period to Renew:
June 30, 2023	May 16-June 15
July 31, 2023	June 16-July 15
August 31, 2023	July 16- August 15
September 30, 2023	August 16- September 15
October 31, 2023	September 16- October 15
November 30, 2023	October 16-November 15
December 31, 2023 *	November 16- December 15 *
January 31, 2024 *	December 16- January 15 *
February 29, 2024	January 16- February 15
March 31, 2024	February 16- March 15
April 30, 2024	March 16- April 15
May 31, 2024	April 16- May 15


\*Regular Open Enrollment periods for Qualified Health Plans.

IMPORTANCE  
OF THE 15TH  
OF THE  
MONTH RULE



# Renewal Cycle



- 
- COVID will no longer be used as a reason for backdating insurance, waiving proof to get immediate eligibility, etc.
  - Ignoring deadlines for uploading proof documentation will result in loss of coverage.
  - Invalid mailing address will result in loss of coverage.
  - For a lot of consumers, their eligibilities will be changed drastically. There will be a 30-Day Grace period after the 15<sup>th</sup> of the month to update your application if you did not renew in time.
  - Income and other updates that effect eligibility will need to be updated more frequently to reduce the chance of penalties or lapses in coverage.
  - THERE WILL CONTINUE TO BE NO PENALTY FOR BEING IN MEDICAID IF A CONSUMER'S INCOME IS ABOVE THE LIMIT AND ESSENTIAL PLAN WILL CONTINUE TO BE OFFERED AT \$0 FOR THE REMAINDER OF 2023!!!

# CHANGES FROM THE END OF CONTINUOUS COVERAGE

# Continued Changes

- NYSOH has stated that if you are eligible for Essential Plan, even if your income has increased, you will be allowed to remain in your current plan until your next renewal date. (same as Medicaid rules)
- Under the 1902 (e) (14) Waiver individuals who are 65 and older who are already receiving Medicaid through NYSOH will be allowed to continue to receive their Medicaid through NYSOH
- Individuals 65 and older who have never been on NYSOH will need to apply through their LDSS location for Medicaid coverage with Medicare.

# Beware of Scams!



NO ONE WILL EVER CHARGE YOU A FEE TO RENEW YOUR INSURANCE FOR MEDICAID, CHILD HEALTH PLUS, OR THE ESSENTIAL PLAN. THE SERVICES OFFERED BY NAVIGATORS/ASSISTORS/BROKERS WILL ALWAYS BE FREE!



ENROLLING OR RENEWING IN COVERAGE THROUGH YOUR LOCAL DSS WILL ALWAYS BE FREE AS WELL.



GOVERNMENT AGENCIES WILL NEVER THREATEN YOU, DEMAND YOU PAY MONEY, ASK FOR CREDIT INFORMATION, AND WILL NOT ASK FOR YOUR INFORMATION BY TEXT OR PHONE CALL.



WHEN RECEIVING COMMUNICATION ONLINE LOOK FOR THE OFFICIAL NYSOH OR MEDICAID LOGOS ON WEBPAGES OR FORMS BEFORE SUBMITTING PRIVATE HEALTH INFORMATION.



INSURANCE COMPANIES WILL NEVER DEMAND YOU TO COMPLETE A PHYSICAL OR HEALTHCARE SERVICE DIRECTLY THROUGH THE COMPANY. THOSE SERVICES SHOULD BE COMPLETED BY A MEDICAL PROVIDER.



# Reporting Scams



Call the NYSOH Customer Service  
Center Line 1-855-355-5777



Call your County Medicaid Office,  
each county's direct line can be  
located on their webpage.



Contact the Office of the Attorney  
General's Healthcare Helpline 1-800-  
428-9071 or the NY State Department  
of Financial Services Consumer Hotline  
at 1-800-342-3736



# CONTACT US

Information on Our Navigators and CHA

# Navigators By County

## Call ACR Health 315-475-2430

Onondaga County-  
Chris Sanefski x2493,  
Ethan Johnson x2498,  
Isabella Strong x2577,  
Kaitlin Zimmer x2504,  
Megan Vadala x2509

Oneida County –  
Ashley Brown x2524,  
Mary Deveny x2527,  
Melissa Green x2446,  
Marissa Green x2796

Oswego – Ethan  
Johnson x2498, Isabella  
Strong x2577

Herkimer – George  
Deveny x2532, Mary  
Deveny x2527

Madison County –  
Marissa Green x2796,  
Megan Vadala x2509

Jefferson, Lewis, St  
Lawrence – Kristin  
Fleming x2565, Angie  
Rich x2970

# Community Health Advocates (CHA)

## What is CHA?

- Advocacy for client's healthcare rights
- Billing Issues or Appeals
- Prescription Drug Assistance
- Provider Look Up
- Application guidance for Financial Assistance
- Referral sources for other Healthcare Needs

## Advocates

- Kristin Fleming, x2565
- Kaitlin Zimmer, x2504
- Megan Vadala, x2509



Navigators with ACR Health strive to return calls and messages within 48 hours. If you reach out to a Navigator and they do not answer, leave a message.

Questions?

