



# Maryland Easy Enrollment Health Insurance Program Work Group

March 24, 2021

11AM-1PM

Location: Google Meets

## Members Present:

Nancy Brown  
Teresa Healey-Conway  
Betty Crowley  
Wandra Ashley-Williams  
Jeffrey Lawson  
Stan Dorn  
Debora Gorman  
Diana Hsu  
Evan Leiter-Mason  
Kimberly Cammarata  
Ben Turner  
Debbie Harrison  
Meg Murrari

## Others Present:

Vincent DeMarco  
Alyssa Brown  
Debbie Ruppert  
Tanya Schwartz  
Suszanne Schlattman

## MHBE Support Staff

Johanna Fabian-Marks  
Andrew Ratner  
Heather Forsyth  
Michele Eberle  
Elvina Morris  
Jessica Grau

## Agenda:

### 11AM-11:05AM

Stan welcomed the members of the group to the meeting.

### 11:05AM-11:35AM

Johanna provided an update and review of the results of the first year of the program. She noted that the tax filing deadline was extended to July 15<sup>th</sup> of this year, and that the Tax-SEP would be extended to match that. She also provided some background information on the American Rescue Plan Act that would be implemented by April 1<sup>st</sup> of this year. A note was also made of proposed legislation that would create an Easy Enrollment like process between the Maryland Department of Labor and MHBE for unemployment recipients.

An overview of 2020 enrollment rates showed that out of the 60,645 individuals who checked the box, 53,146 were deemed eligible, and 4,015 ended up enrolling, with most individuals (15%) enrolling in Medicaid.

Question Teresa-Do we have information on why people applied but didn't enroll? And do we know who applied and didn't enroll?

Answer-Trying to do a survey to get more information, but don't have a lot of information right now. Mail campaigns can only be so successful. We do have demographic data that we're exploring more on those that applied but didn't enroll.

Diana-Can I trouble you to repeat what the conversation rate was for? From application to enrollment? Or from uninsured to insured?

Answer-total eligible to those who ultimately enrolled.

Stan- It is striking that almost 30% of those receiving coverage during the tax-time SEP were children. Slightly more than 10% of MD's uninsured residents are children. Uninsured children were thus disproportionately benefiting from this intervention, along with people of color.

Question Tanya-Did we work with the county health departments to get the word out? Is this something we want to do moving forward?

Answer-Did not work extensively with county health departments. Will be doing some additional navigator work this year to bring more local assistance.

Suzanne-My colleague Stephanie Klapper may have done some outreach to local health depts. I know she worked on the local level to promote awareness among tax preparers.

Early results from 2021 were also reviewed. As of March 15, 2021 15,925 individuals had "checked the box" and 546 individuals had enrolled.

### **11:35AM-12PM**

Johanna then discussed a high level overview of MHBE's phase 2 vision. Much of the data collected through Maryland Health Connection mirrors the data provided on the state income tax return (e.g., address, household data, income, tax filing status). For individuals who receive the Tax Time SEP, we would pre-populate applications with data from the state income tax return as much as possible to simplify the enrollment process. Individual would input any data not captured through the tax return and update any information that has changed since filing taxes. MHBE is aiming to implement this in early 2022, for 2021 tax filings.

Stan-Is it possible to leverage that we are processing the tax form beforehand to have more customized notices. The more particular notices seem to be more powerful.

Answer-We also got this feedback from the focus groups, so its definitely something we're trying to implement.

## 12PM-12:15PM

Alyssa Brown from Medicaid highlighted the main hurdles related to autoenrollment in coverage, including verification of citizenship status, and income verification. Federal law requires that an individual attest to their citizenship status as part of the citizenship verification process required to enroll in Medicaid and QHPs. State law contemplates that MHBE will attempt to verify citizenship status using only the current data on the state tax form (e.g., Social Security Number, if provided) and reliable third-party sources of citizenship data and prohibits adding to the tax return information pertaining to citizenship or immigration status. If verification is not possible, state law directs MHBE to follow up with the tax filer or uninsured individual. However, as mentioned above, an attestation of citizenship status is required by CMS in all circumstances. In terms of income verification, Federal law requires that Medicaid eligibility be based on current month income, and APTC eligibility on projected annual income. Because the tax form supplies previous year's income, it is not possible to determine current monthly or projected annual income. Further complicating matters, under federal law, Medicaid and APTC eligibility is based on modified adjusted gross income, which is adjusted gross income plus, if any: untaxed foreign income, non-taxable Social Security benefits, and tax-exempt interest. These additional items are not currently collected on the state 502 or 502B forms.

Stan- Shouldn't underestimate procedural barriers to coverage. And we think there are some flexibilities. Will be putting forth legislation to modify these roadblocks.

Meg-You'll be prepopulating the forms with income information from the prior year?  
Answer-Prepopulate from prior year and family composition information. But we will hope they update if they need to. It will be interesting to see who is changing information.

Alyssa- Medicaid's enrollment from the first year is good data to observe. Really just checking to see if they have changes from prior year income. We anticipate that most people will not have to make substantial changes. It's about 58% for reenrollments.

Meg-What flexibility were you asking for CMS?

Answer-Requirement to attest to citizenship, and the requirement to qualify for APTC is based on projected annual income, and not passthrough income, and if we can we use the information on the tax form instead of asking for verification.

Tanya- Will circle back with Medicaid about these regulations. The more data you can collect with the renewals, the better will prove the point that it's not such a big deal.

Debbie Harrison-Perhaps a question for later: Do we have any preliminary data on how stable the new enrollments are (e.g., do they do they tend to get other coverage mid-year or stay on Medicaid/exchange throughout the year)?

Answer-Haven't looked at that for easy enrollment, but definitely something to consider.

#### **12:15AM-12:50PM**

Steve Raabe then discussed the findings from the focus groups Maryland Citizen's Health Initiative has conducted. The findings show that that people appreciate through personalized follow up that conveys a sense of urgency. They need basic information that is easy to find and need to have their questions answered quickly to stay engaged in the process. Outreach efforts should also reflect the populations that the agency is trying to reach.

Stan-Before the call from navigators, might want to consider sending a text.

Meg-Are you losing Medicaid people because they think there's a deadline?

Answer-There's usually text saying that Medicaid is open all year around.

Stan-Virginia has passed a bill. New Mexico is working on legislation, and so is Massachusetts.

Diana-In terms of perceived authenticity, what is some of the other feedback you received.

Answer-Did not get as much concern about scams and fraud, but people were worried about commercial entities using information for personal gain. People weren't always aware of the relationship between the comptroller and the Maryland Health Benefit Exchange. May just want to refer to everyone as the State of Maryland to make it easier.

Betsy Plunkett then discussed the changes the marketing department would be making to the year 2 campaign, including increased use of navigators and text messages to follow up.

#### **12:25AM-12:26PM**

No public comments were received.

#### **12:30PM**

The meeting was adjourned at 12:30PM