

MA & MNCare Renewals Restarting: Keeping Minnesotans Covered

By the Numbers

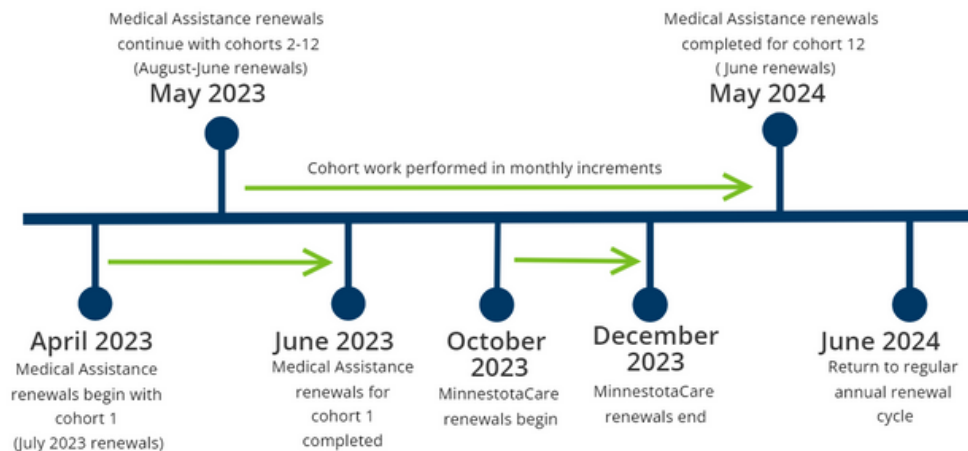
- 1.5M now on Medical Assistance & MNCare
- 15-25% could move off state programs
- 1 in 4 Minnesotans covered by these programs
- 200k+ may need support moving to new coverage
- 30% more enrollees than before the pandemic
- 150k+ could lose coverage due to incomplete paperwork

Eligibility Renewals Restart April 1 for State's Public Programs

For the first time in over three years, 1.5M Minnesotans will need to go through an eligibility review to maintain coverage in the state's public programs, Medical Assistance and MinnesotaCare, now that the federal continuous coverage mandate is set to sunset March 31, 2023. 1 in 4 Minnesotans and 40% of kids are covered by these programs. The number is even higher in BIPOC communities, highlighting the key role state programs play in giving children a healthy start and addressing disparities.

With nearly 30% more enrollees than before the pandemic, this will be an unprecedented amount of work for the state and counties who process renewals, as well as for the health plans who support these enrollees to maintain coverage. Estimates indicate as many as 15-25% of the state's enrollees could lose coverage. While some may lose coverage because they are no longer eligible, nearly half will likely be for procedural reasons, like incomplete or missing paperwork.

Gaps in coverage lead to gaps in care and support is needed to keep Minnesotans covered.



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Steps Needed to Keep Minnesotans Covered

Partnering to Support Minnesotans

Since early 2021, the Minnesota Council of Health Plans has been working closely with DHS, MNSure, county and tribal agencies, and other stakeholders to plan for the end of the continuous coverage mandate and make sure that Minnesotans continue to have access to affordable and timely care. Through this partnership, we have adopted a dedicated equity strategy focused on maintaining the state's historic high rates of insurance coverage and address the barriers facing those without coverage or at risk of losing coverage.

Our shared goal: No Minnesotan faces an avoidable gap in coverage.

To support those transitioning to other coverage and to ensure eligible Minnesotans can maintain coverage on the state's public programs, Legislative action is needed:

- **IT Upgrades:** State agencies have requested additional funding this year to make needed upgrades to the IT systems that help process enrollment applications and facilitate enrollment in commercial insurance.
- **Expansion of Navigator Services:** Funding to expand navigator services is needed to directly provide eligibility and enrollment support to Minnesotans. DHS needs additional funding to hire temporary staff, provide overtime for current employees, and to contract with a vendor to facilitate the enrollment process and to provide administrative support for counties, tribes, and other stakeholders.
- **County Resources:** Counties will also require additional resources to handle the increased number of eligibility redeterminations. Without these resources, we risk jeopardizing the health care coverage of over a quarter of all Minnesotans. Adequate systems and staffing are essential to provide outreach and assistance to ensure either a successful re-enrollment in Medical Assistance or MinnesotaCare or a seamless transition to commercial or other health insurance coverage.

Without proper support, Minnesotans could experience gaps in care. To ensure the additional funding has the maximum impact possible, it is essential the Legislature prioritize passing PHE redetermination assistance early in Session.



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