

March 2024 Medicaid Expansion Partner Engagement Session Takeaways

General Issues: stigma surrounding Medicaid, limited provider network, longer wait times to see providers that do accept Medicaid, copayments (particularly for prescriptions) are a cost-barrier for many folks

Agent/Broker Involvement:

- Some folks are only finding out about agent/ broker fraud in their Marketplace accounts now that they are filing their taxes. Please connect any clients who have experienced A/B Fraud to an [enrollment assister](#) who can report the fraud.
- We've received reports of agents/brokers going to homeless shelters and paying clients \$5 to enroll in a Marketplace plan. We don't know if they are checking for Medicaid eligibility.

Application Issues:

- Assisters are semi-frequently experiencing error codes for Experian when applying for Medicaid via the Marketplace (even with applicants that do have a credit history)
 - One solution to this has been photocopying and scanning in an ID to verify identity
- DSS is required to help folks get identity documents, but at least one DSS office has said that they are too overwhelmed to do this. They are also telling folks living in the homeless shelter that they must come to DSS in-person to get enrolled.
- Folks tend to believe misinformation from DSS because they view them as the authority.
 - If you hear about a DSS office sharing misinformation with an applicant, please flag these issues up to hsmith@caresharehealth.org.

Connections with DSS Offices

- Efforts are being made across the state to “get in the same room with eligibility workers” and partner around expansion enrollment efforts, but we are seeing a huge variation between DSS offices about who is willing to work with enrollment assisters and who is closed off to that idea.

Determination State:

- We are seeing Marketplace eligibility notices that say “eligible for Medicaid” or “may be eligible for Medicaid” based on how much information the Marketplace is able to verify using their information systems.
- EPASS vs Healthcare.gov is a personal preference, if someone wants to apply for other benefits like food stamps then ePASS is a convenient way to apply for both at the same time.

Family Planning Beneficiaries:

- Confusion among folks who were auto-mapped to full Medicaid on Dec 1:

- Some folks are unaware that they now have full Medicaid and don't know what the differences are.
- Folks need to cancel their Healthcare.gov plan upon being enrolled in Full Medicaid so they don't have to repay their premium tax credits.

Innovative Approaches:

- Sharing health literacy information along with Medicaid Expansion eligibility information
- Sharing public charge information up front to ease people's fears before getting into the nitty gritty of eligibility
- Working with school districts to send out information about MedEx eligibility to parents and families
- Connecting with folks 1-on-1 seems to be a better way to address misunderstandings/ misconceptions around Medicaid, particularly if you've built trust with that individual.
- Using Medicaid ID number to check current coverage status in NC Tracks rather than using name

Marketing Needs:

- Flyers directed at employees that can be placed in break rooms that are more approachable/ easier to read/ eye-catching
- The current phrasing of "people with higher incomes now qualify for Medicaid" isn't resonating with folks that have no income

Misconceptions:

- Lots of folks thought that assets would keep them from qualifying for Medicaid but once eligibility is explained to them folks have been happy to apply for and receive Medicaid
- Confusion between Medicaid and Medicare persists

Needs:

- One pager about how to work with DSS offices (policies, laws, etc.)
- A direct line of communication about updates to processes and rules, rather than receiving information 3rd hand