

BCBSM Support for Individuals Impacted by Medicaid Redeterminations

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Medicaid Redetermination Collaboration





- Individual plan market leader in Michigan
- Offers plans in all 83 Michigan counties
- Largest provider network in Michigan
- Plans available to fit wide array of health care needs and budgets



- Offers plans in 32 Michigan counties
- Performed comprehensive outreach to inform beneficiaries of Medicaid redetermination process
- Approximately 350K BCC members are projected to have coverage evaluated for eligibility



- In Michigan, over 500,000 Medicaid enrollees are projected to lose coverage during the redetermination period
 - About 15% of these enrollees are estimated to already be dual-enrolled in commercial individual or group coverage

Medicaid Redetermination Process and Guidance



The BCBSM communication plan aligns with guidance provided by the Michigan Department of Health and Human Services which outlines the Medicaid redetermination process and timeline



 Passive renewals began in April 2023 for Medicaid enrollees who are eligible to remain on Medicaid



- Redeterminations will begin with the cohort of enrollees who are eligible to renew in June 2023
 - MDHHS will send out benefit renewal packets in early May 2023 and enrollees will have 30 days to respond
 - If an enrollee is no longer eligible for Medicaid coverage, they will be notified that they will lose coverage at the end of their renewal month



 Redeterminations will continue monthly for 12 months through May 2024 based on enrollees'
Medicaid renewal dates

MDHHS Actions:

- **BCBSM Actions:**
- BCBSM and BCC receive communication guidance from MDHHS
- BCBSM continues development of marketing tactical plan
- BCC begins communication with members to complete renewal packets
 - Member redetermination communications will continue to a new cohort monthly through May 2024
- BCC provides list of former members who lost coverage in the prior month
- BCBSM deploys omnichannel marketing journey to new cohort of former BCC members monthly until July 2024

Medicaid Redetermination Marketing



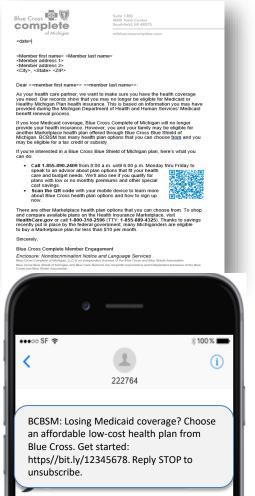
Marketing communications plan utilizes a three-pronged approach to support Medicaid members impacted by the redetermination process

Connect **Educate** Engage **Omni-Channel Journey Goals and Objectives Target Audiences** Former BCC Members Personalized messaging • Health insurance plan education Individuals losing Targeted coverage from a communications • Demonstrate BCBSM competitor plan plan value Keep Michiganders covered

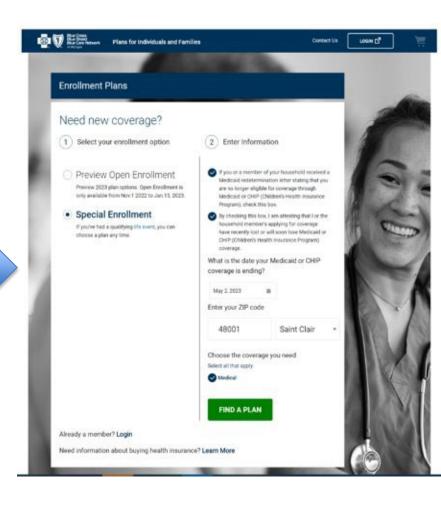
Medicaid Redetermination Marketing Communications



Impacted beneficiaries will receive a series of informative communication for up to 45 days from the last date of coverage







Key Insights And Next Steps



Three months in – What have we learned

- Price and affordability are top concerns of impacted individuals
 - Emphasize overall value of health plans that may require premium payment
 - Increase navigator and community advocate knowledge to assist with transition from no cost Medicaid plans to individual health insurance plan that in some cases may require payment of premium
- Campaign optimization will be needed to adapt to redetermination process changes
 - Loss of coverage projections to date have been lower than expected requiring a shift in tactical plan

Communicate with beneficiaries early and often after eligibility status has been determined.

- Outbound phone calls moved to earlier in campaign journey contact flow
 - Team observed that impacted individuals that are eager to keep coverage are more likely to make a purchase decision prior to or soon after eligibility status is determined
- Continue to communicate the value Blue Cross plans provide and the benefits of health coverage in general