

MCE Gainwell Monthly Technical Meeting

Meeting Details

Meeting Name: MCE Gainwell Monthly Technical Meeting

Leader/Facilitator: Dennis Dowling, FSSA; Rebecca Siewert, Gainwell

Location, Date and Time: Monday, August 16th, 2021; 2:00 PM; webex

Scribe: Craig Nielsen

Attendees					
Anthem		State		Gainwell	
Gretchen Atkins		Meredith Edwards	X	Rebecca Young	X
Jean Caster	X	Nonis Spinner		Rebecca Siewert	X
Tracy Silvers	X	Angela Todd		Bill Anderson	X
Jason Adams	X	Ralph Jones		Sharon Ricketts	
Tuan Nguyen	X	Dennis Dowling	X	Wanda Williams	X
LaDawna Richmond		Stephanie Guetig	X	Stephanie Cari	X
Cynthia Bell		Keena Baumer	X	Karen Grays	X
Trang Cooley		Craig Nielsen	X	Maksat Abamov	X
Tracey Welch		Mark Wiley		Denise Brown	X
Ferdinand Cajigal		Daneida Dooley		Xenia Hastings	X
Ron Stoughton	X	Natalie Angel		Jerry Heady	X
Stephen Egan		Tamra Mitchell	X	Rubi Multani	X
Amy Tate		Maria Schelli-Merrifield		Beth Linginfelter	X
Maura Wenglarz	X	Shawna Frazier		Ginger Brophy	X
Cindy Riley		Kathleen Leonard		Joyce Lee	X
Natalie Snow	X	Susan Beecher	X	Tisha Arberry	
MHS		Ryan Callahan		Angela Tynes	X
Geoff Petrie		Megan Anderson		Melinda Kent	X
Brett Norris	X	Colin Woods		KC Sushant	X
Taylor Fulner		Shannon Effler	X	Nastassja Daniel	X
Kumar Aggala	X	Paul Fruits		Greg Hershberger	X
Stoshala Payne	X	Melinda Baker	X	Greg Zimmerer	X
Anastasia Spurgetis	X	Brian Arrowood	X	LaKisha Browder	
Chelsea Trotter		CareSource		Vanessa Ransom	
Monica Johnson		Trish Kappes		Optum	
William Wilson		Samantha Walton	X	Harini Kasamsetty	X
Melissa Steever		Lindsay McGuire	X	Harsha Jasti	X
Chad Nelson	X	Jeff Severino	X	Maximus	
Brian Schnettgoecke	X	Kristina Vanbelkum		NaKeita Boyd	X
Jerri Davis	X	Lindsay Young		Jennifer Haas	
MDwise		David Rose		HMA	
Jason Thacker		Akbar Shareef		Kaitlyn Feiock	
Michelle Okeson	X	Gary Ziegler		UHC	
Raeann Brown		Resalot Taus		Kavitha Thomas	X
Marcia Shively		Chelsi Hall		Elizabeth Adams	
Bonnie Kegin		Jeffrey Kardatzke			

Agenda Items

Item	Topic	Facilitator	Notes (conclusions, discussions, decisions, and next steps)
1	Open Meeting	Dennis	<p>Review past action items and update statuses</p> <p>November Meeting:</p> <ul style="list-style-type: none"> Gretchen: Seeking feedback from State on what trends we expect moving forward (for instance, trending down with unemployment? Etc.) Natalie: No official estimates, but we don't have a lot of new Medicaid applications Meredith: Further growth not anticipated, working toward projection of any membership changes in other direction <p>December Meeting:</p> <ul style="list-style-type: none"> No further questions <p>January Meeting:</p> <ul style="list-style-type: none"> Dennis: Continue through PHE, which is likely to extend through 2021 Jeff: Is there a new category for HIP? Nonis: No, it's an existing one. Gretchen: Is cost share distinct from PHE? Nonis: Now intertwined. <p>February Meeting:</p> <ul style="list-style-type: none"> Nonis: Provided update on evolving PHE landscape and guidance. <p>March Meeting:</p> <ul style="list-style-type: none"> Keena: No update <p>April Meeting:</p> <ul style="list-style-type: none"> Meredith: Official extension, but can only do every 90 days, but informally expect to be extended through end of 2021. <p>July Meeting:</p> <ul style="list-style-type: none"> Nonis: No update <p>August Meeting:</p> <ul style="list-style-type: none"> Keena: No update
2	General update on Public Health Emergency – Open enrollment status update / trending / projections (after COVID)	Jason Adams	<p>MCEs to provide OMPP with a list of processes each will need to test before resuming normal operations post PHE. Include timelines for testing, test files needed, and other system engagement.</p> <p>May Meeting</p> <ul style="list-style-type: none"> Meredith: Brainstorm what MCEs need Gretchen: Ensure Payment files are moving, HIP files in general (Particularly potential plus), Members 66+, etc. Kavitha: Whole Cost Share Bill: Agree with Anthem, also how Medically Frail moves back in <p>June Meeting: Requests from Anthem:</p> <ul style="list-style-type: none"> How will the potential plus process happen after COVID? Will there be phases and how does that work? How will open applications be handled? We would like the state to consider terming all open applications with a current term
3	Post-PHE Operations MCE Test Plans	Angela Todd (Meredith Edwards, Kaitlyn Feiock)	

date and start fresh with a current applications. (we prefer no retro term dates)

- Confirm Testing Items Received

June Meeting:

- Gretchen: When are we beginning?
- Angela: Digesting these and coordinating with all systems/schedules
- Kaitlyn: Sooner rather than later (roughly 60-90 days) to start testing
- Kaitlyn: Everybody left in basic will have a potential plus applied to them.
- Kaitlyn: Applications after will be handled like pre-COVID.
- Nonis: We will start sending out to individuals to give opportunity to report any changes, still no negative actions as a result yet.

July Meeting:

- Rebecca: working with the state to roll some items back.
- Meredith: I do not have a timeline yet.

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- CareSource is interested how/if the state meeting the CMS Interoperability requirements for the fee for service population. Is there public information available on a web site we can review?

January Meeting:

- Craig: We have analyzed, but no decision, we have also received the next wave rule and are analyzing it as well.

February Meeting:

- Craig: No update on state decision; next wave rule suspended before being published in Federal Register

March Meeting:

- Craig: No update and no decision, thus not on trajectory for 7/1/21; May ask MCEs for their details if and when CMS requests

April Meeting:

- Craig: Will not make July 1, 2021
- Jeff: CareSource: Yes, were close to ready on 4/1, some pieces released, more to come.

4 CMS Interoperability Jeff Severino

May Meeting: No Update

June Meeting:

- Kavitha: We plan to be ready for 7/1, there are a couple of things we will be seeking approval on portal language and will reach out.
- MDwise: On Track
- CareSource: On Track
- MHS: No response
- Anthem: Been testing; will follow up

July Meeting:

- Kavitha: I will follow-up on this
 - MDwise: No update
 - Jeff: No update, currently working with a vendor does the state have any update?
 - Dennis: planning for the 1st of the year.
 - Jeff: I am comfortable with closing. Any additional information from the state would help.
 - Anthem/Jason: we are compliant as of 7/1
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			<ul style="list-style-type: none"> • Jason/Kavitha: I can confirm, this can be closed. <p>August Meeting Update:</p> <ul style="list-style-type: none"> • MHS: The required Patient and Member API implementation occurred on July 1, 2021. We are on track to implement the payer to payer data exchange on 1/1/2022
5	59372 - Encounters for FQHC and RHC's	Jason Adams	<p>February Meeting:</p> <ul style="list-style-type: none"> • Jason: Implementation date/timeframe/project plan <p>March Meeting:</p> <ul style="list-style-type: none"> • Greg: Work will be complete end of month, request currently being evaluated to delay effectiveness to July • Question: What are the three CRs, and is Dental a 7/1 implementation? • Greg: Main CR is 59372, another is for an enhancement, and a third is for dental. Dental is not a 7/1 implementation date, but with delay to effectiveness of other, may pull into July by doubtful. <p>April Meeting:</p> <ul style="list-style-type: none"> • Greg: Small enhancements being approved by state and decided when that will go live; tentatively scheduled for July (Medical); change control for that may not go live with it; August for Dental <p>May Meeting:</p> <ul style="list-style-type: none"> • Dennis: Still scheduled for July <p>June Meeting Request from Anthem: Planned July 28 go-live on target? Dental Vendors requirements or design document (project GT-2638)?</p> <p>June Meeting:</p> <ul style="list-style-type: none"> • Ginger/Rebecca: Will follow up with Dave Murphy • Scott: As far as I know, 7/1 for Medical and Behavior health is still happening; Dental may still be later but retro'd back to 7/1 <p>July Meeting:</p> <ul style="list-style-type: none"> • Greg: the dental is on track for the August implementation <p>August Meeting Update:</p> <ul style="list-style-type: none"> • Please provide update on the Dental Wrap Implementation Date <p>August Update:</p> <ul style="list-style-type: none"> • Melinda: Several providers have reached out saying they're not getting wrap payments. Codes that are coming over with claims data are showing inaccurate or missing ARC codes. • Melinda: Providers will be billing with D9999, MCEs are supposed to pay at 0 (not deny) and sent to Gainwell which will process wrap payment on it. 9/29/21 is the projected go live date.
6	HCC Medworks Project update	Jason Adams	<p>February Meeting:</p> <ul style="list-style-type: none"> • Jason: requirements and workgroups? • Ginger: Updates sent 2/12/21 <p>March Meeting:</p> <ul style="list-style-type: none"> • Ginger: Appreciated update, moving forward <p>April Meeting:</p> <ul style="list-style-type: none"> • Ginger: Moving forward • LaDawna: Will need to know when • Ginger: Expect testing in August timeframe <p>May Meeting: Request updates on test-plans and timelines for December, 2021 go-live:</p> <ul style="list-style-type: none"> • Jason: Current timeline (mentioned may be earlier) and test files related to that • Meredith: Connected to PHE timing; working on test plans

- Ginger: Working on figuring it out, no timeline quote yet
- June Meeting Request from Anthem: Requires coding changes for MCE's - possibility of a work group?

June Meeting:

- Ginger: We've had to move the release date out, had indicated August for vendor testing, will probably move out to November.
- Kavitha: Will sample premium file take until November?
- Ginger: We should be able to get that out earlier, maybe September.

July Meeting:

- Ginger: the implantation date has moved out to January. Currently in SIT. The updated Business Design was sent out last month.
- Jason: how many network member are included
- Nonis: a total of 3,072 members in MEDworks. 2,445 are in fee-for-service. Anthem has 431, MHS has 192, and UHC has 3.
- Gretchen: we would like to be a part of regression testing.

August Meeting Update: the high level schedule for the vendor testing is below:

- Provide Cost Share Premium MCE interface file example to MCEs – 8/30
- Provide test plan to MCEs and Optum – 9/10
- Touchpoint call – 9/20 (immediately following MCE Tech mtg call)
- Data Prep/834s – 11/1-24
- Kickoff call – 11/15 (immediately following MCE Tech mtg call)
- Execution – 11/29-12/17 (between Thanksgiving and Christmas)

August Update:

- Ginger: Expect to have Premium Vendor MCE interface file by end of month for MCEs to pull off of file exchange,
- Kavitha: Can you provide location?
- Ginger: Yes, we will

We sent examples to Gainwell and were told this is a known issue. The 834 process is not picking up retro changes when they go back into last year. This causes Core to show the member's MCE assignment to be voided however the MCE shows the member as active for the time period.

April Meeting:

- Beth: The 834 challenge I was involved with were for HIP authorizations are both retro-effective and retro-ended, so sometimes 834s don't generate.
- Jerry: Will have to do same process for MHS as Anthem
- Michelle: We are getting an 834 on this, but the member has been voided
- Jerry: We can identify those members and get them to you; will get with Xenia
- Joyce: Are you not using term audit files? Send examples to me.
- Michelle: Just getting term transaction rather than a void.

May Meeting:

- Joyce: 834 audit files were not designed to generate a void in the term file, MCEs should have received a void in their daily.
- Jerry: Awaiting direction from PMO, only get in daily if they term entire segment.

7 Receiving a Term on the 834 when a member has been voided Michelle Okeson

- Joyce: If termed in January and the term was voided, we wouldn't generate it, need to revisit, maybe change 834 term audit program to pick those up.
- Jerry: If member had assignment for whole year and got term for final six months, that would go out; later on first six months was voided, but nothing goes out and causes issues for plans; Service NOW Request # REQ0018345

June Meeting:

- Joyce: Submitted a CR for this issue. Will receive a void record on 834 term audit file for those members; discuss further in kick-off after CR approval as original build was to not send these out.

July Meeting Update: Dennis: this 834 Change Request is GT-7595

July Meeting:

- Michelle: we currently not receiving the information on the daily file.
- Joyce: you are receiving the voids in the daily file. However, if the member is termed, you will not receive those updates in the daily. I will be scheduling the kick-off soon that will include the requirements and scenarios.

August Meeting:

- Joyce: Had kickoff with project sponsors, have one scheduled with MCEs this week.
- Michelle: Can be closed.

We would appreciate more information on the proposed change away from frail capitation rates. How will this be addressed through the 834s? Is testing planned? What is the timeline?

April Meeting:

- Meredith: We are working on creating new capitation category codes; potential June go live.

May Meeting:

- Meredith: For HIP – We'll have expansion which will cover plus and basic and state plan only (frail); continuing to meet; hoping to provide to MCEs shortly; you'll see headings have changed in new contracts; discussing if they'll load at Gainwell prior to CMS approval.
- Joyce: New descriptions which will go out on companion guide.
- Bill: Both 834 and 820?
- Joyce: Yes, June go-live at discretion of Meredith and team.
- LaDawna: What is timeframe for companion guides?
- Max: Already submitted to EDI team for review
- Joyce: Drafts within next couple of weeks

June Meeting: Request from CareSource to address GT-6643 (New HIP State Plan Expansion Cap Categories) concerns after seeing the requirements documents compared to discussion with state actuary about how these changes are being implemented.

June Meeting:

- Joyce: That one is going in end of this month.
- Sam: Trying to clarify what to expect.
- Joyce: Will send my responses to you.

July Meeting:

- Joyce: this was implemented on 6/30. I will follow-up with Mark to make sure the correct files are sent out.
- Dennis: this will be close next month.

8 Frail Capitation Rates Michelle Okeson

			<p>August Meeting Update:</p> <ul style="list-style-type: none"> • After the implementation of the new Frail capitation categories, we still have quite a few members with FB or FP on the last received 834. (They were received prior to the implementation.) Since we can no longer calculate the cap category ourselves (we do not receive the Newly Eligible indicator), will Gainwell be sending us all members on a daily 834 so we can update our systems? <p>August Meeting:</p> <ul style="list-style-type: none"> • Joyce: Send members over to your contact • Rebecca: Send to Xenia
9	Pregnancy Supplemental File Response – ‘E03 - PREGNANCY END DATE IS NOT PROVIDED’	Manju Nair	<p>I believe we are getting this error when we report the second pregnancy while the first MAMA never ended due to the PHE situation. (Submitted this item to Gainwell) (See above)</p> <p>June Meeting:</p> <ul style="list-style-type: none"> • Kumar: We are receiving for supplemental files, not sure why we are getting this as our data matches 834s. • Rebecca: Is related to PHE. <p>July Meeting:</p> <ul style="list-style-type: none"> • Rebecca: the initial NOP recorded there will not have an end date. Looking into logic for 834s. • Nonis: are the records being stopped? Keena and I will look into. <p>August Meeting:</p> <ul style="list-style-type: none"> • Keena: Both have defects open: E03 (219215); E04 (217216); released sometime in November
10	T-MSIS Data Quality Issue	Harsha Jasti	<p>We have a data quality issue with TMSIS that seems to be related to “too many” ancillary revenue codes on inpatient claims. FFS reimbursement methodology primarily reimburses inpatient claims based on DRG, we are seeking confirmation from the MCE’s that they submit inpatient encounters to Indiana Medicaid with a reimbursement methodology based on DRG as well. Or, are they in fact based on revenue codes submitted?</p> <p>We would like to know if MCOs have a reimbursement methodology similar to Indiana’s Fee For Service inpatient claims which is a DRG based reimbursement methodology (screen shot and link below). Do all MCE’s submit inpatient encounters by the same reimbursement arrangement?</p> <p>The link to the inpatient hospital services module: https://www.in.gov/medicaid/files/inpatient%20hospital%20services.pdf</p> <p>May Meeting:</p> <ul style="list-style-type: none"> • Ralph: Seeing some odd things in T-MSIS data, MCEs can respond via email if preferred to confirm if they’re doing reimbursement for inpatient claims via DRG; also would like to know if reimbursement methodology is similar to FFS claims. • Stephanie: Trying to correctly respond to CMS that reimbursement is via DRG and not revenue code. <p>June Meeting:</p> <ul style="list-style-type: none"> • Ralph: Received from CareSource. • Craig: Anthem and MHS as well. • Kavitha: Will send. <p>July Meeting:</p> <ul style="list-style-type: none"> • Nonis: no updates <p>August Meeting:</p>

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- Harsha: Can be closed.
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Could these be shared with MCEs? We run into issues with eligibility and are told that they are due to known IEDSS issues. It would be helpful to know what to look for. (An example is mid-month terms due to IEDSS only sending the future segment to Gainwell. It causes a gap in eligibility for the member.)

June Meeting:

- Ginger: We do still occasionally get this example where IEDSS where IEDSS doesn't send the current eligibility segment with future or retro; causes Core to close down the BP. Then a few days later will get a new current segment, but BP doesn't always reopen.
- Keena: IEDSS is working on this, put in a fix last week or today; two more fixes to go into effect in September to fix this; we are fixing as found in the interim.
- RaeAnn: Can this be shared before we discover these independently?
- Keena: I can get with IEDSS and Nonis and we can get to you.

July Meeting:

- Nonis: we are tracking the defects monthly.
- Keena: 217895- no gender is being indicated. Currently working to fix the gender.
- 218783 – Working to change the file.
- 216854 – Talked with Angie about this defect last week. The conformation date should be the date to act on.
- 219171 – The date of death is being corrected.
- 219126 – their acting on the record
- 219216 – Because of the Public Health Emergency, Keena is looking into this with IEDSS.
- Ginger: the CDE files are not in the proper format, as a result the files are not processing correct. I will provide examples.

August Meeting Update:

- 217895- this is the defect regarding gender. This could cause issues for MCEs regarding billing if they have no gender listed for member in file they receive from CORE.
- 218783-zipcode update. if members zip code is updated and changed in our system it may not automatically transfer to MCE's databases.
- 216854 - This one may affect the MCE's it is when a medically frail and no pay come over on the same day. It was causing people to close for the no pay.
- It probably won't affect us until the PHE is over and no pay's start again.
- 219171 - Date of Death defect, erroring out dates of death due to trailing spaces in names
- 219126 - Inserting frail for people not disabled
- 219216 - Pregnancy end date issues. Not a pregnancy issue this is for processing an MA D application. So, this one should be removed from this list.
- 217216 - EO4 Response file issue. Currently even though the end dates are in sync we also check for the due dates and if they have a mismatch E04 is sent on the response file.
- 216150 / 216151 / 216148 – these are the three defects for the mid-month closure issues...they are scheduled to be released 9/11/21

11 List of IEDSS Defects
Affecting Eligibility

Michelle Okeson

			<ul style="list-style-type: none"> • 219215 – This is to fix the EO3 Response file that the MCE’s are receiving when they update the NOP for a member. • Michelle: There was a comment made that the two defects referenced in the June meeting (for implementation in September) were not on the list provided by Keena. She was going to provide information on those as well. <p>August Meeting:</p> <ul style="list-style-type: none"> • Keena: 219216 should be removed
12	List of Issues requiring Manual Correction by Gainwell Managed Care	Michelle Okeson	<p>Could these be shared with MCEs? (For example, retro NEMT assignments that must be overwritten.) It would be helpful to know what the issues are and how they are being addressed.</p> <p>June Meeting:</p> <ul style="list-style-type: none"> • Raeann: Can these known manual corrections be shared as well? • Ginger: By Gainwell or IEDSS? Will need to check with Business Unit. • Raeann: This example Gainwell. • Rebecca: We fix as we find, might not be a list per se, but can talk internally with team. • Mark W.: Are these defects? • Rebecca: Often one-offs. <p>July Meeting:</p> <ul style="list-style-type: none"> • Rebecca: currently working with Kenna and team to resolve the list. I will forward list to Michelle Okeson and team. <p>August Meeting Update:</p> <ul style="list-style-type: none"> • Michelle: We did not receive a list of manual corrections being done by Gainwell. <p>August Meeting:</p> <ul style="list-style-type: none"> • Michelle: Expected regularly • Rebecca: Nobody has received a list of these recently • Joyce: Example is HHW to HIP downgrades, you’re getting monthly from OMPP • Rebecca: We’ll take offline and talk internally • Tuan: Can we get a list of defects which impact the MCEs? • Dennis: At bottom of this agenda; none at the moment
13	COBA Box 33 billing rules	Jason Adams	<p>Medicaid vs Medicare</p> <p>June Meeting:</p> <ul style="list-style-type: none"> • Jason: Is there a difference in rules between Medicaid and Medicare, and if so, what are those? • Tracy: We know there’s a difference, Medicare asks for Billing Address; State asks for Service Location. • Rebecca Y.: Confirm Tracy; we require Service Location. • Tracy: We won’t make a one-to-one match then because of this difference; will pay and be sending encounters as received from Medicare; if it fails your validation it will be reported on 277U, which we don’t always get in a timely manner. • Rebecca: 277U issue wasn’t on your side, was on our side, still working Mid-March (17th) one. We will report those Box 33 errors back. I don’t know if it would factor into rates. • Dennis: Don’t know either, will need to leave open. <p>July Meeting:</p> <ul style="list-style-type: none"> • Jason: I am not sure that we have a solution. • Rebecca: I will follow-up with Rebecca.

			<p>August Meeting:</p> <ul style="list-style-type: none"> • Rebecca: There are differences between what Medicare requires in box 33 and what we do. • Stephanie: CR GT-3459 in deferred status to address this; never gotten traction.
14	Outage	Jeff Severino	<p>Jeff: In future communications, could you specify what the impacts to the MCEs would be and what the 'catch-up' plan is?</p> <p>July Meeting:</p> <ul style="list-style-type: none"> • Gretchen: Crucial to our processing, got empty files, any way to know when files are being combined would be helpful. <p>August Meeting:</p> <ul style="list-style-type: none"> • Dennis: Greg Z. was going to put into his plan.
15	Two New Projects	Jeff Severino / Jason Adams	<p>Last week I received two notices from Joyce about new projects that have never been mentioned before: GT-7595 Generate 834 (Historied Non-Current MCE) – Charter received; do business design documents exist? If not, when should we expect to receive those? GT-8174 D-SNP Eligibility Verification - did not receive charter or business design documentation (received charter for GT-7753). Can we get an overview of these? I want to ensure we understand the scope so we can folks engaged.</p> <p>August Meeting Update:</p> <ul style="list-style-type: none"> • Joyce sent charters for these projects <p>August Meeting:</p> <ul style="list-style-type: none"> • Jeff: This meeting is supposed to give us advanced warning of these coming out, but these were a surprise, so resourcing is in a rushed state. • Greg: We only review those which are scheduled, maybe we talk about new projects which are on the books, will take under consideration. • Joyce: Came out of this meeting. • Stephanie: Can we talk about how to restructure that Thursday discussion. • Dennis: Yes.

NOTE: The State will be working remotely starting 3/17/2020 following Gov. Holcomb's directive in efforts to slow down the spread of COVID 19. All meetings and business operations will be continued as scheduled.

Action Items

Item	Assigned To:	Due Date	Description	Status
1.	Keena	7/19/21	Get with IEDSS and Nonis and we can get list of IEDSS Defects Affecting Eligibility to MCEs Dennis: this item can be closed. MDwise: Requested to remain open	Open
2.	Ginger Brophy	9/20/21	Provide Premium Vendor MCE file exchange location	Open
3.				

COVID Updates

COVID-19

COVID-19 Rollback Projects

Prior Auth – This involves a significant amount of Reference updates. The PA Reference changes are complete. The PAUM business unit is in process of retraining the staff to pre-PHE standards.

Other Reference Rollback – Significant reference updates were required to address COVID-19 and this CR is to roll back the updates. Gainwell is working with the State Sponsor to understand which of the Reference updates will be rolled back and the timing.

Provider Enrollment – This project will roll back Provider Portal and letters to the pre-COVID state. It also addresses 18 months of pent-up revalidations and recertifications, and analysis continues to understand the impact to staffing and KPMs as well as the time needed to address these. Systems updates will complete by Sept 1st for the rolling back to the pre-COVID state in Portal and letters. The resetting of the dates for Revalidation and Recertification is on track to complete by Oct 1st. The updated Requirements and Business design for Phase 1 (Sept 1 release) were approved by the State on Aug 6.

COVID-19 PHE Efforts Continuing Include:

Premium Vendor - Halt Premium Payment – This project prevents accounts closing for members who are unable to make their premium payment during COVID19. Gainwell continues to apply payments daily for incoming conditional members for CHIP and MED Works. This project will complete at the direction of the State.

Eligibility Re-Opens/CoPay/CostShare - We continue to identify and extend Medicaid Eligibility as requested by the State.

MCE Impact Defects

None currently listed