

Public Health Emergency (PHE)

What is the PHE and how does it affect members?	At the beginning of the COVID-19 pandemic, the federal government declared a PHE. During the PHE, Medicaid agencies are required to continue health care coverage for members, even if someone's eligibility changes, with limited exceptions. As a result, most AHCCCS and KidsCare members have kept and will continue to keep their health care coverage during the PHE, regardless of eligibility status.
How long will the PHE last?	Right now, the PHE has been extended until 4/16/22, but will be reviewed again for possible extension. The federal government can extend the PHE 90 days at a time and has done so multiple times since March 2020.
How many AHCCCS members will be impacted once the PHE ends?	There are roughly 500,000 members who are in the "COVID override" group in Arizona. These 500,000 members either 1) did not respond to a renewal request for information and were unable to be automatically renewed; or 2) are shown to be ineligible based on information provided by the member or via electronic sources. The first report we received from AHCCCS specific to Banner – University Health Plans included 35,000 members.
Is AHCCCS still processing renewals?	The process of annual renewals never stopped; AHCCCS has maintained the process of renewing eligibility during the PHE for Title XIX and Title XXI members. Many members are able to be renewed automatically based on federal hub information; however, if AHCCCS needs additional information in order to process a member's renewal they will send the member a request for information indicating the items needed to process their renewal.
What other coverage options do members have if they no longer qualify for AHCCCS after the PHE?	Members who are no longer eligible for Medicaid or the Children's Health Insurance Program following the end of the PHE may be eligible for coverage through the health insurance marketplace. Banner – University Health Plans partners with Banner Aetna for marketplace coverage. They serve Maricopa, Pinal and Pima counties.
How is AHCCCS working with their contracted health plans to provide information on members who need to take some type of action to continue coverage?	AHCCCS is providing contracted MCOs with member level data of enrolled members who may lose eligibility if they don't complete the AHCCCS renewal process. MCOs are partnering with providers and community stakeholders to conduct outreach and ensure members understand the importance of renewing their coverage.
What is critical for AHCCCS members to do today?	Ensuring accurate and current member contact information is up to date in Health- e-Arizona Plus (HEAplus) is critical to ensuring a member continues health care coverage. It is important that members respond to Requests for Information.
What is HEAplus and how do members access it?	HEAplus is a website: <u>www.healthearizonaplus.gov</u> .This portal offers the most accurate, credible, real-time eligibility determinations for public assistance programs. HEAplus is often able to verify much of the information needed for an eligibility decision through electronic data sources. Members can update their contact information and other critical information within the HEAplus portal. If you don't qualify for AHCCCS you will be automatically connected to the Federal Health Insurance Marketplace.
What are Community Assistors?	Today there are over 200 Community Assistors throughout the state using HEAplus to help Arizonans apply online for AHCCCS Health Insurance, Nutrition Assistance and TANF Cash Assistance. Community Assistors complete HEAplus applications during an interactive interview with the member. If members need to upload electronic sources assistors can help with this. Assistors can track the progress of the application and help members throughout the application process. If you are interested in becoming a Community Assistor, please visit https://www.azahcccs.gov/Resources/CommunityPartners/HEAplus.html