



Medicaid Mail Returns

Please note that this reflects a process enhancement not a policy change

Background

The Department continues to look for opportunities to improve the quality, timeliness and integrity of the Program by maximizing automation efficiencies. Some of our recent automation initiatives include Auto-Renewals, Federal and State data matches, MCO Plan Selection, and electronic notifications. Among households with at least one member enrolled in Medicaid, 36% now receive notifications electronically instead of paper mail.

Currently, returned mail requires manual intervention by caseworkers. The Maryland Health Connection Fulfillment Center receives on average 6,000 pieces of returned mail per month for both Medicaid and Qualified Health Plans.¹ The number of returned mailings is not equivalent to the number of individuals as households may receive several different types of notices within a given month.² Returned mail is largely driven by consumers' failure to report changes of address. It is the responsibility of consumers to report all changes including address within **ten business days** pursuant to Medicaid regulations.³ When changes of address are not reported and mail is returned with no forwarding address, it is not known whether the consumer continues to meet the residency requirement for Medicaid in Maryland and the case may be closed.⁴

Beginning in January 2018, new functionality will be implemented in Maryland Health Connection to automate the disenrollment process for Medicaid enrollees whose mail is returned due to an invalid mailing address. This automation allows us to ensure that we exclude disenrollment's, for the following consumers:

- Deemed newborns;
- Consumers who have an outstanding verification on their application;
- If coverage for at least one member of the household is ending in the next 60 days;
- If renewal, age-out or post-partum processing is in process for at least one member of the household; and
- Consumers who are homeless who indicate "No Home Address" on their applications. Notices for consumers with no home address are automatically sent to their local health departments if they chose to receive notices by U.S. mail. As of October 2017, there were a total of 12,474 consumers who indicated "No Home Address" on their applications.

Maryland Health Connection will perform the following processes for returned mail: A monthly return mail file is generated on the 1st of the month of consumers whose mail was returned;

- HBX will compare the address on the returned mail file to the address in the HBX. If the addresses are different, HBX will ignore that record and allow the consumer to continue with coverage. If the addresses match, then the HBX will disenroll the consumer;
- Return mail disenrollment will be processed monthly in the first week of the month before renewal processing;
- Consumers will be disenrolled effective the month after mail file was generated to give MCO's time to outreach to members.
- EDD unit will research CARES to see if they can also update address based on associated case information.
- A cancellation notice is sent to consumers who are disenrolled due to returned mail with the following cancel reason: "Mail for this individual was returned and a change of address was not reported as required by COMAR 10.09.24.12B;"
- A disenrollment transaction is sent to MMIS with cancel reason code 551 ("whereabouts unknown"); and
- Case comments are added on the consumers' cases regarding the returned mail disenrollment.

The process for returned mail for cases in CARES and other eligibility systems continues to be manual.

Reporting Address Changes

To minimize closures resulting from returned mail, MDH requests that Managed Care Organizations and health care providers remind their members and patients to report changes of address directly to Maryland Health Connection within ten business days. Reporting changes is easy, is self-attested by the consumer and does not require any documentation, and can be done through the following methods:

- Go online to MarylandHealthConnection.gov.
 - Use the "Change My Information" button on your account homepage to update your application.
- Download the free Enroll MHC mobile app
- Get free, in-person help from a local connector entity, health department or department of social services
- Call Maryland Health Connection at 1-855-642-8572 (TTY: 1-855-642-8573)

Notes

¹ This number does not include electronic notifications that are undeliverable, as the notice will be sent by regular mail after three failed email attempts.

² For example, if a household applies at the beginning of the month and is a mixed household with some members being determined eligible for Medicaid and others for a Qualified Health Plan or Dental Plan, the household would receive an eligibility determination notice as well as MCO, QHP and dental notices; therefore, several notices would be returned for the same household within a given month.

³ COMAR 10.09.24.12B(1)

⁴ COMAR 10.09.24.05-3A