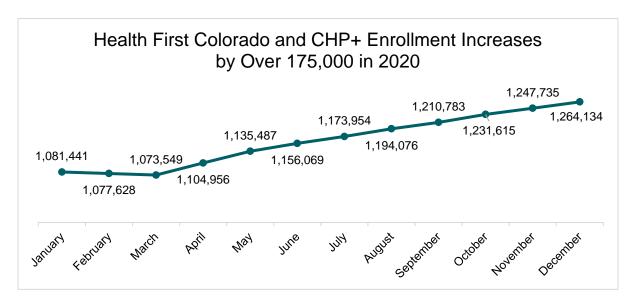
This series of reports analyzes enrollment changes in Health First Colorado (Colorado's Medicaid Program) and Child Health Plan Plus (CHP+) and identifies factors that may have contributed to an increase or decrease in enrollment. The data source used is the Colorado Department of Health Care Policy and Financing's <u>Premiums, Expenditures and Caseload Reports</u> in which monthly data represents caseload numbers at the end of that respective month. Previous enrollment analyses can be found <u>here</u>.

# Continued Increase in Enrollment Throughout 2020

The 2020 calendar year saw large increases among Health First Colorado enrollment in the second, third, and fourth quarters, and a combination of increases and decreases in CHP+. The following report outlines and analyzes enrollment changes, focusing on CHP+ and Health First Colorado's non-disability programs (i.e. Modified Adjusted Gross Income, or MAGI programs).

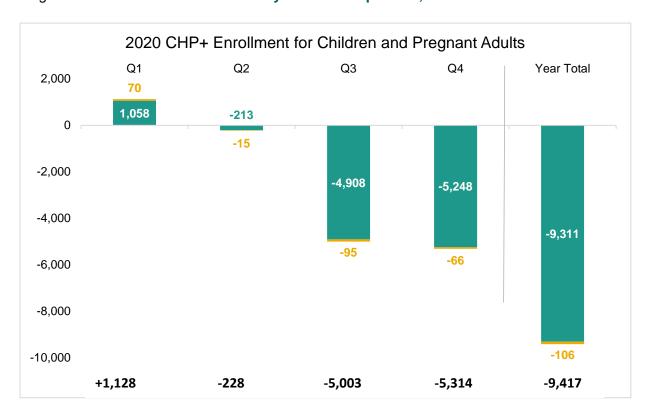
The total number of people enrolled in Health First Colorado MAGI programs and CHP+ programs **increased by 175,137 or 16.1 percent** from the beginning of January to the end of December 2020.



### **CHP+ Enrollment Data**

The total number of children and pregnant adults enrolled in CHP+ decreased by 9,417 or 12.5 percent from the beginning of January to the end of December 2020. Both children's and pregnant adults' enrollment decreased in every quarter except the first, where enrollment increased.

- Children's enrollment decreased by 9,311 or 12.5 percent to 65,139 from 74,450.
- Pregnant adult enrollment decreased by 106 or 12.8 percent, to 721 from 827.

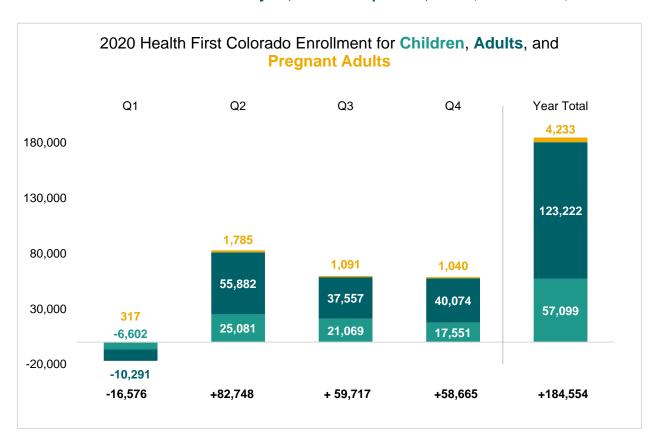


### Health First Colorado Enrollment Data

The total number of people enrolled in all Health First Colorado programs **increased by 196,654 or 16.3 percent** from the beginning of January to the end of December 2020.

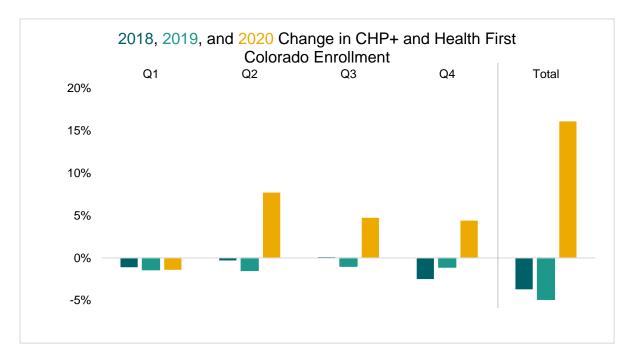
The total number of adults, pregnant adults, and children enrolled in Health First Colorado MAGI programs **increased by 184,554 or 18.2 percent** from the beginning of January to the end of December 2020.

- Adult enrollment increased by 123,222 or 22.8 percent, to 662,946 from 539,724.
- Pregnant adult enrollment increased by 4,233 or 32.7 percent to 17,194 from 12,961.
- Children's enrollment increased by 57,099 or 12.4 percent, to 518,134 from 461,035.



# Comparison to Previous Years

Enrollment in Health First Colorado MAGI programs and CHP+ programs decreased by similar amounts in quarter one in 2018, 2019, and 2020. However, for the remainder of the year, enrollment in 2020 increased significantly, while enrollment decreased in 2018 and 2019. The following section explains why 2020 enrollment trends differed from those in 2018 and 2019.



See Appendix A for complete comparison of 2018, 2019, and 2020 trends.

## What Impacted Enrollment in 2020?

With the onset of COVID-19 in March 2020, Health First Colorado and CHP+ enrollment trends changed significantly. Enrollment in 2020 was predominantly impacted by COVID-19 specific policies and events, as well as several existing factors both federal policy proposals and state systems changes, in quarter one.

#### Impacts of Federal COVID-19 Legislation and Rules

In order to receive the enhanced match established in March 2020 by the Families First Coronavirus Response Act (FFCRA), states are required to follow certain requirements. One provision, typically called Continuous Eligibility (CE) mandates that states not terminate Medicaid members who were enrolled on or after March 18, 2020, unless the member voluntarily terminates their benefits, moves out of state, becomes incarcerated, or dies. This requirement will continue until the end of the month when the Public Health Emergency expires, which is currently January 21, 2021.

The Colorado Department of Health Care Policy and Financing (HCPF) decided to apply the CE requirement to CHP+ members as well, with the exception of pregnant adults after 60-days postpartum and children turning 19 years old. As in quarter two, it is likely that some children transitioned from CHP+ to Health First Colorado as their family's income decreased. This churn likely accounts for the decrease in children's CHP+ enrollment during the second, third, and fourth quarters.

The CE requirements of FFRCA caused very few Health First Colorado, and likely fewer than average CHP+, members to lose coverage starting in the second quarter of 2020. HCPF reports from the start of the PHE through December 1, 2020, 281,066 Health First Colorado and CHP+ members would have been disenrolled if not for the CE requirement, and an additional 54,580 members have been moved to a lower benefit category<sup>1</sup>

In addition, due to the CE requirement, HCPF did not disenroll the group of 35,000 members who were correctly determined ineligible in the Colorado Benefits Management System (CBMS), but not in interChange, the provider billing portal. This group was scheduled to be disenrolled on March 31, 2020, but will maintain coverage throughout the PHE due to the CE requirement.

#### Increase in Eligible Coloradans Due to Rise in Unemployment

Colorado's unemployment rate has risen significantly because of the economic effects of COVID-19. The state's unemployment rate was at its lowest in January and February 2020 at

<sup>&</sup>lt;sup>1</sup> Colorado Department of Health Care Policy and Financing, County Human Services Directors and HCPF Executive Director Quarterly Meeting, December 9, 2020 <a href="https://www.colorado.gov/pacific/sites/default/files/Director%20Bimestefer%20County%20Updates%2012">https://www.colorado.gov/pacific/sites/default/files/Director%20Bimestefer%20County%20Updates%2012</a> .9.2020.pdf

2.5 percent, reaching a high of 12.2 percent in April 2020, and ending the year at 8.4 percent in December 2020.<sup>2</sup>

While not all individuals filing for unemployment will be eligible for Health First Colorado or CHP+, this rise in unemployment has likely increased the number of Coloradans eligible for these programs.

#### Challenges in In-Person Application Assistance

Due to social distancing requirement, many organizations that offer application assistance for Health First Colorado and CHP+ did not offer in-person application assistance in mid-2020. While some organizations returned to offering in-person application assistance, some sites, especially those certified by Connect for Health Colorado, focused on remote-only assistance due to guidance from Connect for Health Colorado which enabled them to do so. Application assistance sites certified by HCPF had to navigate the remote enrollment assistance process with the need to meet the state's requirements for a 'wet signature.' A 'wet signature' is one written directly in ink by the applicant and does not include scanned copies or pictures of signatures. To accommodate these requirements, some sites set up drop boxes for clients to leave their signed application or a drive-by set up in which a client came by the site only for the purpose of signing the application. CKF's advocacy resulted in the publication of a Remote Application Assistance memo in January 2021, enabling assisters to collect verbal consent instead of a 'wet signature' on an application during the COVID-19 PHE .

#### Other existing policies that may have impacted enrollment include the following:

- Final Public Charge Rule: Changes to the public charge rule, which include Medicaid as a factor of declaring a lawful immigrant a 'public charge,' thereby impacting their ability to get a Green Card, have caused a 'chilling effect' on enrollment since it was first announced in in 2018. The final rule took effect in February 2020 after a series of court cases and appeals. Research from the Urban Institute found that 13.6 percent of adults in immigrant families reported that they or a family member avoided a noncash government benefit, such as Medicaid in 2020. This indicates that, despite rising need from COVID-19, many individuals may have chosen to not enroll themselves or family members in Health First Colorado or CHP+ in 2020.
- Returned Mail: In 2019, HCPF updated the process for returned mail received by county eligibility sites. This guidance required that eligibility sites attempt to contact members after one piece of returned mail, rather than three, as was the previous practice. If the member could not be reached their case would be closed and benefits would be terminated. While members could not be disenrolled due to returned mail beginning in March 2020, this policy likely increased the likelihood of eligible members losing coverage in January and February 2020.

Overall, the increase in Health First Colorado and CHP+ caseload can largely be attributed to the maintenance of coverage through CE for almost all existing members and the economic

<sup>&</sup>lt;sup>2</sup> U.S. Bureau of Labor Statistics, Local Area Unemployment Statistics, February 4, 2021 <a href="https://data.bls.gov/pdq/SurveyOutputServlet">https://data.bls.gov/pdq/SurveyOutputServlet</a>

impacts of COVID-19, through which many more Coloradans are becoming eligible for Medical Assistance for the first time.

# **Looking Forward**

The Biden Administration recently indicated to states that the PHE would likely be extended throughout all of 2021, maintaining the lock-into coverage throughout the year.<sup>3</sup> Due to this and lasting economic impacts from COVID-19, Health First Colorado enrollment may continue to grow, as more Coloradans join and very few disenroll. When the PHE ends, likely at the end of 2021 or beginning of 2022, it is estimated that roughly half of that locked-in population, currently around 300,000, will be disenrolled from coverage.

<sup>&</sup>lt;sup>3</sup> U.S. Department of Health and Human Services, Public Health Emergency Letter to Governors, January 22, 2021.

https://www.colorado.gov/pacific/sites/default/files/Public%20Health%20Emergency%20Message%20to%20Governors.pdf

## Appendix A

CHP+			2018	2019	2020
	Q1	Kids	11.6%	2.1%	1.4%
		Pregnant Adults	0.3%	16.7%	8.5%
		Total	11.4%	2.3%	1.5%
	Q2	Kids	-2.6%	-2.1%	-0.3%
		Pregnant Adults	-0.6%	-2.7%	-1.7%
		Total	-2.7%	-2.1%	-0.3%
	Q3	Kids	-2.6%	-2.5%	-6.5%
		Pregnant Adults	12.1%	-10.3%	-10.8%
		Total	-2.5%	-2.6%	-6.6%
	Q4	Kids	-0.4%	-3.6%	-7.5%
		Pregnant Adults	-4%	-7.2%	-8.4%
		Total	-0.5%	-3.7%	-7.5%
	Total Year	Kids	5.3%	-6.1%	-12.5%
		Pregnant Adults	1.5%	-5.5%	-12.8%
		Total	5.3%	-6.1%	-12.5%
Health First Colorado	Q1	Kids	-2.7%	-0.6%	-1.4%
		Pregnant Adults	1.1%	1.4%	2.4%
		Adults	-2.1%	-2.6%	-1.9%
		Total	-2.3%	-1.7%	-1.6%
	Q2	Kids	-0.7%	-1.2%	5.5%
		Pregnant Adults	29.3%	-0.4%	13.4%
		Adults	-0.9%	-1.7%	10.6%
		Total	-0.5%	-1.4%	8.3%
	Q3	Kids	0.1%	-1.2%	4.4%
		Pregnant Adults	-1.3%	-3.8%	7.2%
		Adults	0.4%	-0.6%	6.4%
		Total	0.2%	-0.9%	5.5%
	Q4	Kids	-2.3%	-0.6%	3.5%
		Pregnant Adults	-2.5%	-6.1%	6.4%
		Adults	-3.5%	-1%	6.4%
		Total	-3%	-0.9%	5.5%
		Kids	-5.5%	-3.6%	12.4%

	Total Year	Pregnant Adults	25.8%	-8.8%	32.6%
		Adults	-5.9%	-5.8%	22.8%
		Total	-5.4%	-4.8%	18.2%
CHP+ and Health First Colorado	Q1		-1.4%	-1.4%	-1.4%
	Q2		-0.6%	-1.5%	7.7%
	Q3		-0.1%	-1%	4.7%
	Q4		-2.8%	-1.1%	4.4%
	Year Total		-4.7%	-4.9%	16.1%