

maximus

Unwinding Medicaid Continuous Enrollment

In exchange for increased federal funding, states provided continuous enrollment to Medicaid beneficiaries during the pandemic – receiving over \$117 billion in enhanced federal funds across three years. Estimates show that more than 23 million people gained Medicaid coverage during this period.

Enhanced Medicaid funding began to be phased down in April 2023 as a result of the Consolidated Appropriations Act, 2023, which ended continuous enrollment. The Congressional Budget Office (CBO) estimates that federal financial assistance will decrease by 9 percent from fiscal year (FY) 2023 to FY 2024. As many as 17 to 24 million people will be disenrolled from Medicaid by the end of the 14-month process, during which states redetermine eligibility for all Medicaid and CHIP beneficiaries.



Return to regular operations with ease. We can help.

Even with the anticipated enrollment drop, state Medicaid spending will likely increase. Any increase will depend on how quickly people are disenrolled, how many new applicants qualify for Medicaid, and any changes affecting Medicaid spending per person, such as increased provider rates.

States face a daunting task, compounded by a significant personnel shortage. Half of all state Medicaid programs don't have enough staff to process redeterminations or manage vital call centers. Two-thirds of Medicaid enrollees reported that they don't know if their state is returning to regular Medicaid operations, reflecting the **need for consumer outreach, information, and education**.

As of July 5, 2023, 1.6 million Medicaid enrollees have been disenrolled, with 71 percent of all disenrollment due to procedural reasons.

States need a trusted partner to effectively complete the Medicaid unwinding process in compliance with federal requirements. Maximus is that partner.

Maximus is the largest conflict-free provider of services for government.

61%

of Medicaid and CHIP beneficiaries served across 20 states

30+

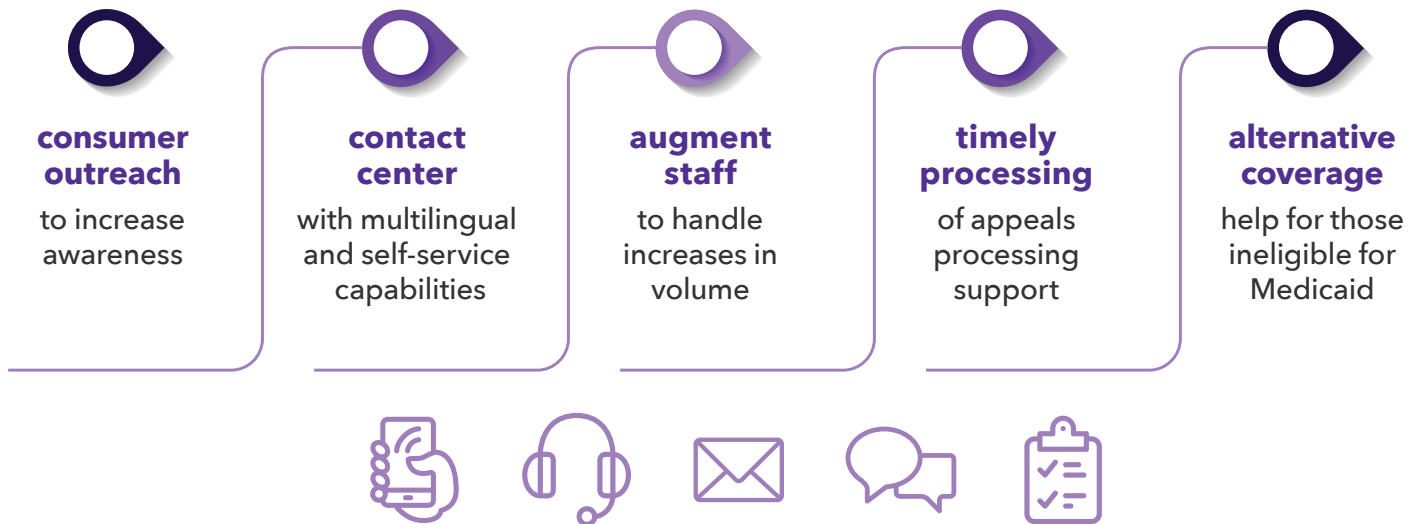
Years as a Qualified Independent Contractor for CMS

50+

Federal and state clients

Comprehensive support for resuming redeterminations

Successful redeterminations require distinct solutions at each phase of the process. We can provide insights and assets to support the full transition, streamlining the beneficiary journey every step of the way.



Data and analytics inform every step of the process

Maximus: an experienced, trusted partner

With more than 30 years of experience working with CMS and helping states administer Medicaid programs, we bring the depth, resources, and technology to help states and beneficiaries navigate each step of the redetermination process.

This includes consumer outreach and education, establishing efficient, onmi-channel call centers, updating

beneficiary information, eligibility and enrollment services, appeals and fair hearings processing – and helping families and children who no longer qualify for Medicaid seamlessly transition to alternative coverage.

Our work across health and human services programs enables us to address and support the complex needs of the individuals and families you serve, and to improve program operations for the long term.

Discover why we're a trusted partner to states, contact us at USServices@maximus.com.