



Unwinding the Maintenance of Effort Requirement at the end of the Public Health Emergency (PHE): The Role of Title V Programs

Content adapted from presentations given by Joan Alker and Allexa Gardner from the Georgetown Center for Children and Families, and Stacy Collins from AMCHP, at the Catalyst Center Financing Café on January 20, 2022.

What is the Maintenance of Effort (MOE) Requirement?

Under the Families First Coronavirus Response Act, state Medicaid programs are eligible to receive an additional 6.2 federal funding match provided they meet specific Maintenance of Effort requirements:

- Medicaid eligibility standards, methodologies, and procedures are no more restrictive than those in effect on January 1, 2020
- States cannot increase premiums above those in place on January 1, 2020
- States must cover COVID-19 testing and treatment services without cost sharing
- State Medicaid programs must provide continuous eligibility through the end of the month in which the PHE ends for those enrolled as of March 18, 2020, or at any time thereafter during the PHE period

How might the end of the PHE MOE requirement impact CYSHCN?

After the Public Health Emergency expires, states will need to redetermine the eligibility of over 80 million Medicaid enrollees, including an estimated 37.3 million children. An Urban Institute study estimates that 15 million people currently on Medicaid will no longer be eligible because their income has increased. Many children in families with increased incomes may now be eligible for CHIP, but it may be a complex process to transfer coverage between programs.

There is also concern that children and families may lose coverage for administrative reasons (e.g. returned mail) even if they might still be eligible for Medicaid. During the COVID-19 pandemic, many enrollees have lost housing or moved, resulting in out-of-date mailing lists.

What Can Title V Programs Do?



Serve as trusted messengers for families

- Educate families about the renewal process and communicate information on forthcoming changes and actions needed
- Ensure addresses and contact information are up to date and share information with Medicaid as state policy allows



Leverage relationships with Medicaid to elevate the needs of CYSHCN

- Encourage Medicaid to deprioritize children with disabilities for renewals, in order to allow for continuous coverage while redetermination burdens are high
- Reach out to Managed Care Organizations (MCOs) in your state now to serve as a bridge between MCOs and beneficiaries during the redetermination process



Partner with external stakeholders

- Coordinate with all state agencies that have a stake in this issue, such as departments of health, behavioral health, education, social services, child welfare, housing, and SNAP/WIC
- Capitalize on Title V's deep roots in the community by partnering with community-based organizations in developing awareness campaigns about upcoming Medicaid changes