

| Key Risk | Detail | DHHS Strategies to Mitigate the Risk |
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| <p>1. Inappropriate coverage loss</p> | <p>Even with good planning and preparation, when mistakes are made, members may lose coverage.</p> | <ul style="list-style-type: none"> ● Ensuring our unwinding plans are completed ● Increase our use of ex parte renewals ● Various (e)14 flexibilities to reduce churn ● Add resources (in needed) to ensure completion of ex parte ● Monitoring through a monthly MOE report and sampling of closed cases |
| <p>2. Contact information</p> | <p>Members have not kept their information current with DWS.</p> | <ul style="list-style-type: none"> ● Sent a flier in December 2021 to all members reminding them to update their contact information ● Email communication sent in September 2022 encouraging members to use their benefits while they are active and again asking for updated contact information. ● Added messages to update contact information to the Medicaid website and DWS myCase portal ● Created a Provider and Partner toolkit with standard messages for them to post on their social media or communications that go to members ● Contracted with Equifax to run contact information on our members that are being kept open during PHE. DWS updating any new address/contact information received ● (e)14 flexibility to accept in-state forwarding addresses from the United States Postal Service (USPS) without additional confirmation from the individual |

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| <p>3. Potential member confusion</p> | <p>Will consumers know about the steps and critical deadlines to retain coverage?</p> | <ul style="list-style-type: none"> ● Plan and timeline posted to unwinding webpage ● General notice (and other more specific notices) will be sent as quickly as possible post 60-day notice to inform members and posted to our webpage ● Communication tactics implemented: <ul style="list-style-type: none"> ○ Messaging shifts (keep info current, know review date, wait for your turn) ○ News release ○ myCase message ○ Email to members ○ Update website ○ Social media posts on DHHS channels/accounts ○ DWS and Medicaid IVR ○ MIB (Medicaid provider newsletter) ○ Talking points for Medicaid staff |
| <p>4. Coverage gaps</p> | <p>Individuals who are no longer eligible for Medicaid or CHIP</p> | <ul style="list-style-type: none"> ● Send closed members (not paperwork issues) to the Marketplace ● Enlist health plans to reach out to the members closing for paperwork reasons. (Cases reinstated back to closure for 3 months without a new application) ● DWS reviewing a monthly report watching for any cases closing before they should and reinstating those cases. |

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| 5. Workforce | Insufficient and over-burdened workforce to resolve pending E&E actions and complete routine work | <ul style="list-style-type: none"> ● Portability of workload (need to ensure we continue equalizing and monitoring workload for staff) ● Ensure full staffing is maintained during unwinding ● Leverage systems to reduce or eliminate work that can be automated ● Suspend other projects and support provided to other divisions within DWS ● Ensure adequate training for staff ● Offer targeted overtime if warranted |
| 6. Information sharing | Lack of timely information to conduct appropriate oversight and course correct as issues arise | <ul style="list-style-type: none"> ● Created an internal dashboard with weekly data ● Monthly external dashboard ● Initial operational daily standup meetings with involved agencies will determine appropriate meeting timing once a regular cadence is set ● Regular weekly agency leadership updates/meetings ● Required CMS data sharing |
| 7. Fair hearings | Inability to process fair hearings timely due to a high volume of requests | <ul style="list-style-type: none"> ● Timeframe extension and continued benefits for beneficiaries while allowing more time to take final administrative action (e)14 flexibility ● Expand informal resolution processes, using more experienced workers for the initial resolution process ● Redeploy state resources, possibly using UI hearing staff ● Engage internal and external stakeholders to increase beneficiary understanding, resolve cases before they need |

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| | | <p>an appeal, and reduce inappropriate denials that generate appeals</p> |
| <p>8. System readiness</p> | <p>System is ready and workarounds are known.</p> | <ul style="list-style-type: none"> ● Meet routinely with DTS to discuss the eREP system <ul style="list-style-type: none"> ○ Understand workarounds ○ Identify any efficiencies ○ Data collection occurs ● Non-reviewed or otherwise ineligible cases identified (flagged) ● Planned renewal distribution ● Finalize testing and defect list ● Control change requests for eREP |
| <p>9. Other events</p> | <p>What other planned or unplanned events may impact the unwinding?</p> <ul style="list-style-type: none"> ● PRISM launch - freeze of data transfer ● Move from Non-Traditional to Traditional coverage ● Mass mailing of Estate Recovery notices (Increase phone calls) ● Proposed new CMS rules ● Continuous enrollment changes ● Legislative session changes | <ul style="list-style-type: none"> ● Plan and prepare for each change as best we can to mitigate its disruption to the unwinding |