

# Federal Public Health Emergency Board Policy Discussion

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May 9, 2023

# Agenda

- **Introduction**
  - County Manager Ryan O'Connor
- **End of the Public Health Emergency (PHE)**
  - Public Health: Sara Hollie and Laura Andersen
- **Medical Assistance (MA) Unwinding**
  - Financial Assistance Services: Ali Ali and Kerri Staats
- **New Employee COVID-19 Proof of Vaccination Policy**
  - Human Resources: Annie Porbeni and Kristen Schultz

# End of the Public Health Emergency (PHE)

## Ramsey County Board – Public Health Policy Update

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May 9, 2023

## Objectives

- To review the COVID-19 timeline, impact, response, and where we are now.
- To review the impacts to local, state and federal response due to the end of the emergency.
- To provide context for demobilizing the Department's response to COVID-19.

## Public Health Emergency for COVID-19: Timeline

Secretary of the Department Health and Human Services declared the Public Health Emergency (PHE) in late January 2020

1st case identified in Ramsey County on March 5, 2020

Department initiated ICS on March 5, 2020

George Floyd was murdered during a police arrest on May 25, 2020 with protests and civil unrest beginning on May 26th and continuing for many months

Delta surge extended Public Health ICS in late summer/fall 2021

Omicron (most recent variant) identified in fall 2022, and Public Health continued response

President Biden signed legislation on April 10, 2023 to end the National Emergency for COVID-19 with the Federal Public Health Emergency ending on **May 11, 2023**

## Impact of COVID-19 in Ramsey County: 2020 to present

- Cases: 161,069
- Deaths: 1,576
- Covid had a significant impact on residents from racially and ethnically diverse communities in Ramsey County.
  - Black/African Americans represent 14% of all cases (12.4% of census)
  - Asian Americans represent 14% of all cases (13.6% of census)
  - Hispanic Americans represent 8% of all cases (7.3% of census)
  - American Indians represent 1% of all cases (.7% of census)

## Impact of the Public Health COVID-19 Response: 2020 to present

- Nearly every public health employee was deployed at some point during the response. During vaccine rollout, approximately 151 staff were deployed and provided more than 31,000 field hours.
- 78,008 doses were given at 680 clinics. An additional 8,084 doses were given by contracted partners, including our Trusted Messenger partners.
- 123 Partnerships were leveraged to provide vaccine, including community partners like churches, mosques, and recreation centers. The relationship between our Incident Management Team (IMT) group and RECERT lifted up additional sites for testing and vaccines.



# Final COVID-19 Situation Update: Where we are now

Ramsey County COVID-19 Case Dashboard

The current CDC COVID-19 Community Level is **LOW**. Community Levels are based on the proportion of hospital capacity devoted to caring for COVID-19 patients, the number of new patients with COVID-19 admitted to the hospital in the past week, and the number of new COVID-19 cases in the county in the past week.

This COVID-19 dashboard is created and published by [Saint Paul - Ramsey County Public Health](#), using data received from the Minnesota Department of Health and the CDC. Due to reporting delays, data for the last week are preliminary. Data is for cases that were tested and returned positive from a healthcare provider or community testing site. At-home test results are not counted by MDH. As of December 6, 2022, all data are updated weekly.

[Ramsey County COVID-19 Case Dashboard | Data | Ramsey County](#)



## End of the Public Health Emergency: Surveillance

- Death and case reporting will continue, along with wastewater monitoring.
  - Hospital reporting will end April 2024
  - Long term care reporting, likely December 2024
- Local and state dashboards will be maintained.
  - Public Health will end weekly written briefings for the County Board unless case rate increases to “high” community transmission

## End of the Public Health Emergency: Testing, Vaccine, Treatment

- **Testing will be less available.**
  - MDH will preserve some access to antigen testing for specific community populations, Department will continue to distribute upon request. Corrections will continue to test symptomatic/at-risk populations. Feds will sustain Increasing Community Access to Testing (ICATT) program, in coordination with chain pharmacies.
- **Vaccine will be offered on a seasonal basis, similar to flu.**
  - Clinic will continue to provide Covid-19 vaccine to uninsured and underinsured residents. Mobile clinics will be offered on a seasonal basis to all residents, with insurance captured for potential reimbursement.
- **Telehealth treatment will remain available.**

## End of the PHE: Department Operations on behalf of the County

- Departments will no longer be required to report cases to Public Health Incident Command; masks and tests will be available to employees while warehouse inventory is available.
- HR administers claims for Workers Compensation coverage.
- Guidance around isolation will be reduced to 7 days for healthcare and congregate settings (5 days for all other employees). In general, stay home when you are sick.

## End of the PHE: Department Operations on behalf of the County

- Public Health will continue to recommend masking for healthcare and congregate sites: 555, 402, 1919, Detox, Correctional Health
- Vaccination will be recommended by Public Health (Departments may implement specific policies around tracking vaccine status or requiring in specific settings).
- We await additional information from our federal partners regarding vaccine requirements for CMS facilities.
- Public Health will embed the response to COVID-19 into our ongoing emergency preparedness and response responsibilities.



# Thank you!!!



# Medical Assistance (MA) Unwinding

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May 9, 2023

## Topics of Discussion

- MA Unwinding – Background Summary
- Mitigations Strategies
- Challenges
- Unwinding Resources
- MA Unwinding Communications to Support Renewals - What's New?
- Current Ideas and Collaboration Opportunities
- Questions?

## Unwinding – Background Summary

- People enrolled in Medical Assistance and MinnesotaCare usually must have their eligibility reviewed once a year to see whether they remain eligible. This process is called a renewal.
- Renewals stopped during the pandemic. Like all states, Minnesota has maintained healthcare coverage for its Medicaid enrollees during the Covid-19 pandemic since March 2020.
- With the continuous coverage provisions in place, enrollment in Medical Assistance & MinnesotaCare has grown by greater than 30%, to more than 1.5 million Minnesotans. One in four residents living in the state now get their healthcare coverage through these public healthcare programs.
- On 12/29/2022 Congress signed The Consolidated Appropriations Act. This delinked the continuous coverage policies for healthcare programs from the Covid-19 Public Health Emergency.
- The new legislative changes require states to return to standard Medicaid eligibility procedures by April 1<sup>st</sup> 2023, which includes a renewal process.



## Healthcare Unwinding – continued

- The Centers for Medicare & Medicaid (CMS) has issued federal guidance outlining the expectations that states take all possible actions to maintain coverage for eligible individuals. States must conduct full eligibility reviews for most Medicaid enrollees before terminating coverage.
- The two state systems used for processing medical assistance programs, METS and MAXIS unfortunately do not have the system functionality needed to comply with the new federal guidance for processing.
- Therefore DHS developed, and CMS approved, several mitigations strategies to help Minnesotans keep coverage and secure another \$300 million in federal funds for the state during the resumption of renewals.

## Mitigations Strategies

- Additional ways to complete the renewal form, including by phone or by submitting documents online.
- A paper based renewal form for METS enrollees
- Renew coverage automatically for more MAXIS enrollees, allowing them to skip the paperwork and renew coverage for certain groups based on trusted data sources that show they continue to qualify.
- Check enrollees losing coverage for eligibility under other eligibility categories
- Return mail policies that require more than one modality to minimize unnecessary closures.

## Challenges

- Given the caseload growth, this represents a significantly larger volume of work that has ever occurred in the states public healthcare program history.
- Minnesota's public healthcare programs have a complex, paper based renewal process that workers must manually process.
- Many enrollees are likely to have moved, changed jobs or experienced other changes that must be considered in the renewal process.
- Enrollees who have gained coverage during the pandemic are unfamiliar with the renewal process.
- New workers have never processed renewals and its been about three years since experienced workers have processed renewals.

## Challenges - continued

- Trainings from DHS has been a slow roll out.
- Counties still have not received full policy and procedural guidance on several of the mitigation strategies.
- Staffing resources
- Working with out dated systems and technology

## Unwinding Resources

- The Legislature and Governor recognized that counties and tribes who process Medical Assistance (MA) eligibility need additional support as renewals resume with a \$36 million appropriation dedicated to this purpose.
- Of this appropriations, Ramsey County will receive a one-time payment of 4.6 million expected to be disbursed in early July.
- These funds can only be used for expenses that support MA renewals including implementation of renewal mitigation strategies.
- Some examples of how funds can be used are for addressing disparities, planning activities, hiring and training staff, overtime pay, supplies, equipment, enrollee outreach and communications, printing, postage and technology.

# MA Unwind – Communication Planning

## **1 in 3 Ramsey County residents are on Medical Assistance**

A team has been established to develop a communication strategy for Ramsey County with the MA unwind effort. This group is comprised of leaders from impacted areas, communications team, and project management. The main objective of this team will be to implement strategies to help people find out about the renewal and to complete the renewal process.

## MA Unwind – Laserfiche Workflow

**Be prepared to  
renew.**

Your health insurance needs to be renewed periodically. Avoid losing your Medical Assistance or MinnesotaCare by being prepared for your renewal.



<https://mn.gov/dhs/renewmycoverage/uploads/>

DHS went live on 4/26 with the functionality for residents to upload their health care renewals online via the DHS renew my coverage web page.

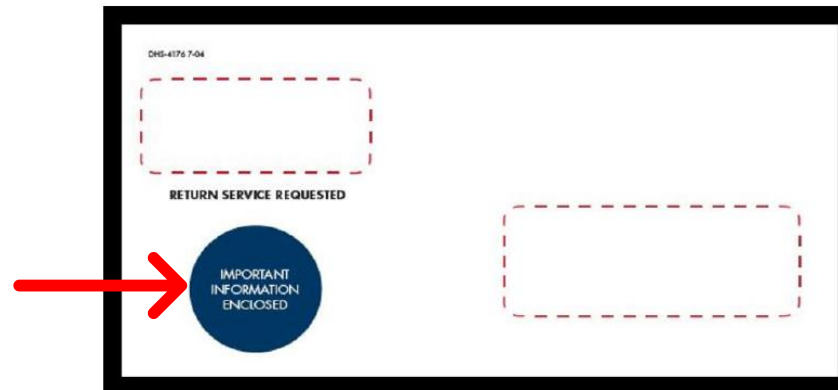
Our METS and Scan Center staff have been provided new queues in Laserfiche and a workflow that will automatically ingest these documents into Laserfiche. As part of the workflow, the METS team will complete a person search once a submission is received to identify if it is a METS or MAXIS health care renewal. The ECM team created a template that will route to the proper team based on the renewal type. In addition to the workflow, they have created a job aid for staff to support this change.

# MA Unwind – Stay Covered Campaign

## 1. Ask residents to update their address

DHS is promoting residents to call their county to update their contact information. Its a concern that residents will not received their renewal notices.

## 2. Encouraging residents to watch their mailboxes for their renewal notice



## 3. Educating residents on the impact of not taking action

We want to make sure that residents know they will have to take some steps to avoid losing their health insurance, which could prevent them from seeing their doctor or filling a prescription.



## MA Unwind – Communication Next Steps

- **Signage**
  - Review DHS communication toolkit and brand applicable signage for distribution to Ramsey County locations
  - Who do we work with when we want to include signage at county spaces that are resident facing? Library – Pang, Service Centers
- **FAS/METs new webpage on ramseycounty.us**
  - Create page specific to Health Care renewals (similar to what was done for MNbenefits)
    - Include images of notifications residents will receive from the state
    - Include document upload link <https://mn.gov/dhs/renewmycoverage/uploads/>
    - Include document links to frequently needed health care forms (see next slide)
    - Include YouTube video on how to submit a renewal from DHS
    - Apply online at [www.MNsure.com](http://www.MNsure.com)

## Current Ideas and Collaboration Opportunities

### Places to advertise change, educate and proactively promote taking action

- Public Health Clinic + other local clinics
- Service Centers
- Public Libraries
- St. Paul Opportunity Center (SPOC)
- Local Schools
- Public transportation – bus signage, light rail signage
- Local places of worship
- County and local shelters/locations unhoused residents (Union Gospel Mission, Loaves + Fishes, Drop in Centers)

### County Communication Methods / Platforms

- Social Media campaign
- FAS Webpage on ramseycounty.us website
- Call Center Greetings
- EZ Info
- Signage at all county locations
- Commissioners communication opportunities

# MA Unwind – Where to Find Information

## **Resident Resources**

<https://mn.gov/dhs/renewmycoverage/next-steps/>

<https://mn.gov/dhs/renewmycoverage/uploads/>

## **How to renew video by DHS**

<https://www.youtube.com/watch?v=KtuMg2098WE>

## **DHS Dashboard**

[https://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&dDocName=DHS16\\_190921&RevisionSelectionMethod=LatestReleased](https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&dDocName=DHS16_190921&RevisionSelectionMethod=LatestReleased)

## **County Staff Resources**

<https://mn.gov/dhs/renewmycoverage/communications-toolkits/>

# New Employee COVID-19 Proof of Vaccination Policy

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May 9, 2023

## Policy Changes

### Federal COVID-19 Emergency Declaration ends May 11, 2023

1. Remove the vaccination requirement for all other new hires.
2. Maintain vaccination requirement for employees who work in facilities funded by the Centers for Medicaid and Medicare Services (CMS) including; Detox, Lake Owasso Residence, Mental Health Center
  - Maintain Summit Health & Safety Module tracking for these staff
3. Remove the requirement that any employee who tests positive for COVID-19 inform their supervisor and COVID19HumanResources and PH-ICS-Incident-Commander emails.
  - Update HR Guidance for Exposure to COVID-19 & Leave Time materials on RamseyNet. Remove COVID-19 Preparedness Plan from RamseyNet.
4. Announce policy change on May 9, 2023 RamseyNews and to Senior Management Team.

# Policy Changes History

DATE	CHANGE	APPROVED BY
Nov 1, 2021	Original Policy	Kathy Hedin
Nov 16, 2022	Addition of 'remote-first' definition, change of approver and inclusion of elected officials	Ryan O'Connor
May 24, 2022	Self-administered rapid antigen tests added to testing options. Clarified that incentive pay ended 2/4/22	Ryan O'Connor
June 21, 2022	Update definition of 'fully vaccinated' and testing options	Elizabeth Tolzmann
August 26, 2022	Removed weekly testing requirement for staff who certified no to vaccination, did not certify or did not provide proof of vaccination	Elizabeth Tolzmann
May 11, 2023	<b>Removed vaccination requirement for staff who don't work in facilities subject to Center for Medicaid and Medicare Services (CMS) regulations. Remove the requirement that employees who test positive for COVID-19 inform their supervisor and the COVID19HumanResources and PH-ICS-Incident-Commander emails.</b>	<b>Annie Porbeni</b>

## Workers Compensation eligibility for COVID-19 transmission at work

Eligibility for Worker's Compensation benefits for COVID-19 infection require:

- Verifiable close exposure to a COVID-19 positive individual while working.
- Lab-processed test result because benefits will be paid and MN work comp statute requires medical verification

Otherwise, the employee must use available paid sick leave for time missed from work

**Questions?**