

Infographics on the Unwinding Provisions in the Consolidated Appropriations Act (CAA)

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February 2023

Congress passed the [Consolidated Appropriations Act](#) on December 23, 2023, an omnibus funding package that separates the Medicaid continuous coverage provision from the COVID-19 public health emergency (PHE), provides a fixed end date for the Medicaid continuous coverage guarantee of March 31, 2023, a gradual phase down of the [Families First Coronavirus Response Act \(FFCRA\)](#) enhanced federal match rate, and new guardrails to prioritize coverage retention and smooth coverage transitions during the “unwinding.”

The infographics below provide an overview of the key changes to the parameters for unwinding enacted by the CAA as well as an illustrative continuous coverage unwinding timeline under the CAA. The infographics are intended to help states communicate internally or with key stakeholders about the Medicaid continuous enrollment condition provisions in the CAA and can be downloaded to use in communications. The infographics are also available to download as a PowerPoint [here](#).

The infographics are updated as of February 2023 to reflect additional detail and operational expectations of states during the unwinding, as laid out in CMS’ January 2023 [State Health Official letter](#).

Consolidated Appropriations Act, 2023 (CAA) Changes to Unwinding Parameters

Section 5131 of the recently enacted CAA makes key changes to the parameters for unwinding that will ultimately support coverage retention for eligible individuals among states that are able to comply.



Decouples the Medicaid continuous coverage requirement from the end of the COVID-19 PHE, and sets a new statutory end date of March 31, 2023, enabling states to initiate renewals as early as February 1, 2023 (though states may not terminate Medicaid enrollment until April 1, 2023).



Provides for extended enhanced federal medical assistance percentage (eFMAP) to support unwinding during a nine-month phase-down from April 1, 2023, through December 31, 2023, and establishes conditions for claiming eFMAP.



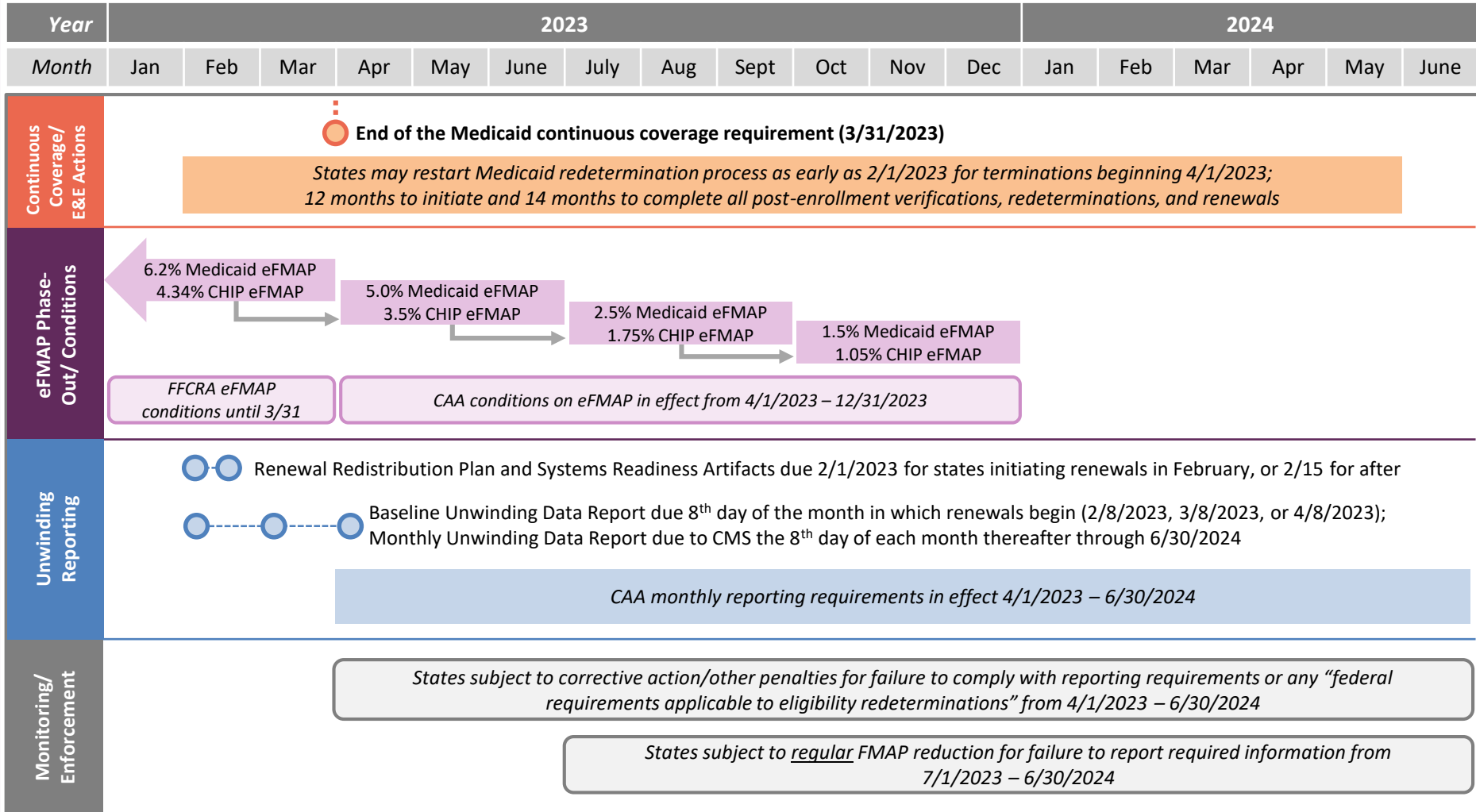
Institutes new Medicaid, CHIP, and marketplace reporting requirements to enable oversight of unwinding and improve transparency.



Gives CMS targeted enforcement powers to reduce states' *regular* FMAP, require corrective action, suspend procedural terminations, and impose civil monetary penalties as a result of non-compliance with federal renewal and CAA reporting requirements.

Source: [CAA Section 5131](#); CMCS Informational Bulletin, [Key Dates Related to the Medicaid Continuous Enrollment Condition Provisions in the CAA](#); SHVS, [Omnibus Unwinding Provisions and Implications for States](#); and National Association of State Medicaid Directors (NAMD), [NAMD Supports Redetermination Certainty in FY 2023 Omnibus Release](#).

Medicaid Continuous Coverage Timeline



Source: SHVS, Unwinding Provisions in the 2023 Consolidated Appropriations Act; and CMCS Informational Bulletin, [Key Dates Related to the Medicaid Continuous Enrollment Condition Provisions in the CAA](#).