

## 3 Tips to help someone who lost Medicaid coverage

Starting March 1, 2023, Utah will resume Medicaid eligibility reviews that were temporarily stopped during the pandemic. If someone loses their Medicaid coverage, here are 3 things you can do to help:



## 1. Encourage them to update their contact information so they don't miss important information or deadlines.

They should contact their health plan, DHHS, or DWS to update their contact information (like address, phone number, and email address).

Make sure they have the phone number and website:

DHHS HPR: 1-866-608-9422 DWS: 1-866-435-7414 jobs.utah.gov/mycase



## 2. Ask if they got a letter about their coverage status from DWS.

If not, have them check online (jobs. utah.gov/mycase) to find out their review date and when to expect a letter from DWS.

If they did get a letter, tell them to check it carefully for:

- Information about their Medicaid coverage status.
- A review form which they may need to fill out and send back to renew their coverage. If they get a review form, it's important they send it back by the deadline in the letter to avoid gaps in

Note: If the person lost coverage because they didn't return their review form, they may still be within the 90-day reconsideration period to restore their coverage. Tell them to send back the review form or other information the state needs right away.

Members who are no longer eligible with a known eligibility reason will be directly transferred to the federal Health Insurance Marketplace (healthcare.gov). There is currently an automatic process for this transfer to take place as long as a determination is made. The transfer will not occur if a case is closed for failing to complete or return paperwork.



## 3. Tell them about their other health coverage options if they no longer qualify for Medicaid.

People who lose Medicaid coverage may be able to get health coverage through the Health Insurance Marketplace (healthcare.gov).

- Most people qualify for savings on a health plan to lower their monthly premium and co-pays. Savings are based on their household income and size.
- All Marketplace plans cover things like prescription drugs, doctor visits, urgent care, hospital visits, and more.
- Visit: healthcare.gov/medicaidchip/transfer-to-marketplace/

