

How do I help someone who lost their Medicaid health insurance?

Make sure the person's information is up-to-date.

They can check online to make sure their information is correct in their myCase account at jobs.utah.gov/mycase or call any of the following to update their information:

- Their health plan
- The Department of Workforce Services (DWS) at 1-866-435-7414
- A health program representative at 1-866-608-9422

Tell the person to pay close attention to their myCase account, mail, and email.

DWS will update their myCase account and send them a letter or email after the case is reviewed. This letter will say **one** of the following:

- They still qualify for Medicaid health insurance.
- They **don't qualify** for Medicaid anymore. The letter will have steps they can take to get different health insurance.
- More information is needed to see if they still qualify for Medicaid. The letter will include forms for them to fill out and may ask for supporting documents (like paystubs, bank statements, etc.). They need to send these in as soon as they can— so they don't miss deadlines.

Help the person sign up for a different health insurance plan.

People who lose their Medicaid health insurance because they didn't return their paperwork, may still have 90 days to restore their coverage. Tell them to send back the review form or other paperwork that DWS needs right away.

People who do not qualify for Medicaid health insurance can still get coverage through the federal **Health Insurance Marketplace** or **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 size and income. All Marketplace plans cover things like prescription drugs, doctor visits, urgent care, hospital visits, and more.

People who lose Medicaid have 60 days to apply for health insurance on the Marketplace. Health insurance plans usually have an open enrollment period each year when people can sign up for health insurance. They only let someone sign up during open enrollment, unless they have a "qualifying life event". It is considered a "qualifying life event" if someone doesn't qualify for Medicaid anymore. This means people have **60 days after their Medicaid benefits end** to sign up for a new health insurance plan.

Visit healthcare.gov/medicaid-chip/transfer-to-marketplace/ for more information.

