

# **Unwinding Continuous Medicaid Eligibility**

frequently asked questions for members

# **Background Information:**

- If you or a family member have health insurance through Medicaid, you may soon need to take steps to find out if your coverage will continue.
- The Department of Workforce Services (DWS) will start Medicaid eligibility reviews on March 1, 2023. This means you or a family member could be disenrolled from Medicaid.
  - State staff will thoroughly review all cases, including yours, over the next year
    (12 months) to determine eligibility.
  - You will be contacted when your case is ready to review.
  - To know when to expect your review, you can ask DWS or check <u>myCase</u> to find out which month your case will be reviewed, after February 11, 2023.

#### What is the public health emergency (PHE) and how does it affect members?

- At the beginning of the COVID-19 pandemic, the federal government declared a public health emergency or PHE.
- During the PHE, state Medicaid agencies have been required to continue Medicaid coverage for all members, even if their eligibility changes.
- Utah Medicaid members have stayed enrolled during the PHE which has maintained important access to healthcare services during this challenging time.
- On December 23, 2022, Congress passed the FY 2023 Consolidated Appropriations Act. One part of this bill separated the federal PHE and Medicaid's continuous enrollment policy.
- This Act establishes April 1, 2023, as the end of the continuous enrollment requirement for Medicaid.
- The federal PHE will end on May 11, 2023, which will also end the <u>COVID-19</u> <u>Uninsured Coverage Medicaid program</u>.

# When is this happening and what do I need to do?

- On March 1, 2023 the Department of Workforce Services (DWS) will begin to review all Medicaid cases over the next 12 months. You will be assigned a review month.
- Your case will stay open until your scheduled review month. You can continue to use your benefits as normal until DWS completes your review.
- Here are some things you can do to prepare.



- If you moved recently or if any of your contact information like your phone number or email address has changed:
  - Call your health plan, DWS (1-866-435-7414) or a Health Program Representative (1-866-608-9422) to update your information.
- Pay close attention to your mail/email. After DWS reviews your Medicaid eligibility, they'll send you one of the following in the mail or in <u>myCase</u>:
  - A letter telling you your Medicaid coverage is renewed, or
  - A letter telling you that your Medicaid coverage is ending, or
  - A Medicaid review form asking you for more information to see if you or a family member still qualify for Medicaid.

#### How can I find my review date?

- After February 11, 2023, you can see your review date in myCase.
- You can also contact DWS Eligibility to find out your review date.

#### What do I need to do once I receive my Medicaid review?

- Your Medicaid review will have instructions on completing the information that is needed to review your case.
- Complete the review forms and submit them to DWS as soon as possible to help avoid gaps in your coverage.
- DWS eligibility may also require some supporting documentation in order to complete your review.

# Can I complete my Medicaid review early?

- Since DWS eligibility will need to review all Medicaid cases in the next year, we are asking members to wait until they receive their review before taking action.
- Medicaid cases will remain open until the scheduled review date for each member.
- You (or your family member) will continue to be covered by Medicaid until after DWS completes your review. You can continue to use your benefits as normal until then.

## Is there anything I can do to get my review completed faster?

 Sending in your supporting documents will help eligibility workers complete the review faster. If DWS eligibility needs more documentation, they will reach out to you.

#### I no longer live in Utah. What should I do?

• If you have moved out of state, please contact DWS to report that you no longer live in Utah.



### I would like to close my Medicaid case. Who do I contact?

• If you would like to close your case, contact DWS and request that your case be closed.

# What if I lose my Medicaid coverage?

- We want all eligible Utahns to get covered and stay covered. If you are no longer eligible for Medicaid, you will receive:
  - o Advanced notice of when your enrollment ends
  - o Information on how to appeal
  - o Information about options for purchasing other health care coverage
  - o A direct transfer to the <u>federal Health Insurance Marketplace</u>
- Members who are no longer eligible with a known eligibility reason will be directly transferred to the <u>federal Health Insurance Marketplace</u>. There is currently an automatic process for this transfer to take place as long as a determination is made (transfer will not occur when a case is closed for failing to complete or return paperwork).
- Losing Medicaid or CHIP coverage is a Qualifying Life Event, which allows you to enroll in a Marketplace plan outside of the Open Enrollment Period. Visit <u>HealthCare.gov</u> or call the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325) to get details about Marketplace coverage.
- If you need help applying for health insurance, <u>Take Care Utah</u>'s application assistors may be able to help. Call 211 to schedule a free appointment.

For more information, check the **Medicaid website** frequently.

# **Helpful contact information:**

Department of Workforce Services: 1-866-435-7414 or jobs.utah.gov/mycase

**DHHS Health Program Representative (HPR):** 1-866-608-9422

Federal Health Insurance Marketplace: 1-800-318-2596 (TTY: 1-855-889-4325) or

HealthCare.gov

Take Care Utah: 211 or takecareutah.org