

## Medicaid Redetermination Fact Sheet

Updated: 8/8/2023

### Overview

During the federal COVID-19 Public Health Emergency (PHE), many changes were made to the Medicaid program's eligibility, administration, and policies to prevent Medicaid beneficiaries from losing health insurance. As per recent legislation signed, Michigan will restart Medicaid eligibility renewals June 2023. [Click here to learn more about Medicaid assistance benefit changes.](#)

### What Health Centers Need to Know

#### Critical Points

- Monthly renewal notices will be sent three months prior to the beneficiary's renewal date (date visible in [MiBridges](#) and CHAMPS); renewal packets are mailed the month before the renewal date and must be returned within 30 days to maintain coverage if eligible
- Ineligible beneficiaries will lose coverage on the last day of their renewal month, beneficiaries with an outstanding renewal packet have an additional month before losing coverage

#### Summary or additional info

- Some individuals will not receive a renewal packet. Automatic or passive renewals are completed when MDHHS has enough current information available and beneficiaries will be notified
- Beneficiaries can apply for other forms of coverage (Marketplace, Medicare, Employer) **before** their last day of Medicaid coverage through Special Enrollment Periods

### What Health Centers can do

#### Right Now:

- Verify beneficiary eligibility prior to the appointment in CHAMPS (by front desk, providers, CHWs)
- Remind beneficiaries to verify or update their contact information, or report any changes, online through [MI Bridges](#) or through their local MDHHS office and to respond to mail from MDHHS
- Assist those who lose coverage with reapplication assistance or transition to new coverage

#### Prepare For:

- Outreach to patients to remind them that your health center will provide care regardless of healthcare coverage status and enrollment staff can help keep them connected to coverage
- Assisting those ineligible for Medicaid with accessing coverage through Special Enrollment Periods for [Marketplace](#), [Medicare](#), or [Employer-Sponsored Insurance](#)
- Assisting submitting renewal packet for those who missed their renewal date to reactivate their Medicaid, within 90 days of loss of coverage (retroactive coverage window)

#### Contacts:

Please list the contacts at your health center who can provide support in the following areas.

#### Medicaid and MI Bridges Support:

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#### Marketplace or Other Insurance Support:

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## Patient Outreach and Engagement:

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## Billing or Financial Support:

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## What MPCA Is Doing

### Right Now:

- Updating and sharing [Medicaid Redetermination Resources](#)
- Supporting with printing and distributing customized flyers and other outreach tools
- Sharing relevant training and webinar opportunities

### Prepare For:

- Updates on resources and tools available for health centers and other critical updates
- Distributing updated communication toolkits and resources
- Supporting MDHHS upcoming communication campaigns (including text blasts)

## FAQ

### What can Medicaid beneficiaries do right now?

- Update address, phone number, email address, household, and income are up to date online at [Michigan.gov/MIbridges](https://Michigan.gov/MIbridges) or by calling the local MDHHS office
- Fill it out, sign, and send the renewal packet by the due date (packets does not list the renewal month but will be send one month in advance of the renewal date) with any proof MDHHS needs
- Reach out to MDHHS if a beneficiary did not receive a renewal packet, some beneficiaries may be automatically renewed when MDHHS has enough current information (within the last 12 months) available in the eligibility system.
- If the beneficiary has an authorized representative that is listed in MI Bridges (*such as the health center CHW or Navigator*), MDHHS will send all mail including the eligibility renewal packet and notice of case action to the authorized representative.

### What if Medicaid coverage is lost?

- Beneficiaries will continue to receive Medicaid benefits until an eligibility renewal is completed
- MDHHS will send a notice when enrollment ends, information on [how to appeal](#), and information about options for purchasing other health care coverage.
- If still eligible, beneficiaries can appeal the decision and restore coverage within 90 days.
- Beneficiaries may qualify for a Special Enrollment Period to purchase healthcare coverage at [HealthCare.gov](https://HealthCare.gov).

## Resources & Links

### MDHHS

- [MDHHS Medicaid Redetermination FAQ](#)
- [MDHHS Stakeholder Toolkit](#)
- [MDHHS Eligibility Notification Timeline](#)

### MPCA

- [Medicaid Redetermination Resources](#)
- Contact Lindsey Schnell [lschnell@mpca.net](mailto:lschnell@mpca.net) for questions or to print additional materials