



The Medicaid Unwinding Recap & focus on SEPs

Montana Primary Care Association

Who Are We?

Montana Primary Care Association (MPCA) Membership

- 14 FQHC's
- 5 Urban Indian Health Centers
- Over 120,000 Montanans served by members
- Supports members in:
 - Quality/Data
 - Workforce
 - IBH/SUD
 - Social Needs

Cover MT/Cover Native MT

- Founded in 2014 for first enrollment period
- In-person Navigators
 - 7 across Montana
 - Collaborate with assisters at clinics throughout the state
- Helpline – 844 682-6837
- Website – www.covermt.org

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Agenda

Welcome

Chat introductions – name, role, organization

Medicaid Unwinding Highlights

Renewal timeline

Coverage transitions and Special Enrollment Periods

Apply.mt.gov account creation conversation



Medicaid Unwinding highlights:

Unwinding process begins in April 2023

Montana will take 10 months to complete all 315,000+ renewals

- Folks will be renewed at some point throughout the 10-month process --- we need ongoing public education and outreach.
- DPHHS is front loading MAGI cases in the first five months

Montana will end 12-month continuous eligibility at the same time the unwind begins

DPHHS will have a public-facing dashboard with unwinding data starting in May



Changes are Coming to Montana Medicaid/Healthy Montana Kids

[Medicaid/Healthy Montana Kids Members: Update Your Contact Info](#)

Make sure important information from Montana Medicaid reaches you! Don't risk losing your coverage. [Update your contact information here.](#)

Montana Medicaid will begin redeterminations of Medicaid coverage on April 1, 2023. Find out below how you can keep your Medicaid or find other insurance if you don't qualify anymore.

What Medicaid Members Need to Know



Additional Background and Information about Upcoming Montana Medicaid Changes



How Community Partners Can Help



Information for Healthcare Providers



FAQ



Sample Notices



Dear [NAME],

Why am I getting this letter?

This letter tells you about upcoming changes happening with Medicaid. DPHHS Office of Public Assistance is going to begin reviewing Medicaid and Healthy Montana Kids members' coverage in April 2023. You may need to take action.

What's happening?

Starting in April, DPHHS Office of Public Assistance will check to see if every Medicaid/HMK member is eligible to keep getting Medicaid/HMK. This process will happen throughout 2023. We will try to see if you are still eligible with the information we have. If we can confirm your eligibility, we will tell you that your coverage will continue. If we need more information to see if you still qualify, we will send you a renewal packet. You must complete the packet if you receive one by mail or email, or your coverage will end. Please make sure to use the contact information provided on the packet if you need to reach out to DPHHS. After you complete your packet, we will send you a notice that will tell you whether your Medicaid/HMK will continue or end.

What happens if I'm not eligible for Medicaid anymore?

There is no penalty if we determine you are no longer eligible for Medicaid. However, your Medicaid coverage will end. You may be eligible for other low-cost, quality health insurance through [HealthCare.gov](https://healthcare.gov) (the Health Insurance Marketplace). If DPHHS finds that you are not eligible for Medicaid, we will send your information to [HealthCare.gov](https://healthcare.gov). Contact Cover Montana for help signing up for insurance through [HealthCare.gov](https://healthcare.gov). They will connect you to free, confidential, and local help. Visit <https://covermt.org/> or call 1-844-682-6837.

What happens if I am still eligible for Medicaid?

If you are still eligible for Medicaid, you will remain eligible for up to 12 months or until there is a change in your case that makes you no longer eligible. For most adults receiving Medicaid, DPHHS will have to check if you still qualify for Medicaid each time we know of a change in your case. This includes changes in income or household size. We must check if you still qualify each time you report a change and each time our electronic database shows a change. We must end your coverage if you no longer qualify as a result of the change.

Report any changes in your household that might affect your eligibility for Medicaid. These include:

- Changes in your address
- If someone gets married or divorced
- If someone moves in or out, becomes pregnant, adopts a child, or any other changes in the people who live in your home
- If someone's income changes
- Change in third party insurance or employer sponsored coverage

Report these changes to DPHHS within 10 days of knowing them by calling us at 1-888-706-1535 or by going to apply.mt.gov.

What do I need to do?

Update your contact information - Make sure DPHHS has your current contact information so that you receive important notices. Check your mail – DPHHS Office of Public Assistance will mail you a letter about your Medicaid or HMK coverage. This letter will also tell you if you need to complete a packet to see if you still qualify for Medicaid or HMK. Complete your renewal packet (if you get one) - Go to apply.mt.gov, return the renewal packet by mail, or call us at 1-888-706-1535. You will have 30 days to complete this step. If you receive a packet, you must return it by the deadline, or your Medicaid/HMK will end.



Potential impact of the unwinding...

An estimated 15 million people are expected to lose coverage. Nearly half — 6.8 million — are anticipated to still be eligible for Medicaid, but may lose coverage for procedural reasons.

Source: Unwinding the Medicaid Continuous Enrollment Provision: Projected Enrollment Effects and Policy Approaches, ASPE, HHS



Who will lose coverage?

1. Those who need support in order to make it through the renewal process.

2. Those who are no longer eligible for Medicaid and need to transition to other coverage. There will be a short timeframe for those losing coverage to enroll in other coverage options.

Coverage transitions include: Employer sponsored coverage, the Health Insurance Marketplace (Healthcare.gov) (possibly through tribal premium sponsorship), Medicare, and more.



Draft slide of the unwinding timeline – final PDF coming soon!



Renewal Outcomes & Health Insurance Coverage Options

Medicaid/HMK Renewal Outcomes

Medicaid Eligible:
Coverage for up to 12 months if no changes in circumstances

Not Eligible:
Didn't provide all renewal information

Not Eligible:
Over age 65 and Eligible for **Medicare**

Not Eligible:
Over Income for Medicaid or Healthy Montana Kids

Health Insurance Coverage Options

Submit renewal within 90 days.
If approved, some Medicaid coverage is retroactive and you won't have a gap in coverage.

Enroll in Medicare:
Loss of Medicaid triggers a Special Enrollment Period to enroll in Medicare.

Enroll in Employer Coverage:
Loss of Medicaid or HMK triggers a 60-day special enrollment period. Ask your employer about how to apply.

Enroll at Healthcare.gov:
Loss of Medicaid or HMK triggers a special enrollment period.

Sign up *before* your Medicaid/HMK coverage ends to avoid a gap in coverage!



Need help with Medicare?

Contact a Montana SHIP counselor for free help: 1-800-551-3191

Need help making sense of your renewal?

Need to enroll through Healthcare.gov or in an employer plan?

Cover Montana can help. Learn more and find local help at covermt.org or contact our Help Line at (844) 682-6837

Medicare SEP

Special Enrollment Periods for Part A & Part B

| If you: | Your Special Enrollment Period: | How to sign up: |
|--|--|---|
| Lost Medicaid coverage on or after 1/1/2023 Download more information about your Medicare options if you lose Medicaid. [PDF, 446 KB] | Starts: The day you're notified that your Medicaid coverage is ending. Ends: 6 months after your Medicaid coverage ends. Coverage begins: The month after you sign up, or the date your Medicaid coverage ends, whichever you choose. | Fill out form CMS-10797 and send the completed form to your local Social Security office by fax or mail. Download Form |

Source: <https://www.medicare.gov/basics/get-started-with-medicare/sign-up/when-does-medicare-coverage-start#SEP>.



Employer-Sponsored Coverage SEP

Q: I just received a notice that my Medicaid benefits were terminated, but I missed the open enrollment period for my employer's health plan. What can I do?

A: Under federal law, your employer must provide you with up to 60 days after your loss of Medicaid eligibility to enroll in your employer's group plan. Your employer should ensure that your enrollment in the group plan begins no later than the first day of the month following your request for a special enrollment opportunity. ([Children's Health Insurance Program Reauthorization Act of 2009, Pub. L. No. 111-3](#))

<https://www.healthcare.gov/downloads/employer-coverage-tool.pdf>



NEW Marketplace SEP

New SEP that is open through July 31, 2024

CMS has updated existing functionality to grant the Unwinding Special Enrollment Period (SEP) to Marketplace-eligible consumers who submit a new application or update an existing application and attest that they have lost Medicaid or CHIP coverage between March 31, 2023, and July 31, 2024, and attest that they have lost Medicaid or CHIP coverage during the same time period.



How can we prepare:

Make sure the OPA has the most up-to-date contact information for all patients enrolled in Medicaid and Healthy MT Kids – simple contact form

Help patients create accounts in apply.mt.gov and sign up to receive notices via email – we'll discuss in a minute

Talk to our community partners about who can able to help answer renewal questions, who can help folks transition from Medicaid to other coverage, and who can help enroll in Medicare.



Information for providers

There are new provider notices at medicaidprovider.mt.gov/covid19.

Passport to Health webinar –
April 10th, 11am

COVID-19 Provider Resources

Providers caring for Montana Healthcare Program members during this challenging time are especially appreciated.

The buttons below provide quick access to provider resources. Below the buttons are Montana Healthcare Programs provider policy and procedure notices specific to COVID-19 impact including coverage, telemedicine/telehealth, available funding, and testing.

[State of Montana COVID-19 General Resources](#)

[Montana DPHHS COVID-19 Resources](#)

In response to COVID-19, the following provider notices have been issued:

03/22/2023 [Changes to Youth Community Based Psychiatric Rehabilitation and Support \(CBPRS\) Services](#)

03/22/2023 [Coverage and Reimbursement Policy for Telemedicine/Telehealth Services](#)

03/22/2023 [End of Public Health Emergency \(PHE\) Effects on Pharmacy Coverage](#)

03/22/2023 [Non-Covered Services Agreement Policy Return to Requirements](#)

03/22/2023 [Reinstatement of the Primary Care Provider Referral for Passport](#)

03/22/2023 [Resumption of Face-to-Face Requirements for Selected Programs](#)

03/22/2023 [Resumption of Prior Authorization Requirements](#)

03/22/2023 [DDP 0208 Comprehensive Waiver, Applied Behavior Analysis, and Targeted Case Management Updates](#)

03/17/2023 [End of Temporary Revision to Case Management General Provisions](#)

03/10/2023 [Provider Meetings for Medicaid Eligibility Redetermination and Unwinding PHE Flexibilities](#)

03/03/2023 [End of Public Health Emergency](#)

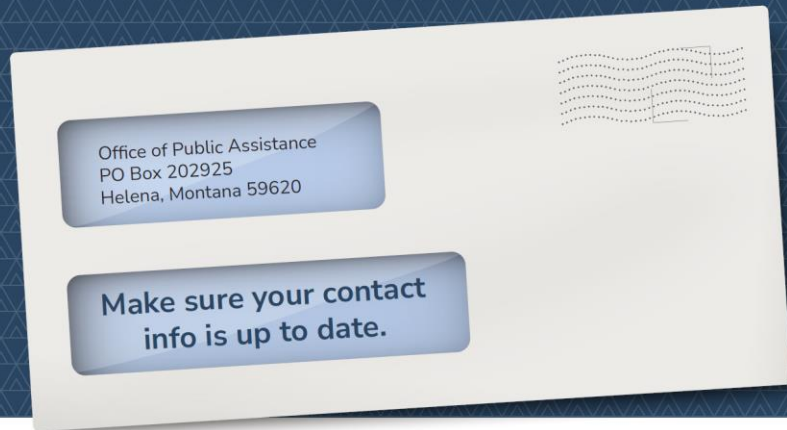


We still have materials if you need them!

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Montana Kids

 **COVER MONTANA**
(844) 682-6837 | covermt.org

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Don't risk losing your coverage.
Update your contact information.

Make sure Medicaid and Healthy Montana Kids
has your current contact info. It is fast and easy.
Visit <https://bit.ly/dphhsform> or call 1-844-682-6837.

Need help?

Cover Montana can help you update your contact information and answer questions about upcoming changes to Medicaid. Call (844) 682-6837 or find local, in-person enrollment help at www.covermt.org/help



COVER MONTANA
CONNECTING YOU TO HEALTH INSURANCE COVERAGE

(844) 682-6837
covermt.org



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Apply.mt.gov & the unwind

