



Michigan Medicaid Redetermination

What is Medicaid Redetermination?

Medicaid redetermination is the process that states use to ensure that Medicaid enrollees continue to be eligible for Medicaid coverage. Typically, redetermination happens once a year; however, the rules changed during the pandemic. During the COVID-19 public health emergency, the federal government paused Medicaid redetermination. Renewals were not required during this time, and enrollees could not lose their health coverage.

Why is this happening now?

Due to a proposal in the Consolidated Appropriations Act of 2023 passed by Congress, states may resume the process of redetermining individuals' Medicaid eligibility beginning April 1, 2023.

What does this mean?

For the first time in three years, Medicaid recipients in Michigan must reapply for coverage starting April 1, or risk losing their coverage. The Michigan Department of Health and Human Services (MDHHS) resumed conducting the annual renewal process on April 1 and notifications have started being sent to enrollees.

Who is affected?

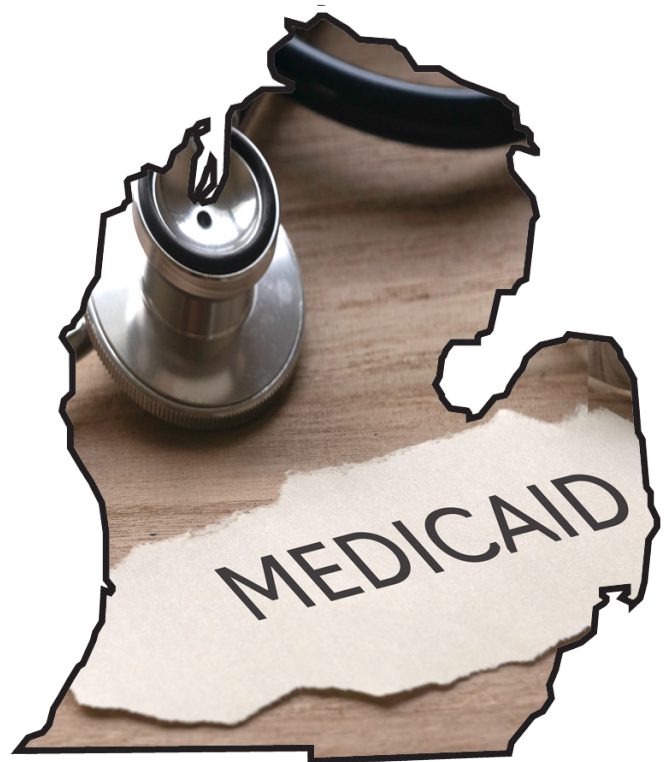
3.17 million Michiganders

Where are we at now in this process?

Spreading the word to ensure beneficiaries are informed of the change and ensure their mailing address and phone number is up to date with MDHHS. Beneficiaries can visit MDHHS at www.michigan.gov/mdhhs/end-phe/status for updates.

What is Meridian doing?

Meridian is working closely with MDHHS to smoothly transition those that may lose Medicaid coverage. Meridian is aligned with the Department's goal to ensure as many Michiganders are insured and has offered Ambetter as a safe landing for qualified members.





Michigan Medicaid Redetermination (continued)

What can you do?

If you get questions from constituents or know someone who may be affected by Medicaid redetermination:

- Remind them to make sure their address, phone number, and email address are up to the date. Recipients must also report any changes to their household or income. The best way to update this information is online at Michigan.gov/MIBridges. They can also call their local MDHHS office. Visit the MDHHS County Office webpage to find local office information.
- If a qualified Medicaid recipient changed their contact information, they should also contact Meridian after reporting the change to the State to ensure that we can keep in contact. Beneficiaries can contact Meridian's Member Services at 888-437-0606 (TTY: 711).
- Recipients should check mail or text messages received from MDHHS. If an eligibility renewal packet is received, complete it immediately and send it back to MDHHS.
- Beneficiaries can check their renewal month at newmibridges.michigan.gov. From June 2023-May 2024, people will get notification on a rolling basis about their three-month window to apply.



For example, take Joe. His renewal month is **June 2023**. Joe will get a letter in **March** informing him about the need to reapply for Medicaid. In **May**, Joe will get a renewal packet in the mail. Joe will have to submit the paperwork before the deadline in **June** to keep his coverage.



Did You Know?

Centene's Ambetter plan is America's #1 ACA Marketplace insurer. Michigan residents seeking ACA coverage can find affordable, comprehensive coverage from the same company offering Meridian's Medicaid coverage. To enroll or learn more about Ambetter from Meridian, citizens can start here: ambettermeridian.com