

WHAT COMMUNITY PARTNERS NEED TO KNOW ABOUT UPCOMING MEDICAID CHANGES



What happened with Montana Medicaid eligibility during the COVID-19 public health emergency?

A public health emergency (PHE) was declared in March 2020 in response to the COVID-19 pandemic. Montana’s Department of Public Health and Human Services (DPHHS) adjusted its eligibility processes for Montana’s Medicaid and Healthy Montana Kids (HMK) programs so individuals would keep their healthcare coverage during the emergency – called the continuous enrollment requirement. The changes to eligibility processes included:

- suspending the annual renewal process of checking if individuals qualified for continued healthcare coverage;
- not processing reported/discovered changes in circumstances (such as changes in income or household size) that would normally cause an individual to lose coverage; and
- not ending an individual’s coverage unless the individual requested it or moved out of state.

WHAT IS CHANGING?

Resumption of normal eligibility processes and requirements:

DPHHS will resume processing annual renewals and changes in Medicaid/HMK members’ circumstances and adjusting members’ coverage as appropriate when notification that the PHE has ended is received. If DPHHS finds that an individual is no longer eligible for Medicaid/HMK coverage, DPHHS will send them a notice telling them their coverage will end and provide information on how to pursue coverage through HealthCare.gov, the federal Health Insurance Marketplace.

What is the impact?

Some individuals will need to take action to keep their coverage

As DPHHS begins processing renewals, some individuals’ coverage will be able to be renewed through an automated process. Those individuals will receive a letter from DPHHS telling them they are eligible for continued coverage.

Individuals whose coverage cannot be renewed by the automated process will receive a renewal packet in the mail. *It is imperative that individuals respond and complete their renewal.* Individuals who receive a renewal packet *must* take one of these actions – call, go online, or return the mailed packet – to complete their renewal. *If the individual does not complete their renewal, their healthcare coverage will end.* Households will have a minimum of 30 days to return their renewal packet. DPHHS will send a follow up reminder notice and text message to encourage as many members to complete the renewal process as possible.

The best way for an individual to complete a renewal is online at apply.mt.gov or by calling the Public Assistance Helpline at 1-888-706-1535. Completing the renewal online or over the phone allows the individual to apply for or to recertify their SNAP or TANF benefits at the same time. If the individual renews by mailing or faxing the packet back to DPHHS, they must report any changes on the form and must sign and date it.

DPHHS expects to complete renewals for all Medicaid/HMK members within 10 months of resuming processing.

WHAT IS CHANGING?

Elimination of 12-month continuous eligibility for adults:

Since the start of Medicaid expansion in 2016, Montana's Medicaid program has had a policy of 12-month continuous eligibility for most adults receiving healthcare coverage. This meant that while individuals were required to report any changes that might affect their eligibility within 10 days of knowing about the change, in most cases, their Medicaid coverage continued regardless of those changes for 12 months.

The 2021 Montana Legislature passed a budget that removed funding for 12-month continuous eligibility for most adults on Medicaid and directed DPHHS to end the policy. This change impacts adults covered by Medicaid Expansion as well as adults covered through the Parent/Caretaker Relative category of eligibility. DPHHS is now required to assess whether these individuals remain eligible for coverage each time DPHHS becomes aware of a change in their case, and to discontinue their coverage if they are no longer eligible.

What is the impact?

Potential loss of coverage

If individuals report a change or DPHHS discovers a change through database checks, and DPHHS finds they are no longer eligible for healthcare coverage, DPHHS will notify them that their enrollment will be ending. DPHHS will send their information to HealthCare.gov, which will check to see if they qualify for other reduced-cost health insurance.

If the individual does not have any changes that affect eligibility, coverage will continue for up to one year, at which time another eligibility determination will occur.

This change does not impact children covered by Medicaid or Healthy Montana Kids or the small number of adults with Severe Disabling Mental Illness covered by Medicaid. These groups will maintain 12-month continuous eligibility, so in most instances a reported change will not impact their healthcare coverage until their renewal.

HOW CAN COMMUNITY PARTNERS HELP?

- Spread the word about the importance of individuals updating their contact information with Medicaid. DPHHS will be sending important mail, and Medicaid/HMK members need to make sure DPHHS has their current address, phone number and email. Updates to contact information can be made by doing any of the following:
 - Complete a change of address form online at: apply.mt.gov. At apply.mt.gov, individuals can also create an online account. An online account allows individuals to not only update their contact information, but also receive correspondence and renew their coverage when it's time.
 - Call the Public Assistance Helpline at 1-888-706-1535
 - Mail a letter to: DPHHS, PO Box 202925, Helena, MT 59620-2925
 - Fax a letter to 1-877-418-4533
 - Go to the local Office of Public Assistance
- Answer basic questions from individuals with Medicaid/HMK about what they need to do.
- Encourage individuals with Medicaid/HMK to complete their renewal or requests for additional information by going to apply.mt.gov or calling the Montana Public Assistance Helpline at 1-888-706-1535.
- Refer individuals who need help navigating the Medicaid renewal process or finding other healthcare coverage to **Cover Montana** at <https://covermt.org/> or **(844) 682-6837**. Cover Montana will connect them with free, confidential, and local help with healthcare coverage.
- Urge anyone who loses their Montana Medicaid/HMK to apply for insurance through HealthCare.gov immediately so they do not have a gap in coverage. Refer them to Cover Montana for individual, one-on-one assistance. You can also direct them to visit HealthCare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325).