

Issue 96: INSIDER'S EDGE: Medicaid Renewals in Maryland Health Connection

Winter Storm Juno may have largely missed Maryland, but a flurry of Medicaid renewal letters is hitting mailboxes across the state this week! There are a few things to keep in mind to ensure you're prepared!



Are you ready? With 95,000 letters going out in January, an increase in questions from consumers is definitely in the forecast!

The Basics

Medicaid recipients must renew their eligibility once every 12 months. This process is also known as getting a “redetermination.” Moving forward, all applicants that qualify based on MAGI (modified adjusted gross income) must renew their benefits through Maryland Health Connection. Recipients who must renew their eligibility through Maryland Health Connection will receive a letter in the mail with instructions on how to renew their benefits.

Information on the renewal process has been posted on the Department of Health and Mental Hygiene (DHMH) and Maryland Health Connection websites for consumers. Please take a couple of minutes to review the Renewals Overview and the Renewal Frequently Asked Questions.

- **Renewals Overview:** <https://www.marylandhealthconnection.gov/assets/MedicaidRenewals2015.pdf>
- **Maryland Health Connection:** <https://www.marylandhealthconnection.gov/medicaid-basics-benefits/#renew>
- **DHMH:** <https://mmcp.dhmh.maryland.gov/SitePages/Medicaid%20Renewals.aspx>

The Fine Print: Consumers **MUST Answer the “Special Enrollment” Questions**

Recipients renewing their Medicaid benefits must complete **all** questions in the “Special Enrollment” section of the application. They should indicate that all household members will lose health insurance within the next 60 days and provide the coverage end date that is stated on the renewal notice.

Why? If a person is no longer eligible for Medicaid when they try to renew their benefits outside open enrollment, losing Medicaid coverage will qualify them for a special enrollment period. They will be able to get coverage through a Qualified Health Plan (QHP) and may qualify for cost-sharing reductions (CSR) and advanced premium tax credits (APTC). Consumers who don't answer the “Special Enrollment” questions may miss out on this valuable opportunity to get coverage.

Additional information will be shared with consumer assistance workers regarding the workaround process for resolving problems if a consumer forgets to answer these questions.

To learn more about the types of events that trigger a special enrollment period, see *Issue 60: INSIDER'S EDGE: Special Enrollment Periods and Other Life Changes*.

Hot Tip: Spotting Cases in MMIS

Not sure if a case is closing in MMIS due to outstanding verifications the individuals has yet to return or because the individual is up for renewal?

Households up for renewal in January will have a 3/31/15 end date in MMIS with a cancel code of 235 (failed to reapply). When the recipients receive a new eligibility determination in Maryland Health Connection, their case will be re-opened in MMIS.

One More Thing: Reporting Changes

Moving forward, all changes reported by Medicaid beneficiaries who qualify on the basis of MAGI must be processed using Maryland Health Connection. This includes changes in address or income. Consumers who have never used the new HBX system since it launched in November 2014 will need to create an account and essentially re-apply for benefits to report changes.

Stay warm out there, Insiders! I'll be back next week with another update. Questions in the meantime? Send them to dhmh.medicaidmarge@maryland.gov.