

For more information on all of these topics, see the full <u>National Medicaid Renewal Toolkit</u> on the Homebase website

Background

After a 3-year pause due to COVID-19, Medicaid is back to requiring people to renew their coverage every year. Medicaid provides health care coverage to low-income households. From July 2023 to September 2024, it is estimated that <u>at least 15 million</u> current Medicaid members will lose coverage, including **almost 7 million members who may still be eligible** but may lose coverage because they did not renew on time or did not receive their renewal packet.

Many people experiencing homelessness are likely eligible for or already enrolled in Medicaid. It is a vital safety net for unhoused people, particularly as more states are <u>exploring waivers</u> that allow Medicaid to provide resources that address the social drivers of health, including housing services and supports.

People experiencing homelessness are more at risk of losing Medicaid coverage, as members receive their renewal packets at their last known mailing address. Most people experiencing homelessness may not have a mailing address or their mailing address has changed in the past three years. They may not receive notice of the upcoming renewal requirements, and they may not discover they have lost health coverage until they go to a medical appointment.

Navigating the Renewal Process

Every year, federal law requires that most Medicaid members prove that they still qualify for health coverage by sharing updated information about their income, changes in family circumstances, etc. Each Medicaid member has a different renewal date based on when they first enrolled or had a renewal of eligibility. Renewals can happen automatically or manually:

(also known as <u>ex parte renewals</u>)

States are required to try to automatically renew a Medicaid member's coverage based on information that the state and/or county have about the individual and household (including through electronic data sources).

With automatic renewals, a member isn't required to return a form or take any action to maintain their Medicaid coverage. Instead of a renewal form, a member will get a letter from Medicaid saying that they have coverage for another year. Many states have also pursued strategies that will make more people experiencing homelessness eligible for automatic or streamlined renewals. For example, if clients have \$0 or are very low-income (100% of the federal poverty level or lower), many states can renew their Medicaid without needing a completed renewal packet.

Check <u>here</u> to learn more about these waivers, and please see the tool on page 8, "<u>How to Help Your Clients</u> <u>Experiencing Homelessness Keep their Medicaid</u>," for details on how to learn if your state has adopted one of these waivers.

Manual Renewals

When Medicaid can't verify member information through the ex parte process, the member must go through a manual renewal process. Members receive a renewal packet in the mail, usually 1-2 months before their renewal date. The process requires the individual to return the renewal information and sometimes share specific documents that serve as proof about themselves and/ or members of their household (e.g., pay stubs to prove income). They should be sure to return the information by the deadline included in the state or county request.

There are 4 ways to submit manual renewals:



In-person at the client's Medicaid office



On a telephone call with Medicaid



Online (find your state's portal on the <u>Medicaid website</u>)



Mail in a completed renewal form



You Can Help Your Clients Keep their Medicaid

- Help your clients update their contact information (cell, mail, email, etc.) with Medicaid so they receive renewal notices and packets.
- Find out if your client is on Medicaid and what their renewal due date is so they're prepared.
- Identify mailing options for clients at your office/facility or elsewhere.
- Forge relationships with health navigators, Medicaid application assisters, legal services staff, or providers from large social services organizations who are experts in helping people learn about, renew, or apply for Medicaid.
- Learn if your state has pursued any of the waivers designed to streamline the process for people experiencing homelessness. If so, advocate for clients to have an expedited renewal.
- Prepare your clients to access their personal documents, if needed for the renewal process.
- Help your clients start an online Medicaid account or, if they already have one, use it to complete the renewal process.
- Call the Medicaid office (with your client present or on a 3-way call) or visit the office with your client. Note that wait times can be long.
- Help your client complete a blank Medicaid renewal form and mail it.

If your client has an issue or loses their Medicaid

- In many states, clients can still submit their renewal form or missing information to their Medicaid office up to 90 days after their Medicaid is terminated (known as the "90-day reconsideration period").
- If clients think their Medicaid ended in error, they can ask their state or county for a Medicaid Fair Hearing.
- Contact your local legal aid partner for legal services.
- Re-apply for health care through the state's Medicaid site or <u>Healthcare.gov</u>.

Key resources

- <u>The National Medicaid Renewal Toolkit</u> to assist people experiencing homelessness to keep their health coverage.
- Find your state's Medicaid information <u>here</u>; it will direct members how and where to apply for and renew Medicaid, update their information, and more. Many states have created tools to raise awareness about renewals and guide members through the process. Members will also be able to access or sign up for an online portal there.
- Learn more about the waivers states are using to streamline the renewal process <u>here</u>, and please see the tool on page 8, "<u>How to Help Your Clients Experiencing Homelessness Keep their</u> <u>Medicaid</u>," for details on how to learn if your state has adopted one of these waivers.
- Review <u>federal guidance</u> on Medicaid renewals from the Centers for Medicare and Medicaid Services.