



STATE OF MICHIGAN

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GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

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## **Michigan continues to make progress in preserving Medicaid coverage for residents**

LANSING, Mich. – The Michigan Department of Health and Human Services (MDHHS) today announced it has renewed Medicaid enrollment for more than 121,000 people whose eligibility was up for redetermination in July.

The number of renewals demonstrates the success of the department's efforts to make sure Michiganders who receive health insurance coverage from Medicaid and the Healthy Michigan Plan are aware of the need to fill out enrollment paperwork.

"Our staff and valued partners continue to do all that we can to preserve Medicaid coverage for Michigan families," said MDHHS Director Elizabeth Hertel. "I am pleased that our partners from other state government agencies are helping MDHHS get the word out to Medicaid beneficiaries that it's important for them to submit their renewal paperwork."

Today has been declared a Day of Action, with State of Michigan government departments committing to share messaging about Medicaid renewals on communication channels such as social media to continue the flow of information regarding the Medicaid eligibility renewal process.

The latest data on Medicaid renewals can be found [on MDHHS' online dashboard](#). Redetermination of Medicaid coverage restarted this year due to federal legislation after being paused during the COVID-19 pandemic. Medicaid and Healthy Michigan Plan beneficiaries must renew their coverage over the next year to comply with the federal legislation. In Michigan annual renewals are being staggered to take place monthly starting in June 2023 and running through May 2024.

The dashboard shows current data on renewals for June and July, which will change as the department processes additional forms. MDHHS has until the end of August to receive renewal forms from the July cohort to determine eligibility. The federal Centers for Medicare & Medicaid Services allowed Michigan and other states to take new actions to preserve Medicaid coverage. As a result, MDHHS gave enrollees an extra month to submit renewal forms.

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The dashboard – which will be updated every month – shows that as of Aug. 7, MDHHS had renewed Medicaid or Healthy Michigan plan coverage for 121,217 people who were up for renewal in July. So far, including June renewals, 224,757 people have been renewed. The department is awaiting completed enrollment forms from another 123,744 people who were up for renewal in July and have until the end of August to return their paperwork.

There were 9,121 people who were disenrolled in July because they were no longer eligible and 1,779 whose eligibility was not renewed for procedural reasons – such as not providing requested verification documents like driver’s license, pay stubs and bank statements.

MDHHS is continuing to review, analyze and update its data for Medicaid beneficiaries who were up for renewal in June due to the extension of procedural terminations to the end of July.

Additional MDHHS efforts to help Michiganders keep their coverage are possible as a result of the federal government releasing new flexibilities and strategies in June to state officials to lessen the impact of the resumption of Medicaid renewals.

Michigan has been a leader in using these flexibilities, as the state has been recognized for its efforts by the U.S. Digital Service as MDHHS has gained approval of eight federal waivers that are needed to implement additional strategies for renewing coverage and has submitted two other requests that are being considered.

Strategies being used by Michigan include:

- Allowing managed care plans to assist enrollees they serve in completing and submitting their Medicaid renewal forms.
- Sharing lists with managed care organizations of their enrollees who are due for renewal or have not responded to provide outreach to those beneficiaries.
- Reinstating eligibility back to the termination date for people who were disenrolled based on a procedural reason – such as not returning renewal forms on time – and are subsequently found to be eligible for Medicaid during a 90-day reconsideration period.
- Renewing people passively – or automatically – when MDHHS has enough current information available on that person in its eligibility system so that the department doesn’t need to receive additional proof from the beneficiary.

State government agencies – including MDHHS – are reminding parents whose Medicaid benefits are up for renewal to return paperwork as soon as possible and cross it off their back-to-school to-do list.

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MDHHS advises families to return any renewal paperwork from the department even if they believe they are no longer eligible for Medicaid. Some members of a household can obtain health care coverage even when others are not eligible. For example, a child may be [eligible for MIChild](#) even if their parent is not eligible for other Medicaid programs. Or some Michiganders may have income that is over the income limit for one program and still be able to obtain health care benefits through another program.

MDHHS will assess a household's eligibility for all Medicaid programs – not just for the programs in which someone is currently enrolled, and also for each family member in the household.

MDHHS advises all Medicaid enrollees to check their renewal month at [michigan.gov/MIbridges](http://michigan.gov/MIbridges).

Michiganders who no longer qualify for Medicaid will receive additional information about other affordable health coverage options available, including on [HealthCare.gov](http://HealthCare.gov). Affected Michiganders will be able to shop for and enroll in comprehensive health insurance as they transition away from Medicaid, and many Michiganders can purchase a plan for less than \$10 per month.

What Michigan Medicaid beneficiaries need to do to prepare:

1. Make sure your address, phone number and email address are up to date at [michigan.gov/MIbridges](http://michigan.gov/MIbridges). You can also call your [local MDHHS office](#). If you do not have an online account for MI Bridges to access your Medicaid case or report changes, visit [michigan.gov/MIbridges](http://michigan.gov/MIbridges) to sign up for an account. You can also locate organizations that can help you by [searching for community partners](#).
2. Report any changes to your household or income. You can report changes at [michigan.gov/MIbridges](http://michigan.gov/MIbridges) or by calling your [local MDHHS office](#).
3. If you get a renewal packet, be sure to fill it out, sign the forms and return it by the due date with any proof needed. **NOTE:** If you do not complete and return the renewal, you may lose Medicaid coverage.

The Michigan Department of Insurance and Financial Services (DIFS) is working with MDHHS to help impacted Michiganders get affordable health insurance if they are determined to be no longer eligible for Medicaid. DIFS can answer questions about purchasing a health insurance plan. Call DIFS at 877-999-6442, Monday through Friday from 8 a.m. to 5 p.m. or visit [Michigan.gov/StayCovered](http://Michigan.gov/StayCovered) to learn more.

More information about the how benefits connected to the COVID-19 Public Health Emergency are changing can be found at [www.Michigan.gov/2023BenefitChanges](http://www.Michigan.gov/2023BenefitChanges).

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