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**Michigan provides monthly update on Medicaid renewals, announces change in renewal date for beneficiaries undergoing life-saving treatment**  
*Salvation Army hosting Sept. 30 event to help beneficiaries with renewals*

LANSING, Mich. – To ensure beneficiaries undergoing life-saving treatment such as cancer treatment or dialysis can keep their health care coverage and complete their treatment, the Michigan Department of Health and Human Services (MDHHS) has taken a leading position nationally and extended their renewal through May 2024.

“We recognize that some beneficiaries may be undergoing lifesaving treatment and the loss of Medicaid coverage could have catastrophic results,” said Elizabeth Hertel, MDHHS director. “We have changed the renewal date for those individuals to the final month of the renewal process to allow them time to finish their treatment and make necessary plans for obtaining new insurance coverage if they are found to be ineligible. We believe this is the best way to balance life-saving treatment needs within the rules of the redetermination process being required by federal legislation.”

The renewal flexibility for those receiving life-saving treatment applies to beneficiaries undergoing chemotherapy, radiation, immunotherapy infusions or dialysis who are not able to be passively or automatically renewed and do not have other comprehensive health insurance coverage, like Medicare.

Medicaid and Healthy Michigan Plan beneficiaries must renew their coverage over the next year to comply with federal legislation that requires states to resume the redetermination of Medicaid eligibility. Annual renewals were paused for three years during the COVID-19 pandemic. In Michigan annual renewals are being staggered to take place monthly through May 2024.

Today, MDHHS announced it has renewed Medicaid or Healthy Michigan plan coverage for 148,654 people whose eligibility was up for redetermination in August. The latest data on Medicaid renewals can be found [on MDHHS' online dashboard](#).

The dashboard – which is updated monthly – shows that 419,320 people have been renewed to date. The department is awaiting completed enrollment forms from another 98,109 people who were up for renewal in August and have until the end of September to return their paperwork.

There were 11,187 people who were disenrolled in August because they were no longer eligible and 2,336 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 advises all Medicaid enrollees to check their renewal month at [michigan.gov/MIBridges](http://michigan.gov/MIBridges). MDHHS will send monthly renewal notices four months before a beneficiary's renewal date and follow up with text messages, phone calls, and emails during their renewal month.

MDHHS is continuing to review, analyze and update its data for Medicaid beneficiaries up for renewal in August due to the extension of procedural terminations to the end of September. Updated data on July renewals that were extended through August are available [on the online dashboard](#).

**To help beneficiaries with the renewal process, [a redetermination event is being hosted by the Salvation Army Great Lakes Harbor Light System](#) at the Kroc Center, 2500 S. Division Avenue in Grand Rapids, from 10 a.m. to 2 p.m., Saturday, Sept. 30. During the event, beneficiaries will learn about when they need to renew their coverage; receive on-site help with completing renewal paperwork; and get guidance on next steps.**

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

This includes:

- 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 reenrollment forms on time –and are subsequently found to be eligible for Medicaid during a 90-day reconsideration period.
- Providing beneficiaries an extra month to submit paperwork to avoid loss of health care coverage.

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.

Michiganders who no longer qualify for Medicaid will receive additional information about other affordable health coverage options available, including on [HealthCare.gov](https://www.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](https://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](https://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](https://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](https://Michigan.gov/StayCovered) to learn more.

To ensure beneficiaries are aware of upcoming federal redetermination requirements and help them keep their coverage if eligible, the State of Michigan has:

- Launched a communications campaign in May 2022 to encourage Medicaid beneficiaries to make sure contact information is up to date in anticipation of renewals beginning again at the end of the public health emergency.
- [Established a website](#) and online stakeholder toolkit with materials and assets to help increase awareness about preparing for Medicaid eligibility renewals.
- Partnered with minority media outlets, faith-based and community leaders and advocates to further spread messaging about eligibility renewals beginning again.
- Put in place a May 2023 executive order from Gov. Gretchen Whitmer instructing all State of Michigan departments to work together with MDHHS and DIFS to lower health care costs and help Michiganders either keep Medicaid coverage or find affordable health insurance.
- Established a data-sharing agreement with the Michigan Unemployment Insurance Agency to increase the number of people who can have their coverage renewed “passively,” reducing the need for some beneficiaries to submit renewal paperwork if the state already has their income and other information needed to determine eligibility.

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

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