



STATE OF MICHIGAN

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GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

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**Nearly 1 million Michigan Medicaid enrollees have had coverage renewed, including more than 143,00 in November**  
***Seventy-percent of October group maintains Medicaid coverage***

LANSING, Mich. – Today, the Michigan Department of Health and Human Services (MDHHS) announced it has renewed Medicaid or Healthy Michigan plan coverage for nearly 1 million people this year, including 143,025 whose eligibility was up for renewal in November.

MDHHS also announced that the renewal rate for Medicaid beneficiaries whose eligibility was being redetermined for October was just over 70%. That's the first time that the monthly renewal rate has exceeded 70%, with the number renewed for October Medicaid redeterminations increasing to 192,427 based on updated data from this week.

Medicaid and Healthy Michigan Plan beneficiaries must renew their coverage to comply with federal legislation that required states to resume the redetermination of Medicaid eligibility beginning in early 2023. Annual renewals were paused for three years during the COVID-19 pandemic. In Michigan, these renewals are being staggered to take place monthly through May 2024.

"MDHHS is continuing to do what we can to inform Medicaid beneficiaries that they need to renew their coverage this year," said MDHHS Director Elizabeth Hertel. "As you sit down with your families this holiday season, it's good to have a conversation about Medicaid renewals so your relatives don't forget to respond when they receive renewal packets."

MDHHS recently received a federal waiver that permits the state to renew Medicaid eligibility for people receiving benefits under the Supplemental Nutritional Assistance Program or Temporary Assistance for Needy Families program without conducting separate income determinations. This waiver has increased the number of beneficiaries with existing information the state has on file who can have coverage renewed automatically without having to complete paperwork.

The latest data on Medicaid renewals can be found [on MDHHS' online dashboard](#). The dashboard – which is updated monthly – shows that 961,447 people have been renewed to date. The department is awaiting completed enrollment forms from another 74,795 people who were up for renewal in November and have until the end of December to return their paperwork.

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There were 11,191 people disenrolled in November because they were no longer eligible and 2,025 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 can reinstate eligibility back to the termination date for those who were disenrolled based on a procedural reason and are subsequently found to still be eligible for Medicaid during a 90-day reconsideration period.

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

This includes:

- Extending the renewal date to May 2024 for beneficiaries undergoing life-saving treatments, such as chemotherapy, radiation, immunotherapy infusions or dialysis.
- Allowing managed care plans to assist enrollees they serve in completing and submitting Medicaid renewal forms.
- Sharing lists with managed care organizations of their enrollees who are due for renewal or have not responded to provide additional 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 help avoid loss of health care coverage.

MDHHS advises all Medicaid enrollees to check their renewal month and renew online at [Michigan.gov/MIBridges](https://michigan.gov/MIBridges). MDHHS will send renewal notices four months before a beneficiary's renewal date and follow up with text messages, phone calls and emails during their renewal month.

Updated data on October renewals that were extended through November are also available [on the online dashboard](#).

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.

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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 can purchase a plan for less than \$10 per month.

Michigan Medicaid beneficiaries can learn more, including what they need to do to prepare for renewals, on the [Medicaid Benefit Changes website](#).

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