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DEPARTMENT OF HEALTH AND HUMAN SERVICES

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More than 1.1 million Michigan Medicaid beneficiaries' coverage renewed
Highlighting efforts and successes six months into renewal process

LANSING, Mich. – The Michigan Department of Health and Human Services (MDHHS) has renewed Medicaid or Healthy Michigan plan coverage for more than 1.1 million people, in the six months since Medicaid renewals began again in Michigan after the COVID-19 pandemic, including 140,024 whose eligibility was up for renewal in December.

During the federal COVID-19 Public Health Emergency, Congress enacted the Families First Coronavirus Response Act that required state Medicaid agencies continue health care coverage for all medical assistance programs, even if someone's eligibility changed. Michigan's Medicaid caseload grew by more than 700,000 people during the public health emergency. This requirement was ended by the federal Consolidated Appropriations Act of 2023 signed Dec. 29, 2022, and renewals began again in June 2023.

Over the past several months MDHHS has deployed a number of strategies released by the Centers for Medicare and Medicaid Services to help make the process easier for those up for renewal, and to mitigate the number of residents at risk of losing coverage. These include:

- Renewing Medicaid eligibility for people receiving benefits under the Supplemental Nutritional Assistance Program or Temporary Assistance for Needy Families program without conducting separate income determinations.
- Permitting managed care plans to provide assistance to enrollees to complete and submit Medicaid renewal forms.
- Reinstating individual's eligibility who were disenrolled for procedural reasons and are subsequently redetermined to be eligible for Medicaid during a 90-day reconsideration period.
- Extending renewals to May 2024 for beneficiaries undergoing life-saving treatment, such as dialysis or for cancer.
- Extending automatic reenrollment into a Medicaid managed care plan to up to 120 days.
- Providing beneficiaries an extra month to submit paperwork to avoid loss of health care coverage.

As a result of some of these strategies passive renewals, or the ability to automatically renew a beneficiary, increased from 12% to 40%.

“Total renewals through the past six months puts Michigan on pace to have a total enrollment similar to pre-pandemic levels in March 2020,” said Meghan Groen, MDHHS Medicaid director. “It remains critical for those who are up for renewal to return their paperwork as quickly as possible to avoid the unnecessary loss of coverage.”

Of those beneficiaries whose Medicaid case was closed for procedural reasons, such as not returning paperwork on time, one in four was due to having other comprehensive health insurance available to them.

MDHHS also announced that the renewal rate for Medicaid beneficiaries whose eligibility was being redetermined for November was just over 65%. The number renewed for November Medicaid redeterminations increased to 152,241 based on updated data from this week.

“I am proud that Michigan continues to be a leader in supporting Michigan Medicaid beneficiaries, especially in finding innovative ways to make the process easier, increase awareness and education, and help eligible residents retain coverage,” said MDHHS Director Elizabeth Hertel. “I also have to thank our local MDHHS offices. This has been a tremendous amount of work to process renewals and support their community members during this initial cycle after the pandemic. Additionally, there have been a significant number of community partners and advocates who have stood with MDHHS and supported our efforts with their constituents. We couldn’t be successful without their collaboration.”

“Ensuring Michigan residents continue to have access to care through their Medicaid health insurance is important to maintaining their health and well-being,” said Phillip Bergquist, Michigan Primary Care Association CEO. “Michigan’s Community Health Centers are working with MDHHS, local organizations and advocates as trusted partners to help eligible residents keep their coverage and prevent gaps in health care that could lead to additional health disparities among underserved populations.”

The latest data on Medicaid renewals can be found [on MDHHS’ online dashboard](#). The dashboard – which is updated monthly – shows that 1,109,849 people have been renewed to date. The department is awaiting completed enrollment forms from another 97,657 people who were up for renewal in December and have until the end of January to return their paperwork.

There were 14,075 people disenrolled in November because they were no longer eligible and 66,477 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.

MDHHS advises all Medicaid enrollees to check their renewal month and renew online at 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.

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. 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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