

Feb. 13, 2023
For Immediate Release

Contact: Jeff Leieritz
(803) 898-2580
Communications@scdhhs.gov

Medicaid Annual Eligibility Reviews to Resume April 1 After Pause During COVID-19 Public Health Emergency

COLUMBIA, S.C. – The South Carolina Department of Health and Human Services (SCDHHS) announced it will resume its standard Medicaid annual eligibility reviews April 1, 2023, to comply with provisions of the *Consolidated Appropriations Act, 2023*. This date marks the return of the agency’s standard annual review process that was in place prior to the COVID-19 federal public health emergency (PHE).

The federally required process is in place to ensure those who are enrolled in states’ Medicaid programs continue to meet established eligibility criteria. SCDHHS will conduct some outreach to gather more information about members who are likely categorically no longer eligible beginning in February 2023.

SCDHHS has created a web page where Healthy Connections Medicaid members can find information about Medicaid annual reviews (www.scdhhs.gov/annualreviews). The agency will continue to update this page with information as it begins the annual review process.

Information for Healthy Connections Medicaid Members

It is very important SCDHHS has updated contact information for its Healthy Connections Medicaid members. If members have moved without informing SCDHHS, they may miss important information needed to keep their Medicaid coverage. Members can update or add their contact information by:

- Visiting apply.scdhhs.gov;
- Over the phone by calling (888) 549-0820 Monday through Friday from 8 a.m. to 6 p.m.; or,
- By visiting an SCDHHS local eligibility office (a list is available at www.scdhhs.gov/site-page/where-go-help).

While this process will begin April 1, 2023, meaning members will begin receiving notices and review forms in April 2023, the agency anticipates it will take 12 months to complete this process. This means some members will not receive their notice or annual review form until March 2024.

SCDHHS will first attempt to renew individuals’ Medicaid eligibility with information that is already available. If SCDHHS can verify continued eligibility this way, a Medicaid member will receive a “continuation of benefits” notice and will not receive an annual review form.

If continued eligibility cannot be confirmed with information already available, the agency will notify the Medicaid member and mail a form to be completed and returned. Annual review forms must be filled out completely and returned within 60 days. The return date will be included in the information

the agency sends to impacted Medicaid members. For members who have provided SCDHHS with a cell phone number, the agency will also send a series of text messages to remind the member to return their review form if they have not done so already. The member may opt out of this service by following the instructions in the initial text message.

If a member receives an annual review form instead of a continuation of benefits notice, it does not mean they are no longer eligible. It does mean they need to fill out the review form completely and/or send SCDHHS other information needed to determine if they are still eligible.

SCDHHS has produced a [fact sheet for Healthy Connections Medicaid members](#) that is available on its [annual reviews website](#). Members with questions should contact the Healthy Connections Member Contact Center at (888) 549-0820. Community organizations such as SC Thrive (800) 726-8774 are also able to answer questions.

Background Information

All state Medicaid agencies are required to check the eligibility status of Medicaid members annually to ensure those who are enrolled remain eligible for the program. Provisions of the Families First Coronavirus Response Act (FFCRA) required states to maintain continuous eligibility for Medicaid members who were enrolled as of March 2020 throughout the COVID-19 federal PHE. To comply with the FFCRA, SCDHHS paused its standard annual review process and only removed members from the Healthy Connections Medicaid program if they moved, requested to be removed or passed away. This has contributed to an increase in the state's Medicaid population from 1.05 million full-benefit Healthy Connections Medicaid members in February 2020 to approximately 1.3 million full-benefit members as of Dec. 31, 2022.

The *Consolidated Appropriations Act, 2023*, which was passed by Congress and signed into law by President Joe Biden on Dec. 23, 2022, requires state Medicaid agencies to resume their standard annual eligibility review processes on April 1, 2023.

About the South Carolina Department of Health and Human Services

The South Carolina Department of Health and Human Services provides health care benefits to nearly 1.3 million South Carolinians. Its mission is to be boldly innovative in improving the health and quality of life for South Carolinians.

###