



Office of Medicaid Policy & Planning

medicaid connect

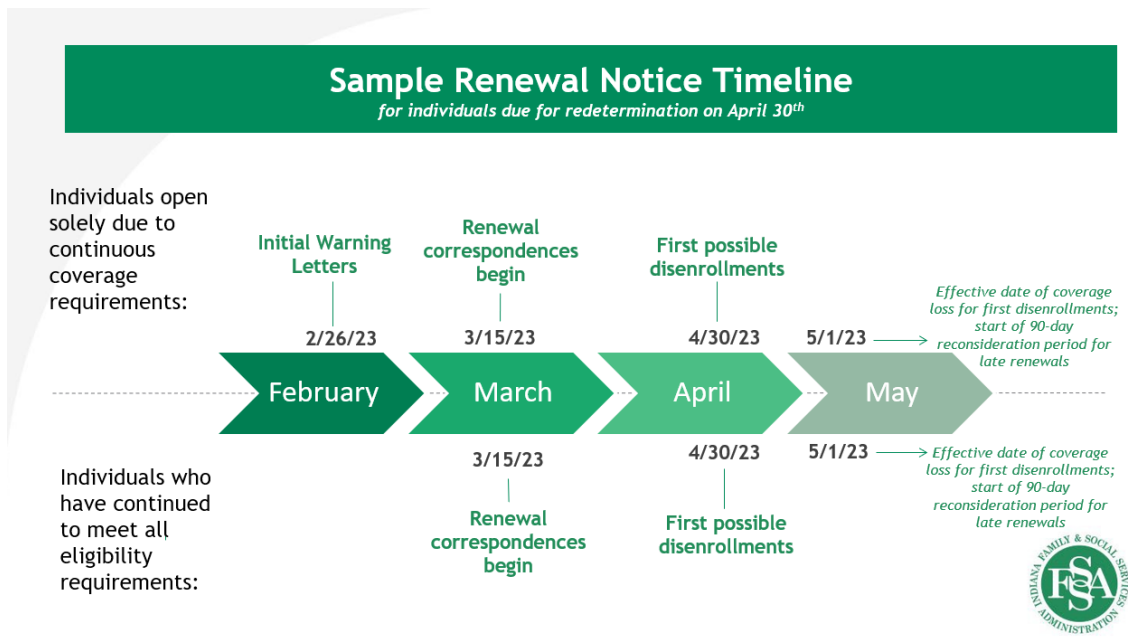
THE MONTHLY LEGISLATIVE NEWSLETTER

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Medicaid Eligibility Reviews and Actions Resume April 1

As we have communicated with you in past newsletters, Indiana Medicaid is beginning the process of “returning to normal operations” and will review eligibility for all members over the following 12 months. The team who is supporting these efforts has been meeting and planning for this process for more than two years, and Indiana is one of a *very* small number of states whose redetermination plan was accepted by the Centers for Medicare and Medicaid Services (CMS) without the need for a “mitigation plan” which could put additional federal funding at risk if not met.

Redetermination mailers for members who are due for their annual redetermination in April (also referred to as “annual renewal”) were sent out in the middle of March. For individuals who do not comply with returning the mailer and requested documentation, or who are found to no longer meet Medicaid requirements, their coverage will be closed effective May 1, 2023. This process will continue monthly until the “return to normal” is complete in May 2024.



OMPP Centering Goal: Collaborate to improve member and provider experience.

The redetermination/renewal process will be the same for all members, whether they continued to meet eligibility requirements during the public health emergency (PHE) or whether they would have been closed except for the continuous coverage requirements used during the PHE. However, individuals who are only open due to continuous coverage requirements will receive an additional letter about two weeks before their redetermination mailer is sent to them. This letter explains the redetermination process and how important it is that the member review the form and return it, along with any documentation it asks for, by the due date given on the form.

The most important messages for Indiana Medicaid members continues to be:

- Make sure the Division of Family Resources has the correct contact information for you.
 - Go to <https://fssabenefits.in.gov/>.
 - Scroll down to the blue “Manage Your Benefits” section.
 - Click on either “Sign into my account” or “Create account.”
 - Call 800-403-0864 if you need assistance.
- If you receive a redetermination mailer, read it carefully. Note any changes to the information that is listed for you and/or your family, attach any documentation that it requests (for example, paystubs or bank statements) and sign the form.
 - Packets can be completed online, uploaded to the in the benefits portal at <https://fssabenefits.in.gov/>; faxed to 800-403-0864; mailed to FSSA Document Center, PO Box 1810; Marion, IN 46952; or dropped at your local DFR office. For questions, you can call 800-403-0864.
- Return the mailer and documentation by the due date listed on the mailer.
 - If you miss the due date, you can still return the information within 90 days. If you are still eligible for coverage, your Medicaid will be re-opened, and you will not need to submit a new application.
 - For all types of Medicaid except HIP, your coverage can be opened back to the date you were closed (if you were eligible in all months).
 - For HIP, your coverage will reopen going forward – so it’s very important to send your information in as soon as you can.

For individuals who are no longer eligible for Medicaid...

- Individuals who comply with redetermination but are over the income limit for Medicaid will have their information transferred to the federal Marketplace (www.Healthcare.gov) and be given a Special Enrollment Period to apply for coverage there.
 - **NEW!** Those who are closed for failing to verify their income or other eligibility factors will be eligible to apply on the Marketplace due to a new “Unwinding Special Enrollment Period” (March 2023 through July 2024). [Click here for more information.](#)
- Hoosiers over 65 can look into health coverage through the federal Medicare program at www.Medicare.gov or by calling **800-MEDICARE**. Indiana’s State Health Insurance Program can also help with any questions about Medicare. Find them online at www.medicare.in.gov or call **800-452-4800**.

- Individuals who are working can check with their employer about possible options for employer-sponsored coverage.

Please check out www.in.gov/Medicaid (click on “How a return to normal will impact some Indiana Medicaid members”) to see all the information, documents, and tools Indiana Medicaid has put together to assist during

this process. Along with the items listed in the screenshot here, we also have videos that stakeholders can use and a button you can put on your website which will link to this page.

You can also order bulk quantities of our posters, postcards, or flyers (in English, Spanish or Burmese) or our large-print flyer, by using the “Click here to order Outreach Materials” option, shown below:

