



# Reminder: Texas Medicaid Providers Help Our Members Get Ready for Redetermination

June 12, 2023

## Reminder

Some of our members could lose their Texas Medicaid benefits if they don't complete their redetermination paperwork on time. Unfortunately, our members may not be familiar with the redetermination process or how it applies to them. Please reference the [End of Continuous Medicaid Coverage Ambassador Toolkit](#), for more detail information and updates.

## Redetermination Timeline

The Continuous Medicaid Coverage ended March 31, 2023. The Texas Health and Human Commission Services (HHSC) ended the Public Health Emergency (PHE), standard requirements are back in place for Medicaid eligibility, and the redetermination process will begin again with a first redetermination date of June 1, 2023. Member's redetermination dates differ. HHSC will send letters to current Medicaid members to alert them if they need to complete their renewal.

## Watch your mail.

The renewals will be sent in a **yellow envelope** with red words advising **ACTION REQUIRED**. There is a QR code for our members to scan to renew or update their information.



## Plan Termination

Blue Cross and Blue Shield of Texas (BCBSTX) members covered by Medicaid will have to renew their Medicaid applications when they are notified by HHSC. Members will be terminated from Medicaid if they don't complete and return required forms as soon as possible.



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## How can you help?

We are asking our providers to encourage our Medicaid members to:

- Log into [yourtexasbenefits.com](https://yourtexasbenefits.com) to ensure that the Texas Health and Human Services Commission (HHSC) has the member's correct email, phone and mailing address. HHSC must have current contact information to contact members regarding their eligibility or enrollment status.
- Return renewal packets or renew their coverage by logging into [yourtexasbenefits.com](https://yourtexasbenefits.com).
- Our member can also submit their application, renewal from and information by:
  - Mail: Texas Health & Human Services, P.O. Box 149024, Austin, TX 78714-9024
  - Fax: 1-877-447-2839
  - Calling 2-1-1 and choosing Option 2 after picking a language.
  - Visiting a local office or a community partner. To find an HHSC office or a community partner, visit [yourtexasbenefits.com/Screener/FindanOffice](https://yourtexasbenefits.com/Screener/FindanOffice) or call 2-1-1.
- Question to ask our members:
  - Have you moved?
  - Had a baby?
  - Changed job recently?

**If they answer yes to any of these, make sure they update their contact information soon. Members can also call the BCBSTX Member Outreach 1-877-375-9091.**

Additional tools providers can use are in the [Medicaid Coverage Ambassador Toolkit](#).

Thank you for helping your patients retain coverage.

**DON'T WAIT — Respond and Update!**

Update your information today.

Visit [YourTexasBenefits.com](https://YourTexasBenefits.com) or call 2-1-1 and select option 2.



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## Questions You Might Get Asked

### **Why is this important? What happens if I don't take any action?**

You might lose your Medicaid coverage. That's why it's important for you to update your information with HHSC and respond quickly to any notices you get from them.

### **Where can I get more information?**

If you have any questions or need help with your Texas Medicaid coverage, call Member Services at the number on the back of your health plan member ID card.

You can also call HHSC at 2-1-1 and choose option 2 (or call 1-877-541-7905).

### **What happens if I don't get a notice from HHSC?**

If you've recently moved, HHSC may not have your most up-to-date contact information. They may have sent it to an old address. If you're worried you might not have gotten any notices from HHSC because they don't have your current address or that there's been a mistake, call 2-1-1 and choose option 2.

## Questions You Might Have

### **If our member is uninsured, where can they go for coverage?**

- If our member was found ineligible for Medicaid, they may be able to get another health plan. They could be eligible to get help paying for a plan through premium tax credits or cost-sharing assistance. [Learn about BCBSTX individual and family health insurance plans](#). We want them to stay covered. Also, their case has been automatically sent to the federal marketplace to be considered for coverage options. For more information about this, visit. [Healthcare.gov](https://www.healthcare.gov).
- If they were disenrolled because they never responded to HHSC or didn't complete their renewal application, they will not be transferred to the marketplace. This is because HHSC was not able to confirm their eligibility for Medicaid. In this case, they should submit their renewal for benefits.

People can apply for prior Medicaid coverage by submitting [Form H1113](#), Applications for prior Medicaid Coverage. Please refer our members to the [Texas Works Handbook](#) for more information.

Providers, for questions or additional information, please:

- Contact your BCBSTX Medicaid Provider Network team at **1-855-212-1615**
- Submit via email [Texas Medicaid Network Department](#)