

Provider Alert: Reminder to Encourage Medicaid Members to Renew Coverage

May 19, 2022

What is New

Medicaid members will need to ensure eligibility as the public health emergency may be ending soon. If members do not renew, they may lose coverage. We ask our providers to please check member eligibility before each visit.

How can you help?

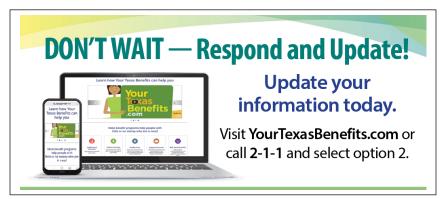
We are asking our providers to encourage our Medicaid members to:

- Log into <u>yourtexasbenefits.com</u> to ensure that the Texas Health and Human Services Commission (HHSC) has the member's correct email, phone and mailingaddress. 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.
- 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.

Additional tools providers can use are in the <u>Medicaid Coverage Ambassador Toolkit</u>

Thank you for helping your patients retain coverage.





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 my patient is uninsured, where can they go for coverage?

- If your patient was found ineligible for Medicaid, their case has been automatically sent to the federal marketplace to be considered for coverage options. For more information about this, visit. <u>Healthcare.gov</u>.
- 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 <u>Form H1113</u>, Applications for prior Medicaid Coverage. Please refer our members to the <u>Texas Works Handbook</u> for more information.

Providers, for questions or additional information, please:

- Contact your BCBSTX Medicaid Network team at 1-855-212-1615 or
- Submit via email <u>Texas Medicaid Network Department</u>

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