Changes to Medicaid Coverage: Answers to Your Frequently Asked Questions

- 1. What changes are coming to Medicaid and CHIP eligibility? If you or a family member has health coverage through Idaho Medicaid or the Children's Health Insurance Plan there are important steps you will soon need to take. In most cases you were able to keep your Medicaid during the COVID-19 pandemic, even if there was a change in your household situation. This special rule is ending soon.
- 2. What does this mean for me? This means that once the rule changes, you or a family member may be disenrolled from Medicaid or CHIP if you don't complete a renewal. The Idaho Department of Health and Welfare will contact you if a renewal is needed. However, Idahoans who are not eligible for Medicaid may purchase health insurance via the state-based insurance marketplace, Your Health Idaho. If you or a family member is disenrolled from Medicaid, and DHW determines that you may be eligible for a tax credit to help pay for health insurance through the state-based exchange, they will send a referral to Your Health Idaho, the Idaho state-based health insurance marketplace. Visit yourhealthidaho.org or call 855-944-3246 for more information.
- 3. What should I do next? The Idaho Department of Health and Welfare (DHW) will send out pink notices with instructions to all families who need to complete a renewal. Sometimes DHW can make a benefit determination without talking to you. The most important thing to do now is to make sure you update your contact information it only takes 10 minutes to visit https://idalink.idaho.gov/ or call 877-456-1233 or email mybenefits@dhw.idaho.gov to ensure your current mailing address, phone number, email, or other contact information. This way, they'll be able to contact you about your Medicaid or CHIP coverage. If you need help, your local community health center can help you make sure your information is up to date.
- 4. When will the Idaho Department of Health and Welfare send notices for Medicaid/CHIP renewals? The Idaho Department of Health and Welfare will begin notifying the families that need to submit renewal paperwork starting on February 1st, 2023. To reduce the volume of renewals, notices will be sent out in batches, meaning some families may not receive a notice until June or July.
- 5. If I received Medicaid coverage for which I would not have normally been eligible, do I have to pay that back? No. Any coverage received due to the pause in normal Medicaid eligibility rules does not have to be repaid. However, any coverage received due to deceit may need to be repaid.