

# Districtwide Training on Medicaid Renewal #3

June 21, 2023

Department of Health Care Finance



# Presentation Overview

- Background on Medicaid Renewals
- Understanding the Renewal Timeline and “Grace Period”
- Using District Direct (with Training Videos)
- Key Messages for Beneficiaries and Stakeholders
- Communication and Outreach
- Next Steps



# Medicaid Beneficiaries Will Have to Renew Their Coverage for the First Time in 3+ Years



- In March 2020, CMS temporarily waived the need to renew Medicaid coverage.
- Medicaid enrollment has increased ~20% since the start of the public health emergency –just over 300,000 District residents are now enrolled in Medicaid.
- In December, Congress passed legislation ending the continuous eligibility requirement on March 31, 2023.
- The District restarted Medicaid eligibility renewals beginning April 1, 2023 and the first group required to renew were required to do so before May 31, 2023. **These are distributed ~evenly over 12 months.** (Alliance and Immigrant Children’s Program renewals started in July 2022).
- DHCF is required to contact people via mail to renew their coverage –but if our address on file is outdated or does not work for someone, it creates a challenge.



# Using District Direct to Update Addresses and Renew Coverage



- DHCF expects approximately 186,000 people (77% of MAGI beneficiaries) to passively renew, meaning no action by the beneficiary is needed to keep coverage.
- Beneficiaries who are eligible for Medicaid through disability or age-related reasons (non-MAGI) are more likely to have to complete a renewal form (approx. 46,000 people).
- Eligibility for Medicaid, SNAP, TANF has moved to District Direct. Using it may be the best way to renew!
- District Direct is available online or as a phone App.
- You can use District Direct to update contact info and find when a beneficiary needs to renew.
- A call center and in person renewal options are also available.
  - DHS Public Benefit Call Center, Option 5 (Medicaid Renewals): 202-727-5355



# The District Has a 90-Day Renewal Reinstatement Period for Those Who Do Not Return by Their End Date



- There is a 90-day grace period for individuals who do not renew Medicaid ahead of their certification end date. The grace period allows additional time for individuals who fail to recertify timely in submitting their renewal.
- If the beneficiary is determined eligible for continued coverage, coverage will retroactively go back to the certification end date. If a provider provides care in this period, they will be reimbursed -if the individual recertifies within the grace period.
- Individuals can recertify their coverage in District Direct, mail, service center, fax, etc. by submitting their renewal form or completing a renewal online up to 90 days after their recertification end date.
- **Individuals attempting to recertify their coverage after 90 days following their recertification end date will be required to submit a new application.**
  - **The grace period for the May cohort ends on 8/30; From 9/1/23 and forward this cohort will be required to submit a new application to reactivate their benefits.**



# Non-MAGI Renewal Form Timelines



- The District sends out most renewal forms for Non-MAGI groups **90 days** in advance based on their recertification end date:
  - *Example:* On April 1, 2023, a 90-Day renewal form notice was sent to Non-MAGI individuals who had a renewal due June 2023. If the renewal is not received by the agency or the beneficiary is determined to be no longer eligible, Medicaid benefits will end June 30, 2023.
  - The grace period follows this
- Beneficiaries are encouraged to submit renewals upon receipt to avoid any delays in processing. Once the agency has received the renewal form the beneficiary will receive a notice informing them that the renewal has been received.
- If the agency needs additional verification, a request for information (RFI) notice will be mailed and all requesting verifications must be submitted by the designated due date. This will allow sufficient time for the agency to review and process the renewal.



# Example Passive & Non-Passive Renewal Timeline

**Passive Renewal Initiation**  
DCAS electronically verifies eligibility factors using Federal & Local data.

**Passive Renewal Notice**  
If the beneficiary is found eligible for Medicaid, DCAS sends an approval notice with information used for the determination.

**Renewal is Due**  
If pre-populated form and verifications are not received, Medicaid coverage must be discontinued.

**Grace Period Ends**  
From this point on the beneficiary must submit a new application.



**Non-Passive Renewal and Verifications**  
If Medicaid cannot be determined electronically, a pre-populated form will be sent to the beneficiary asking for outstanding verification and detailing how to submit documentation and complete the renewal.

**30-Day Notice**  
If pre-populated form and verifications are not received, DCAS will send the beneficiary another notice informing that Medicaid closure will occur in 30 days.

**Grace Period**  
Beneficiary may still submit outstanding verifications during this period and such submission will be considered as a renewal.

**\*BEC- Before the End of Certification Period**

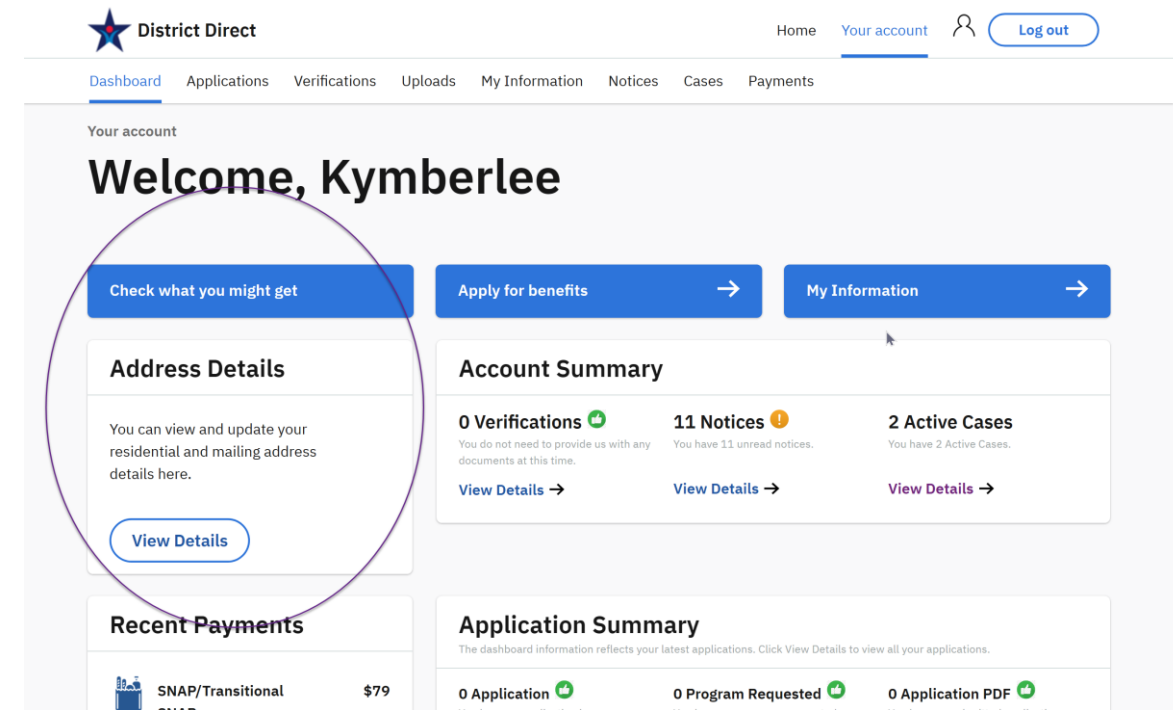


# Key Messaging for Beneficiaries: Don't Wait to Update! Then Check Mail for Important Information!



## What Beneficiaries Can Do Right Now

- Don't Wait to Update!: Update your contact information by logging into District Direct. If DHCF does not have the proper contact information, you will not receive notice of the need to renew your coverage through the mail or other means!
- Check Your Mail: DHCF will mail you a letter about your Medicaid, Alliance, or ICP coverage. This letter will also let you know when it's time to complete your renewal.



## What To Do After Receiving Your Renewal Notice

- Complete your renewal by using [districtdirect.dc.gov](https://districtdirect.dc.gov) or fill out the form and mail/fax/drop at Service Center immediately to help avoid a gap in your coverage.





# District Direct's Interface Emphasizes Starting an Account or Checking on an Applications



**District First** Home Create Account Log in

## Welcome to District of Columbia Benefits Portal

Apply for SNAP, TANF/Cash, Assistance and Medical Benefits or learn more about all our offered benefits

Apply Now See Offered Benefits

### How else can District Direct help you?

- Check your benefit eligibility**  
Answer a few question to find out what benefits you're eligible for.
- Renew or recertify your benefits**  
Are your benefits expiring? Submit a request to renew or recertify your benefits.
- Report a change**  
New baby? Got a new address or a new job? Update and report any changes to your Household Information.
- Health Care Coverage**  
Do you own a small business? Go to DC HealthLink and apply for healthcare coverage for you and/or your family.



# DHCF Created Tutorial Videos to Assist with Using District Direct



- Can be found at <https://dhcf.dc.gov/medicaid-renewal>

To register for an account, fill in the new account information required below. You must complete all fields.

First Name

Last Name

Email (optional)

Username  Use Email Address

Entering your email address will make it easier to recover your password if you ever forget it.

Password

Confirm Password

I agree to the [terms and conditions](#).

Already have an account? [Login](#)

# ★★★ Beneficiaries Have a Variety of Methods to Submit Renewals



*Medicaid beneficiaries may submit their completed renewals:*

**Online:** District Direct allows beneficiaries to complete their renewal, report changes, submit verifications, and view notices online or through the mobile app. Beneficiaries may visit <https://districtdirect.dc.gov/> or download the mobile app through the Apple App Store or Google Play. **Please encourage beneficiaries to complete their renewal online!**

**By Phone:** Call Center (202) 727-5355; Language & Translation Line 1-855-532-5465

**Mail**

Department of Human Services | Economic Security Administration

Case Record Management Unit

P.O. Box 91560 Washington, DC 20090

**Drop-off at a Service Center**

**Fax at (202) 671-4400**



# DHCF is Working with The Health Benefits Exchange and DC Health Link to Ensure Continuity and Access of Health Coverage



- DC Health Link: DC Health Link is the health care exchange program in the District of Columbia ensuring access to quality and affordable health care to all DC residents. DC Health Link, coordinates benefits and create a "no-wrong-door" environment for District residents seeking help with insurance coverage and costs.
- Relationship with Medicaid Renewal: DC Health Link can find health coverage if a beneficiary no longer qualifies for Medicaid but may qualify for other health plans
  - DC Health Link may also be the first place some beneficiaries go to find or renew coverage



**DC Health Link:** <https://www.dchealthlink.com/>

Your Home for Quality Affordable Health Insurance



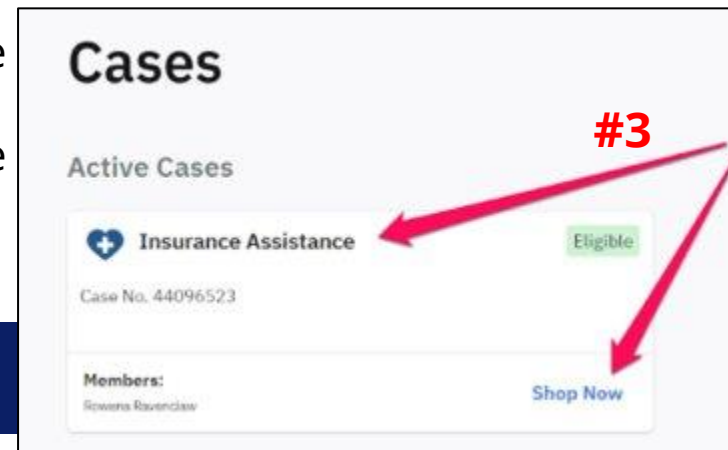
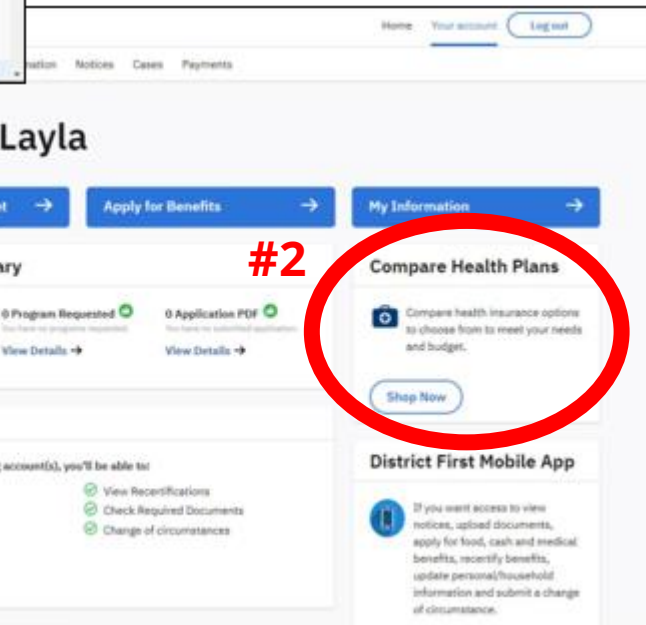
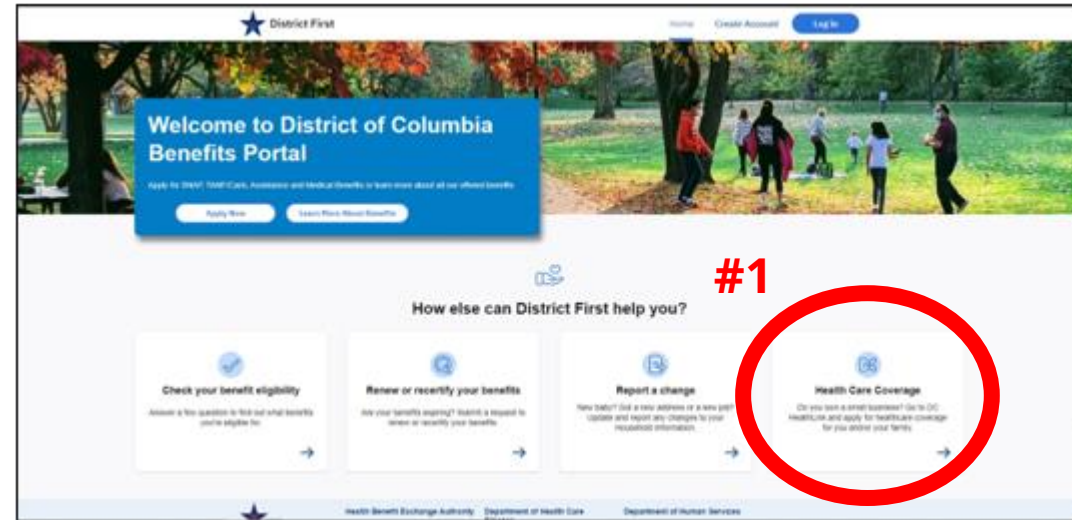
Individual & Family Marketplace through DC Health Link



# How to get to DC Health Link from your District Direct account

There are 3 ways to redirect to DC Health Link from your District Direct account:

- 1) From the District Direct home page, you will get to [dchealthlink.com](https://dchealthlink.com)
- 2) Select 'Shop Now' in the 'Compare Health Plans' tile to get to our Plan Match Tool
- 3) If you are determined for 'Insurance Assistance' or 'Unassisted Qualified Health Plan', select 'Shop Now' to be directed to your DC Health Link account to enroll







# Stakeholder Toolkit Assists Stakeholders with Messaging and Further Details



- DHC's website has a **Stakeholder Toolkit** on Medicaid Renewal.
- The **Stakeholder Toolkit** contains:
  - Background
  - Key Messages
  - Downloadable fliers to print, post, and share
  - Draft social media posts and messaging
  - Drop In Article to put in your agency newsletter or bulletin board
  - Email and Website Text
  - Phone Call Scripts including information on District Direct registration
  - FAQs

**End of Medicaid Continuous Enrollment**  
A COMMUNICATIONS TOOLKIT FOR COMMUNITY STAKEHOLDER ENGAGEMENT

**Social Media Posts**

**Post #4**  
Have you moved since you signed up for health insurance coverage? Remember to update your address at [districtdirect.dc.gov](http://districtdirect.dc.gov). If you need additional assistance, you may call the Public Benefits Call Center at 202-727-5355 between 7:30 a.m. and 4:45 p.m. We will mail you information when it is time to renew your coverage.

**Post #5**  
We want you to keep your health coverage! To make sure you do not miss important information and renew your coverage, please be sure that DHC has your current contact info. Take a minute to update your address, phone number, and email address at [districtdirect.dc.gov](http://districtdirect.dc.gov). If you need additional assistance, you may call the Public Benefits Call Center at 202-727-5355 between 7:30 a.m. and 4:45 p.m. We will mail you information when it is time to renew your coverage.

**Post #6**  
A message for people with Medicaid! Renewals were stopped due to COVID-19; however, they're coming back. Make sure DHC knows where to send your Medicaid renewal letter. If you moved, update your information at [districtdirect.dc.gov](http://districtdirect.dc.gov). If you need additional assistance, you may call the Public Benefits Call Center at 202-727-5355 between 7:30 a.m. and 4:45 p.m. We will mail you information when it is time to renew your coverage.

**Don't Wait to Update!**  
All DC residents with Medicaid must renew their coverage this year. Update your contact info at [districtdirect.dc.gov](http://districtdirect.dc.gov).

**Email Messages**

**Subject Line:**  
**Don't Miss Out on Important Updates**  
If you have Medicaid... Take a minute today to update your contact

**Website Text**  
We want you to keep your health coverage! To make sure that you don't miss any important information, please be sure that DHC has your current address, phone number, and email address so that DHC knows where





# Communication on Medicaid Renewal– Future Beneficiary Outreach

- DHCF will send Renewal Packets to beneficiaries who cannot passively renew coverage.
- The District will text the cell numbers of beneficiaries to ask beneficiaries to update their address and/or complete their renewal packet.
- The District will conduct automated phone calls to ask beneficiaries to update their contact information and/or complete their renewal packet.
- DHCF is training groups such as this one on how to update contact information and renew Medicaid for beneficiaries.



## Next Steps



- The District is holding bi-weekly Community Meetings on Medicaid Renewal. The next one is Wednesday, July 5 at 2:30 pm.
- The District is holding monthly trainings on Medicaid Renewal in a virtual environment. This is the second of the series and the next one will take place in July so stay tuned for the announcement.
- Email questions and feedback or your request to join regular meetings to [medicaid.renewal@dc.gov](mailto:medicaid.renewal@dc.gov).
- Visit <https://dhcf.dc.gov/medicaid-renewal> to learn more and download the Stakeholder Communications Toolkit and fliers
- Share information with staff, on your website, and social media.
- Start identifying beneficiaries that need assistance and help them update their information/renew their coverage.



# Questions and Feedback

