



Restarting Medicaid Renewals: The End of the Continuous Enrollment Requirement Bi-Weekly Meeting #3

Medicaid Renewal Community Meeting

Department of Health Care Finance

April 26, 2023



Presentation Overview



- Background on Medicaid Renewals
- What's New This Week
- Key Messages for Beneficiaries and Stakeholders
- Communication and Notices on Medicaid Renewal
- Next Steps
- Q&A

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 and states received a 6.2% financial boost to accommodate the increased enrollment.
- Medicaid enrollment has increased 20% since the start of the public health emergency – just over 300,000 District residents are now enrolled in Medicaid.
- At the end of 2022, Congress passed legislation ending the continuous eligibility requirement on March 31, 2023.
- The District restarted Medicaid eligibility **renewals beginning April 1, 2023**. (Alliance and Immigrant Children’s Program renewals started in July 2022).



Medicaid Renewal Is Not the Only Thing That Changed on April 1st – New Managed Care Contracts Also Started



- New Medicaid / Alliance managed care contracts started on April 1st
 - One new managed care plan - Amerigroup DC - joins AmeriHealth Caritas and MedStar Family Choice
 - Beneficiaries enrolled in CareFirst Community Health Plan transitioned to Amerigroup DC
- Beneficiaries received postcard and letters between February and March
- Questions about managed care plan enrollment: dchealthyfamilies.com or call 202-639-4030
- Enrolling into a managed care plan is not renewing Medicaid eligibility





States Are Required To Conduct A Renewal Of Every Beneficiary Enrolled In Medicaid Before Taking Adverse Action On Medicaid Eligibility



- MAGI Medicaid Beneficiaries (most adults under 65, pregnant women and children under 21, parents/caretaker relatives)
 - Passive renewal – Happens at the end of the month prior to mailing of renewal packets. If passively renewed, beneficiaries receive a notice their coverage is renewed and there is nothing to do
 - First notice is sent at the end of the month 60 days prior to certification end date
 - If renewal not received or there are outstanding verifications a second notice of pending termination is sent 30 days prior to certification end date
- Non-MAGI Medicaid Beneficiaries (Age 65+, blind, or person with a disability, SSI recipients, waiver participants)
 - First notice is sent at the end of the month 90 days prior to certification end date
 - If renewal not received or there are outstanding verifications a second notice of pending termination is sent 30 days prior to certification end date
- District Direct sample notices are available on the [DHCF Website](#)
- Medicaid renewal packages will have distinctive markings



UPDATE SINCE LAST MEETING:

DHCF Eligibility Monitoring Dashboard Release Expected April 28



- Dashboard will include Unwinding Data Report* information submitted by DHCF to the federal Centers for Medicare & Medicaid Services, along with other key metrics for monitoring the restart of Medicaid eligibility redeterminations.
- Link will be at: <https://dhcf.dc.gov/page/medicaid-renewal-information-dc-medicaid-beneficiaries-and-stakeholders>
- Example content below reflects Medicaid renewal initiations and outcomes as of mid-April. Many people received a “passive” renewal (i.e., coverage was extended based on electronic data sources alone) but a significant number require a “non-passive” renewal and must provide requested information by due dates shown to retain their coverage.

Number of Beneficiaries with Medicaid Renewal Initiated and Renewal Outcomes, by Notice Month and Due Month

Notice month	Due month	Beneficiaries with renewal initiated	Beneficiaries renewed	Beneficiary % renewed	Beneficiary % renewed passive	Beneficiary % renewed non-passive	Beneficiaries not renewed
2023-04	2023-05	15,202	9,596	63%	61%	2%	5,606
	2023-06	2,259	25	1%	0%	1%	2,234
	Total	17,461	9,621	55%	53%	2%	7,840
Total		17,461	9,621	55%	53%	2%	7,840

Number of Cases with Medicaid Renewal Initiated, by Notice Month and Due Month

Notice month	Due month	Cases with renewal initiated	Passive notice sent	Non-passive notice sent
2023-04	2023-05	9,553	6,231	3,322
	2023-06	2,210	2	2,208
	Total	11,763	6,233	5,530
Total		11,763	6,233	5,530

* <https://www.medicaid.gov/resources-for-states/coronavirus-disease-2019-covid-19/unwinding-data-reporting/index.html>



UPDATE SINCE LAST MEETING: DHCF Publishes Training Videos and Recording to Assist with Helping Beneficiaries in District Direct



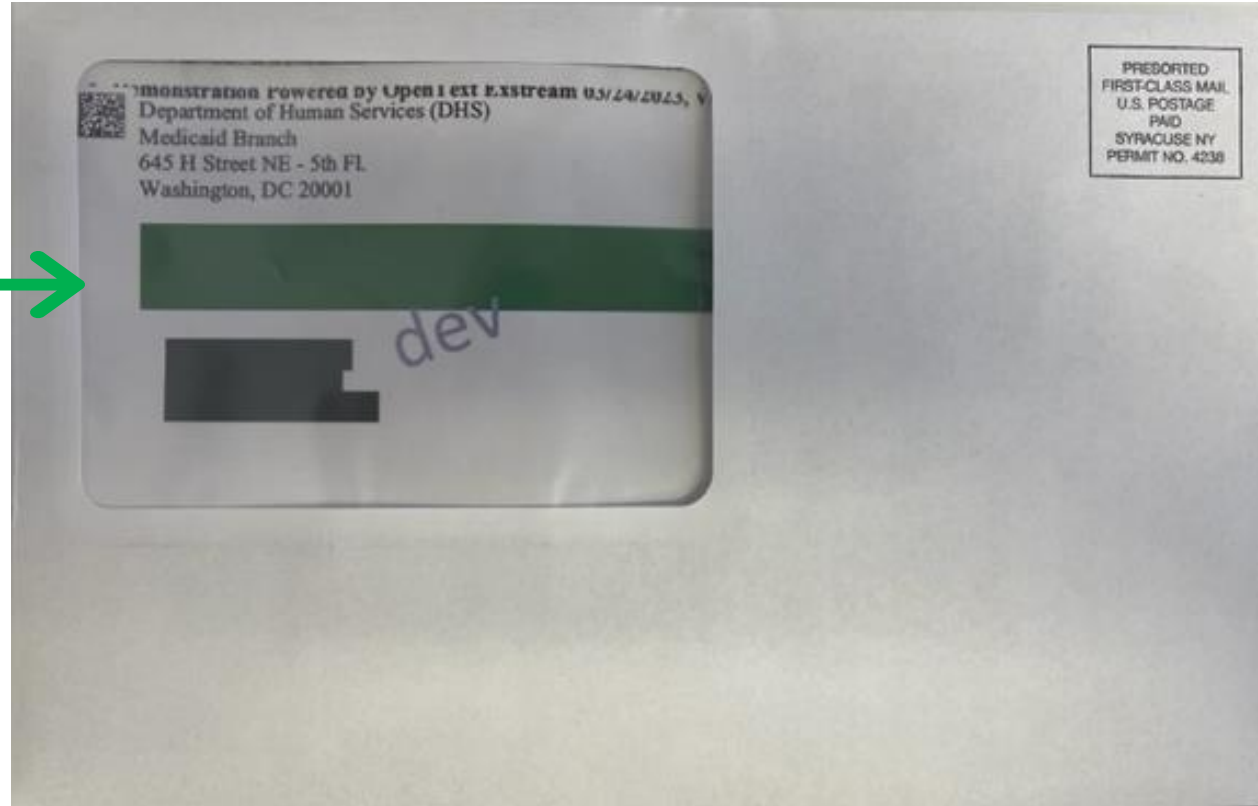
- Frequently Asked Questions: The District is drafting Frequently Asked Questions – derived from input received in this meeting and other stakeholder meetings- and will publish them on the website this month
- Training Videos: The District published short training videos on District Direct account creation and connection, change of address, and renewing coverage online before the next meeting.
- Training: The held its first of monthly trainings on Medicaid Renewal on Thursday, April 20th at 3:00 pm and the recording is available online
- Next Training: The next monthly training will be held virtually on Monday, May 22nd at 12:00 PM
- Consumer Alert: The District issued a consumer alert on Medicaid Fraud related to Medicaid Renewal –details will be covered later in the slide



Look Out For An Envelope that Looks Like This!



Look for the green line here







Look Out For These Renewal Documents in the Mail!



GOVERNMENT OF THE DISTRICT OF COLUMBIA



SAMPLE NOTICE: Non-MAGI Renewal Form

Renewal Form for Medical Assistance

It is time to renew your **Aged, Blind, Disabled (ABD)** medical assistance coverage. You must renew your medical assistance coverage at least once a year. You must complete and return this renewal form and copies of all required documents by **6/30/2023** to keep your medical assistance coverage. As you complete this form, please tell us any changes that have occurred.

If there is a change in your benefits, you will get

GOVERNMENT OF THE DISTRICT OF COLUMBIA

SAMPLE NOTICE: Long Term Care Renewal Form

Notice Date: 04/01/2023 Account ID: 999999999

JOHN DOE
441 4TH STREET, NW
WASHINGTON, DC 20001

Subject: Important Message About Determining Your Medical Assistance Coverage

Dear JOHN DOE:

It is time to renew your **long term care** medical assistance coverage. You must renew your medical assistance coverage at least once a year. You must complete and return the attached renewal form and copies of all required documents by **6/30/2023** to keep your long term care medical assistance coverage.

Please return this page in the enclosed envelope

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Medical Assistance Renewal Form D2

April 1, 2023

John Doe
441 4th Street, NW
Washington, DC 20001

Integrated Case #: 99999

It is time to renew your health coverage. Please respond by **<Date Field>** to avoid gaps in your coverage.

You can renew your Health Coverage in any one of these

- **By mail:** Complete this form and mail it in the enclosed envelope to:
Attention:
Department of Human Services
Economic Security Administration
Outstation/Medicaid Renewal Unit



Consumer Alert: Beware of Medicaid Renewal Scams!



Beware of Medicaid Renewal Scams

The DC Department of Insurance, Securities and Banking (DISB) is warning District consumers to be on guard against fake Medicaid renewal scams. During the COVID-19 pandemic, the review of Medicaid eligibility for enrolled clients was paused. Jurisdictions, including the District of Columbia, are now returning to pre-pandemic renewal plans. As a result, scam artists may increase efforts to defraud unsuspecting consumers!

How is the Scam Perpetrated?

Scammers impersonate Medicaid representatives, and claim coverage is being canceled or benefits have been lost. Personal information such as social security number, Medicaid ID, and bank account information is requested immediately to renew enrollment, resulting in identity theft. Scammers may also threaten you with civil or criminal penalties and demand that you pay a fee to continue receiving benefits.



Consumer Alert: Beware of Medicaid Renewal Scams!



Know the Facts



Medicaid will not call or email individuals to ask for personal information. Renewal information is typically mailed to you. Clients can renew coverage online, by mail or in person. Importantly, there is no fee to renew Medicaid coverage. If anyone requests payment, it's a scam!

Protect Yourself

Be cautious about providing personal information over the phone or online. Never share your social security number, Medicaid ID, or bank information, or any other personally identifiable information (PII) without verifying that the request is legitimate.



If you are contacted about renewing Medicaid coverage, do not provide PII. Hang up or delete the email and contact your local Medicaid office to confirm whether there are issues.

Report Fraud

If you are the victim of a fake Medicaid renewal scam, report it to one of the following government agencies:

1. DISB Enforcement and Consumer Protection Division, 202.727.8000.
2. Federal Bureau of Investigation (FBI) Internet Crime Complaint Center ([IC3gov](https://www.ic3.gov)) or call the FBI Washington Field Office at 202.278.2000.
3. Federal Trade Commission, [ftc.gov](https://www.ftc.gov).



What Can Stakeholders Say to 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 or fill out the form and mail/fax/drop at Service Center immediately to help avoid a gap in your coverage.



Save Time! Submit Your Renewal Online!



- **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**



District Direct is available online in English, Spanish, and Amharic!



[Home](#)

[Create Account](#)

[Log in](#)

English

Español

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Welcome to District of Columbia Benefits Portal

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

[Apply Now](#)

[Learn More About Benefits](#)





Completed Renewal Form Packet: Information Needed



A completed renewal packet contains:

- Carefully reviewed answers to all questions on the renewal form.
 - A signature (wet, electronic, or telephonic signature)
 - A submission of current documentation of income and D.C. residency along with renewal form.
-
- Note: Information on verifying income, verifying residency, and relevant federal poverty level information is included in the Appendix



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



Wednesday, April 26, 2023

Agenda

- **DC Health Link: Who we are**
- **Individual & Family health insurance through DC Health Link**
- **From your District Direct account to DC Health Link**
- **'Loss of Medicaid coverage' special enrollment period (SEP)**



DC Health Link: Who We Are

Your Home for Quality Affordable Health Insurance



Individual & Family Marketplace through DC Health Link

Individual & Family 2023 Health Insurance Options through DC Health Link



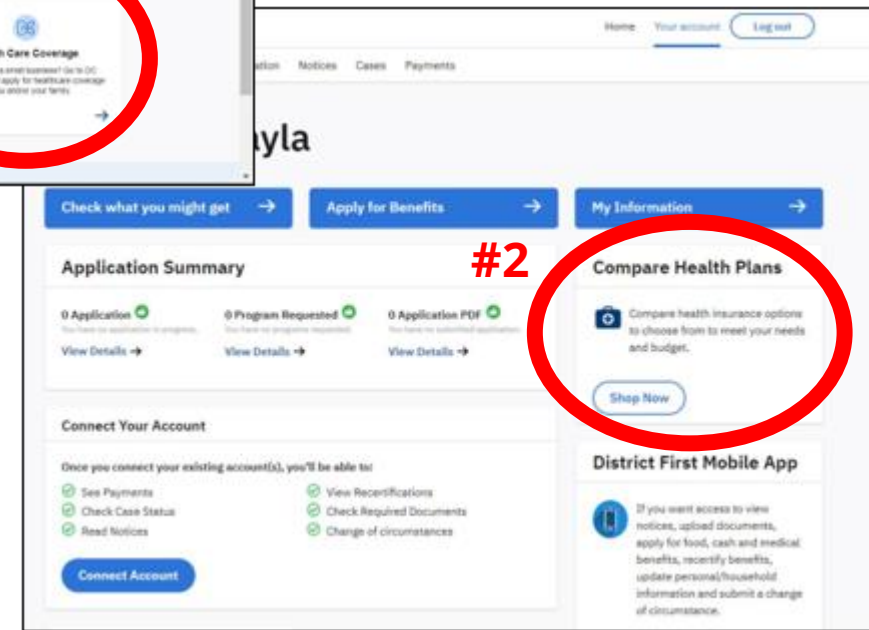
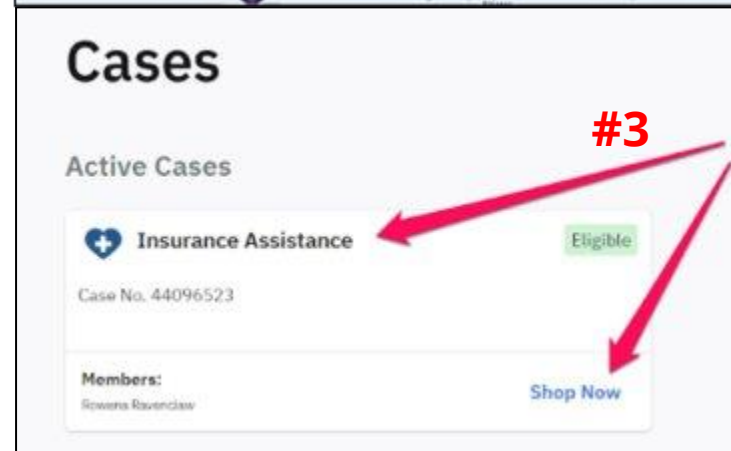
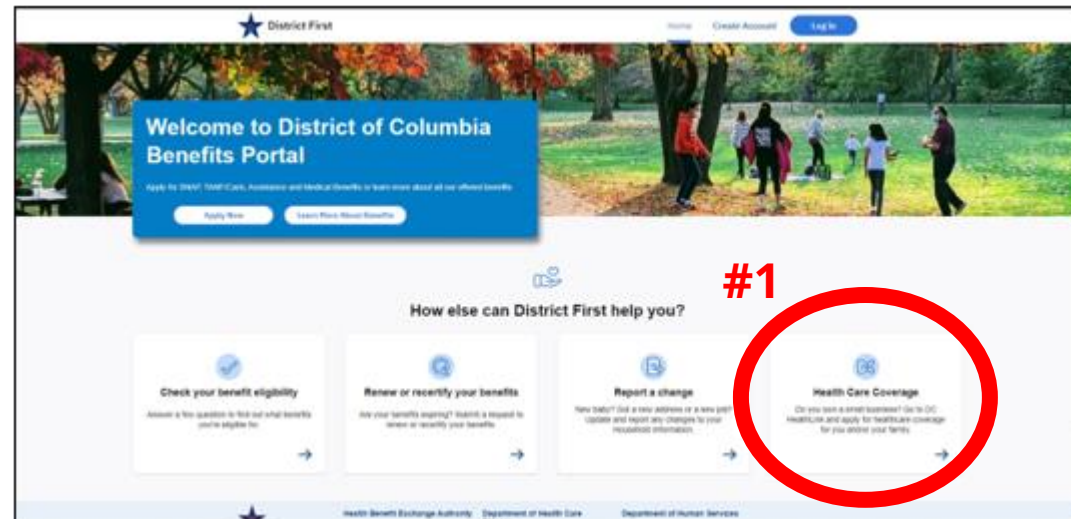
All plans are Affordable Care Act plans, covering doctors, hospitals, lab work, prescription medication, and other services.

Use our [Plan Match Tool](#) to help shop, compare and enroll into coverage.

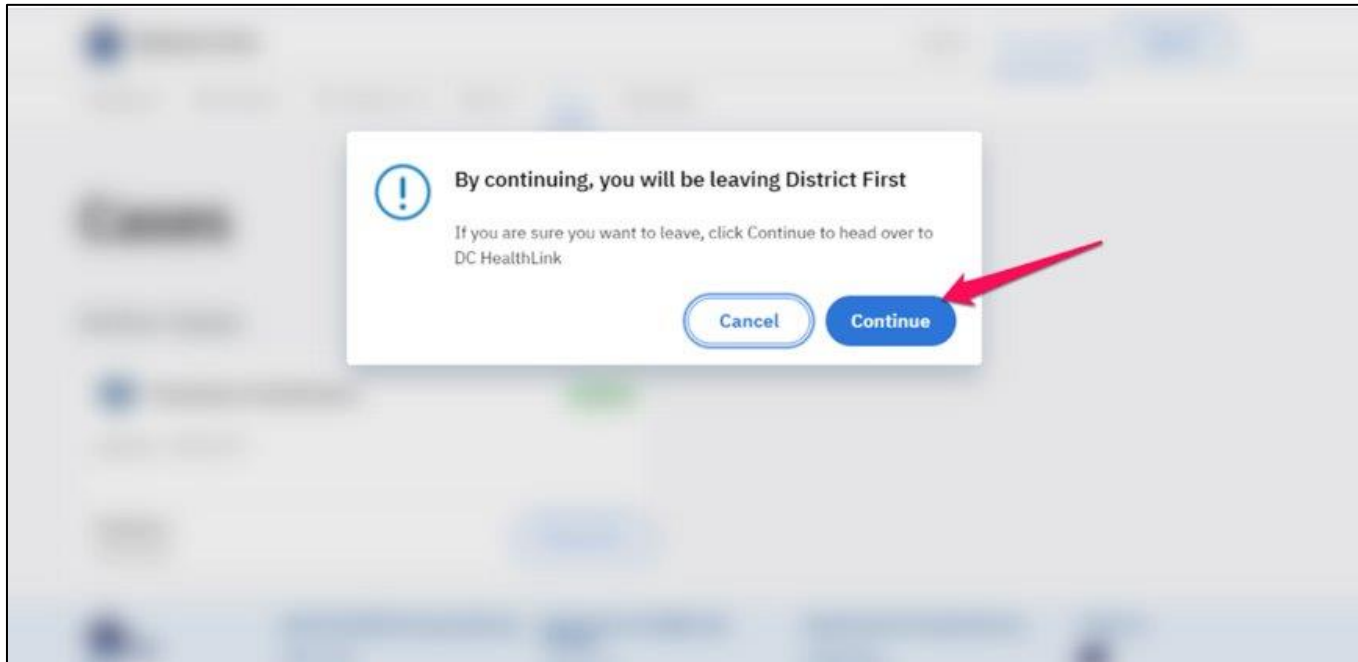
How to get to DC Health Link from your District Direct account

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
- 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



How to get to DC Health Link from your District Direct account. Con't.



After you select 'Shop Now' from your cases page of your account, you will be redirected to Enroll App, which is our enrollment platform on DC Health Link.

Use the same login username and password for your District Direct account as your login for DC Health Link.

How to get to DC Health Link from your District Direct account. Con't.

The screenshot shows the DC Health Link user interface. On the left is a blue navigation sidebar with links for 'My DC Health Link', 'Documents', 'Cost Savings', 'Messages', and 'My Account'. The main content area is titled 'My DC Health Link' and features several sections: 'Shop for health and dental plans' with a 'Shop For Plans' button (highlighted by a red arrow), 'Apply, renew, read notices or find out what documents are needed for Medicaid or tax credit assisted coverage' with a 'Medicaid & Tax Credits' button, and 'Select a Broker or Assister' with a 'Get Help Signing Up' button. Below this is a 'Choose Plan' section. It includes instructions on how to use filters, a progress indicator showing '75% Complete' (with 'Choose Plan' as the current step), and a 'CONTINUE' button. The 'Choose Plan' section displays a table of plan options:

TYPE	LEVEL	NETWORK	DEDUCTIBLE
STANDARD PLAN	Bronze	DC-Metro	\$6,350
STANDARD PLAN	Bronze	DC-Metro	\$6,350

Additional details for the first plan include: BlueChoice HMO HSA, Standard Bronze \$6,350, CareFirst, \$165.72 /Month, and a tax credit of \$304.02. A 'Help Me Sign Up' button is also visible at the bottom right of the 'Choose Plan' section.

The flow to DC Health link will depend on whether you have an existing DC Health Link account or not.

- Creating a District Direct account does not automatically register you in DC Health Link.

If you have a DC Health Link account, you'll be directed to your DC Health Link account and can shop for plans. Your tax credit will be applied towards your plan automatically.

How to get to DC Health Link from your District Direct account. Con't.



Account Setup

- Tell Us About Yourself
- Family Info

Personal Information

Enter your personal information. When you're finished, select CONTINUE.

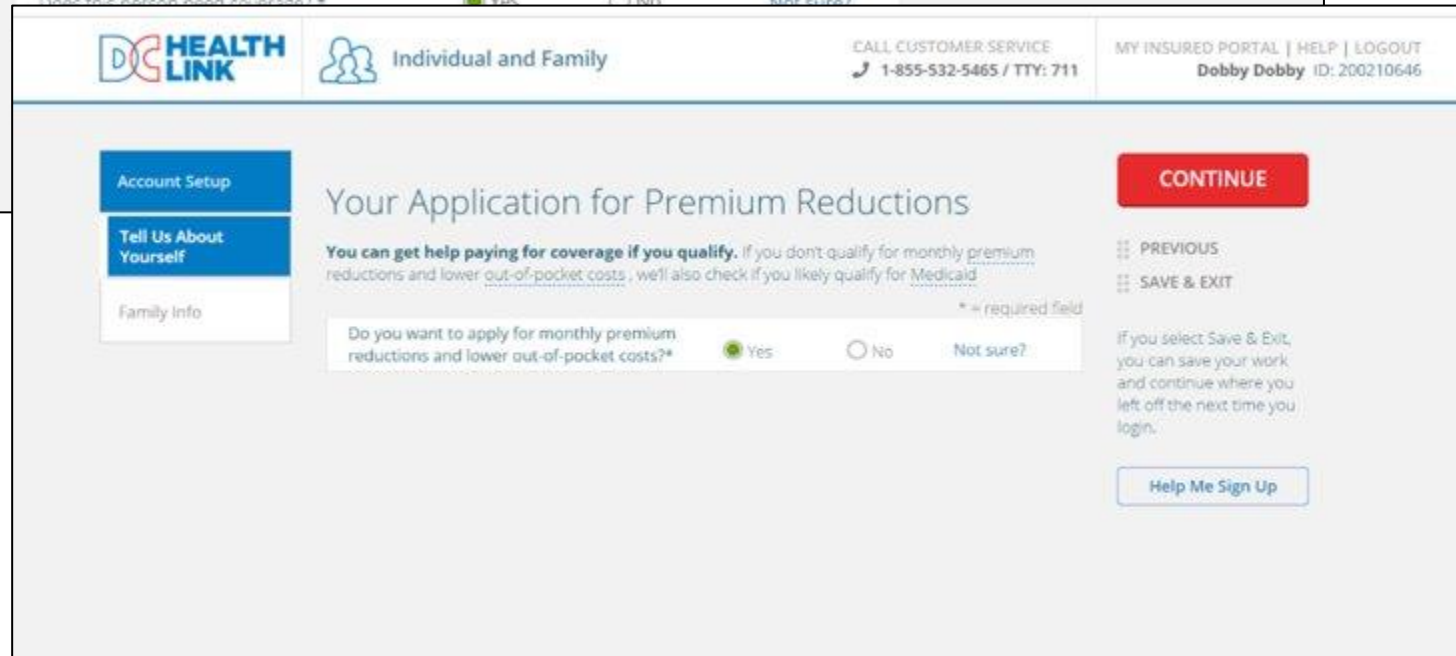
* = required field

FIRST NAME * MIDDLE NAME LAST NAME * SUFFIX: NONE

Does this person need coverage? * Yes No Not sure?

CONTINUE

If you don't have a DC Health Link account, you will be directed to the 'Personal Information' page to complete your account. You need to complete this page to register a DC Health Link account.



DC HEALTH LINK Individual and Family CALL CUSTOMER SERVICE 1-855-532-5465 / TTY: 711 MY INSURED PORTAL | HELP | LOGOUT Dobby Dobby ID: 200210646

Account Setup

- Tell Us About Yourself
- Family Info

Your Application for Premium Reductions

You can get help paying for coverage if you qualify. If you don't qualify for monthly premium reductions and lower out-of-pocket costs, we'll also check if you likely qualify for Medicaid.

* = required field

Do you want to apply for monthly premium reductions and lower out-of-pocket costs? * Yes No Not sure?

CONTINUE

PREVIOUS

SAVE & EXIT

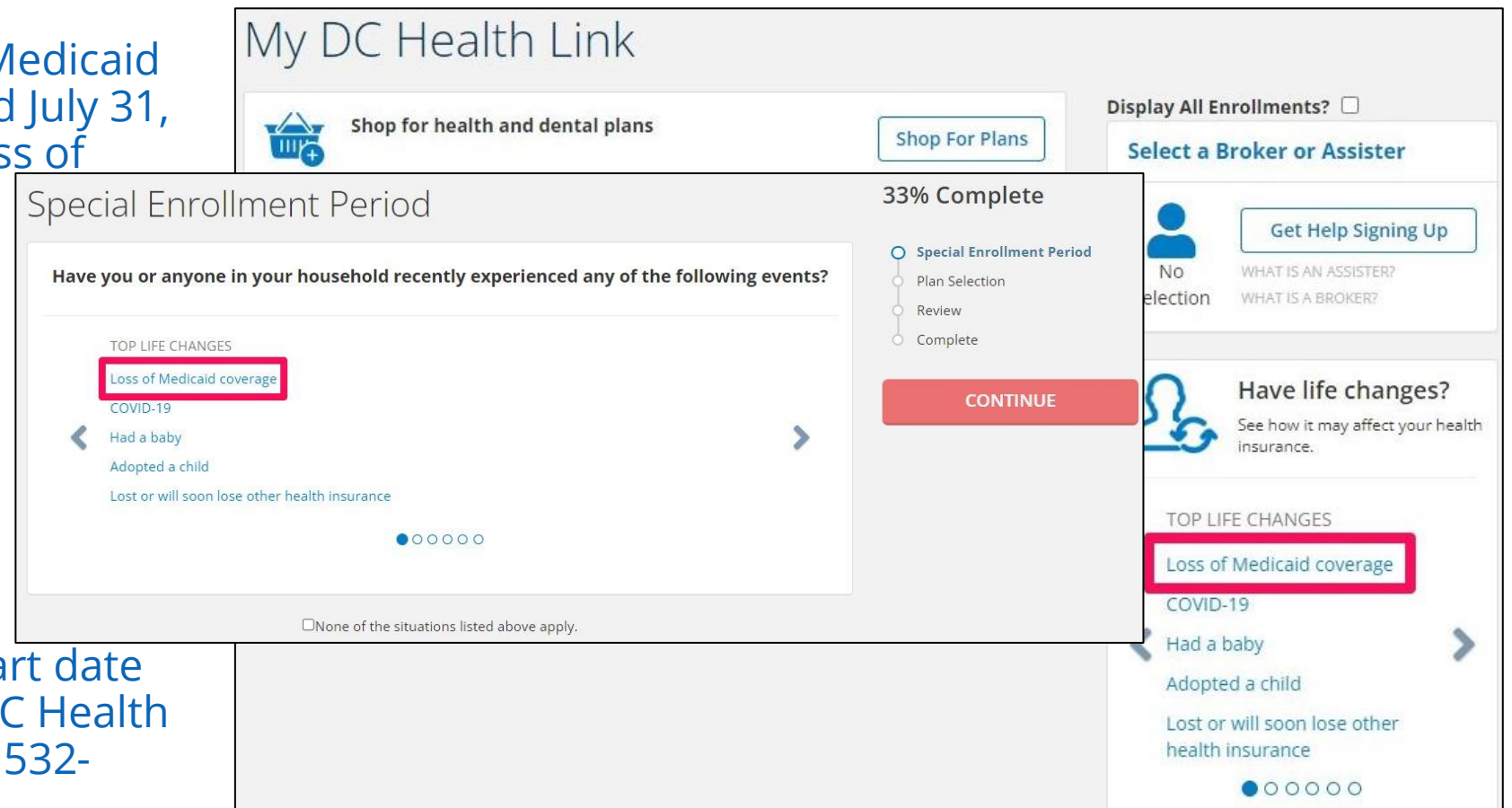
If you select Save & Exit, you can save your work and continue where you left off the next time you login.

Help Me Sign Up

If you were determined eligible for Insurance Assistance through District Direct, your tax credit will be applied towards your plan automatically.

'Loss of Medicaid Coverage' Special Enrollment Period (SEP)

- If you no longer qualify for Medicaid between March 31, 2023 and July 31, 2024, you can select the “Loss of Medicaid coverage” SEP to enroll into coverage.
- Coverage start dates of either the first of the month or the first of the following month.
- If your Medicaid terminated earlier than the coverage start date options displayed, call the DC Health Link Contact Center at (855) 532-5465 / TTY:711



My DC Health Link

Shop for health and dental plans

Shop For Plans

Display All Enrollments?

Select a Broker or Assister

Get Help Signing Up

33% Complete

- Special Enrollment Period
- Plan Selection
- Review
- Complete

CONTINUE

Have you or anyone in your household recently experienced any of the following events?

TOP LIFE CHANGES

- Loss of Medicaid coverage
- COVID-19
- Had a baby
- Adopted a child
- Lost or will soon lose other health insurance

None of the situations listed above apply.

Have life changes?
See how it may affect your health insurance.

TOP LIFE CHANGES

- Loss of Medicaid coverage
- COVID-19
- Had a baby
- Adopted a child
- Lost or will soon lose other health insurance

How Do I Enroll?

- Visit DCHealthLink.com to log in or create an account.
- Use our [Plan Match Tool](#) to help shop and compare plans.
- Visit an enrollment center to meet with a certified DC Health Link Assister. Search for an Assister near you on our [trained expert page](#) on DCHealthLink.com.
- **Questions?** Call us at (855) 532-5465 / TTY: 711. We're open Monday-Friday, from 8am-6pm.

Thank You!

Katie Nicol, Deputy Director of Marketplace Innovation, Policy, and Operations at the DC Health Benefit Exchange Authority



Communication on Medicaid Renewal– Outreach to Beneficiaries



- 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.
- The District will send emails to beneficiaries with the appropriate information to let them know about Medicaid Renewal and the need to update their address and renew their coverage.
- DHCF is training groups such as this one on how to update contact information and renew Medicaid



Communication on Medicaid Renewal–External Outreach




- The District wants to join meetings of key stakeholders to explain Medicaid Renewal
 - DHCF staff would attend meetings hosted by your stakeholder group -or that you know about –*send invites to us via email at Medicaid.restart@dc.gov.*
- The District is providing ~monthly Stakeholder Trainings to guide stakeholders through the District Direct enrollment process, updating addresses, and renewing Medicaid –next is **12:00 PM, Monday, May 22nd**
- The District created a website with information on Medicaid Renewal and the End of the Public Health Emergency that will host the Unwinding Plan, Stakeholder Toolkit, meeting info, etc.
- The District is hosting regular Community Stakeholder meetings such as this every other week - continuing every-other-Wednesday at 2:30 p.m. -**next is on Wednesday, May 10th**
 - *Please email Medicaid.restart@dc.gov to join the meetings and related mailing list if not on it already*
- The District has hired a contractor to place visuals and audio Advertisements for Medicaid Renewal around the District starting this month and continuing throughout 2023.




Visual Advertisements – Don't Wait to Update!






Did you know all DC residents with Medicaid, Alliance, or the Immigrant Children's Program must start renewing their coverage again?



Don't miss out on important information. If you haven't already, take time today to update your address, phone number, and/or email address at districtdirect.dc.gov so that DHCFL knows where to send your Medicaid renewal letter.



Then check your mail for info on how to renew. If you need help, please call us at **202-727-5355**.






GOVERNMENT OF THE DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

Don't Wait to Update!

All DC residents with **Medicaid** must renew their coverage this year.

Update your contact info at districtdirect.dc.gov.





Medicaid Renewal: Next Steps



- Advertisements and outreach are ongoing. Look for our messaging on advertisements and fliers throughout the community.
- Automated Calls and Text will start next month.
- DHCF will host ~monthly trainings on District Direct and how to complete Medicaid renewal form. The next monthly training will be May 22, 2023 @ 3:00 PM.
- The next Community Meeting on Medicaid Renewal will be May 10, 2023 @ 2:30 PM and continue every 2 weeks. The meetings will start being 1 hour in length.
- Please contact Medicaid.renewal@dc.gov for more information or to get connected to the meetings and trainings.



Questions and Comments



Learn more about DC Medicaid Renewals:

<https://dhcf.dc.gov/medicaid-renewal>

Medicaid Renewal

Medicaid.Renewal@dc.gov



Appendix A



Many Types of Documents are Acceptable Verifications of Income

The following types of documents can be used to verify income:

1. Recent pay stubs (four weekly, two bi-weekly, or one monthly);
2. Completed employer verification form;
3. Statement showing retirement income, disability income, workers compensation income or pension statement;
4. Bank/Checking account statement;
5. Paper, electronic, or telephonic documentation;
6. A written statement which explains the discrepancy if other documentation is not available.



Appendix B: Acceptable Verifications (Residency)



The following types of documents can be used to verify residency:

- An active lease agreement, certified deed, or mortgage statement with a District and their name;
- Phone or Utility bill within the past 2 months;
- D.C. Voter Registration Card;
- Non-expired D.C. motor vehicle registration or D.C. DMV identification card;
- Cancelled check or receipt of mortgage or rental payments within the past 2 months;
- Utility bills and payment receipts with a D.C. address within the past 2 months;
- Non-expired automobile insurance statement with a D.C. residency address;
- D.C. One Card; or
- Completed and signed proof of D.C. Residency Form



Eligibility Categories are Based on Federal Poverty Limits

Parent Caretaker 2023 FPL

The District covers this population with household income up to 216% of the FPL (with an additional 5% disregard)

Category	Parent/Caretaker/Relative
Threshold in FPL	216% + 5% disregard
1 person household, monthly	\$2,685
2 person household, monthly	\$3,632
3 person household, monthly	\$4,578
4 person household, monthly	\$5,525
5 person household, monthly	\$6,472
6 person household, monthly	\$7,418
7 person household, monthly	\$8,365
8 person household, monthly	\$9,311

Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services

Infants and Children 2023 FPL

The District covers this population with household income up to 319% and 216% of the FPL (with an additional 5% disregard)

Category	Children (0-18), 319%	Children (19-20), 216%
Threshold in FPL	319% + 5% disregard*	216% + 5% disregard*
1 person household, monthly	\$3,937	\$2,685
2 person household, monthly	\$5,324	\$3,632
3 person household, monthly	\$6,712	\$4,578
4 person household, monthly	\$8,100	\$5,525
5 person household, monthly	\$9,488	\$6,472
6 person household, monthly	\$10,876	\$7,418
7 person household, monthly	\$12,263	\$8,365
8 person household, monthly	\$13,651	\$9,311

Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services



Eligibility Categories are Based on Federal Poverty Limits

Pregnant 2023 FPL	
<i>The District covers this population with household income up to 319% of the FPL (with an additional 5% disregard)</i>	
Category	Pregnant Individual
Threshold in FPL	319% + 5% disregard
2 person household, monthly	\$5,324
3 person household, monthly	\$6,712
4 person household, monthly	\$8,100
5 person household, monthly	\$9,488
6 person household, monthly	\$10,876
7 person household, monthly	\$12,263
8 person household, monthly	\$13,651
Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services	

Adults without Dependent Children (Childless Adults) 2023 FPL	
<i>The District covers this population with household income up to 210% of the FPL (with an additional 5% disregard)</i>	
Category	Adults Without Dependent Children
Threshold in FPL	210% + 5% disregard*
1 person household, monthly	\$2,612
2 person household, monthly	\$3,533
3 person household, monthly	\$4,454
4 person household, monthly	\$5,375
5 person household, monthly	\$6,296
6 person household, monthly	\$7,217
7 person household, monthly	\$8,138
8 person household, monthly	\$9,059
Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services	



Eligibility Category QMB-Federal Poverty Limits

QMB 2023 FPL		
<i>The District covers this population with household income up to 300% of the FPL (with an additional \$20 for QMB Plus)</i>		
Category	QMB	QMB Plus
Threshold in FPL	300% + \$20	100% + \$20
1 person household, monthly	\$3,665	\$1,235
2 person household, monthly	\$4,950	\$1,663
3 person household, monthly	\$6,235	\$2,092
4 person household, monthly	\$7,520	\$2,520
5 person household, monthly	\$8,805	\$2,948
6 person household, monthly	\$10,090	\$3,377
7 person household, monthly	\$11,375	\$3,805
8 person household, monthly	\$12,660	\$4,233
Figures compiled using 2023 FPL numbers distributed by the U.S. Department of Health and Human Services (+5% income disregard)		



Appendix C: Key Tips to Connect District Direct Accounts to Beneficiaries



- Some individuals recertifying will need to connect their account to their established case profile in District Direct.
 - Note:** This is a result of the District switching from the legacy eligibility processing system (ACEDS) during the PHE
- Primary Applicants can connect their account using their Social Security Number, Medicaid ID Number, or Person Reference Number
- A SSN is **NOT** needed to connect a newly created District Direct account to a primary applicant's case profile
 - Note:** Primary applicants in a household can use their Personal Reference Number instead of an SSN
- Please note that the name used to connect must match what is currently in the system. Names listed on notices reflect what is in the system. For example, if the name in the system is John Doe-Smith, that must be used to connect -instead of John Doe.