



Medicaid Transition Small Stakeholder Meeting

February 24, 2023

Agenda

- Welcome
- Overview of Transition Process and Timeline
 - Renewals and Pending Ineligible
 - Sample heads up letter, sample PIN letter
 - Posters and Publications (Key Messages and Take Aways)
 - Resources for finding other coverage
- Questions





Medicaid Transition Back to Regular Eligibility Operations - *Update*

- Congress has set a time for Medicaid to return to regular eligibility requirements: **April 1, 2023.**
- The Medicaid transition back to regular operations is now separate (decoupled) from the federal Public Health Emergency (PHE) timeline.
- Beneficiaries who have had continuous coverage due to the federal PHE will have to **demonstrate eligibility** to keep their coverage.
- **April 1** is the beginning of the time in which beneficiaries can lose coverage for failure to renew eligibility and/or have become ineligible due to a change in circumstance.



Medicaid Transition – *Update continued*

- Per CMS guidance, a state cannot initiate renewal for more than 1/9th of its entire caseload in any given month.
- CMS requires states to submit an *Eligibility Renewal Distribution Plan* to CMS in February.
- NH has developed an *Eligibility Renewal Distribution Plan* and is refining it in response to the newest requirements and ongoing discussions with CMS.
- CMS requires states to make monthly reports reflecting metrics that monitor state enrollment/eligibility activities and trends.

Changes in Enrollment- NH Medicaid

	Feb 28 2019	Feb 29 2020	Feb 28 2021	Feb 20 2023
Standard Medicaid	128,252	127,356	143,182	154,572 (over 20% increase over 2019 figures)
Granite Advantage (Expansion Group)	51,240	51,574	72,392	95,752 (86% increase over 2019 figures)
Total	179,492	178,930	215,574	250,324 (39% increase over 2019 figures)



Medicaid 'Protected Individuals' during COVID PHE

Protected Individuals - Individuals who no longer meet eligibility requirements and/or have overdue administrative tasks to complete their redeterminations placing them at risk of losing coverage when the continuous coverage period ends.

- **Overdue Redetermination** – Individuals who have not completed their renewals will be provided an opportunity to renew based on our State Plan for prioritizing and distributing renewals.
- **Pending Ineligible** – Individuals who have completed a renewal within the past 12-month and subsequently had a change in circumstance (e.g., categorically ineligible) in their 12-month eligibility period.

Individuals in 'Protected Status' in Medicaid

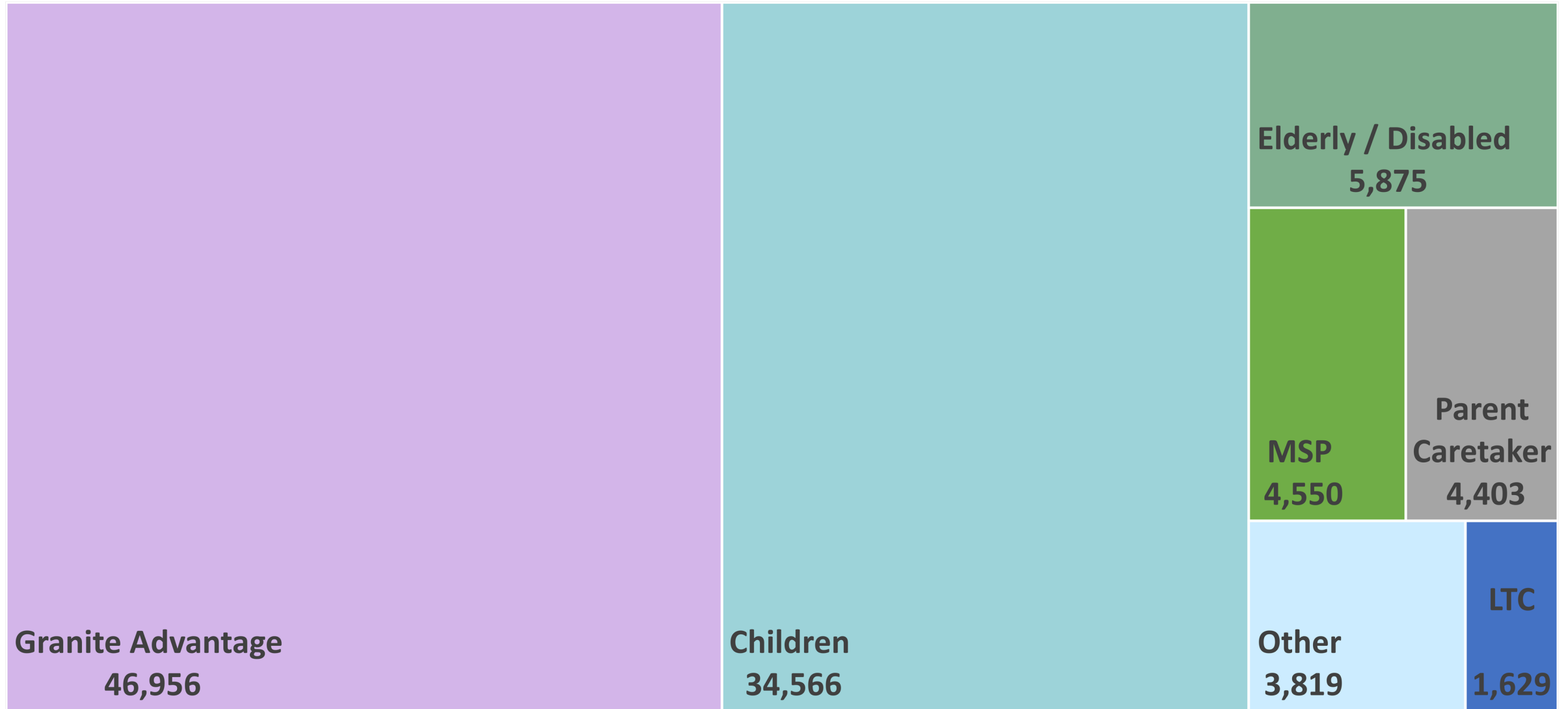
Pending Ineligible
28,996

**Overdue
Redeterminations**
72,802

Total Protected
101,798



NH Protected Medicaid Individuals by Eligibility Category



Protected Population Count as Households

Pending Ineligible
21,781

**Overdue
Redeterminations**
47,532

Total Protected
69,313



NH is ahead of “unwind” curve

NH significantly reduced overdue Medicaid redeterminations by proactively engaging with families and community partners. This effort facilitated continuity of healthcare coverage for vulnerable Granite Staters.

Successful results

~ 32K

PHE Renewal Campaign

Proactive outreach to protected households reduced the volume of granite staters at risk of Medicaid closure.

~2K

Voluntary Closures

MCO, provider and community engagement facilitated voluntary closure for households no longer benefiting from Medicaid.

~9K

Lost Contact Campaign

Text, e-mails and social media posts enabled DHHS to reach households who changed address.





What To Expect

- To keep Medicaid coverage, it is *no longer optional* to complete redeterminations or respond to Department requests for information about eligibility status.
- ***Failure to complete redeterminations or respond to any DHHS requests for information will result in termination of Medicaid coverage.***
- DHHS has begun to send renewal notices and will continue over the next several months to those who must complete a redetermination or provide information to keep their coverage.
- These notices are on **yellow paper** or posted to individuals' NH EASY accounts **highlighted in yellow.**

New Hampshire's Renewal Distribution Plan

- New Hampshire's Draft Renewal Distribution Plan has been preliminarily approved by CMS.
- The Plan assigns a renewal month over the next 12 months to all of the households in the protected group that need a renewal, distributed across the 12-month period beginning March 2023. This allows the state to prepare the most vulnerable - people in active treatment or with chronic conditions, children, people who are elderly or living with disabilities – to mitigate interruptions in coverage wherever possible.
- The Plan also accounts for the standard renewals that will occur each month for those in Medicaid not in the protected group. The Plan's distribution of renewals allows DHHS to avoid exceeding the 1/9th limit.
- Impacted beneficiaries will be notified of their assigned redetermination date through NH Easy, if they have an online account, or by mail if they do not. NH DHHS began notification of newly assigned redetermination dates on or about February 15.
- **April 1** is the earliest date any NH Medicaid enrollee who has been protected during this period can be disenrolled.



Monthly Distribution Individuals (Estimated)

Grouping	Mar-2023	Apr-2023	May-2023	Jun-2023	Jul-2023	Aug-2023	Sep-2023	Oct-2023	Nov-2023	Dec-2023	Jan-2024	Feb-2024	Total
Lost contact	2,378	2,905	534	586	282								6,685
Financially & procedural ineligible		9,326	7,250										16,576
Categorically & Procedural Ineligible			3,948										3,948
GA Medicare & Procedural			361										361
Cases with adults			1,071	7,460	7,783								16,314
MSP Only					180	2,342							2,522
Cases with children						11,149	8,921						20,070
Vulnerable (LTC, Disabled (not elderly))							3,664						3,664
Suspended (Correctional facility)							1,027						1,027
SNAP/Cash/Aligned Renewals	27	168	122	290	116	93	141	138	176	180	182	2	1,635
Renewals	2,405	12,399	13,286	8,336	8,361	13,584	13,753	138	176	180	182	2	72,802
*Pending Ineligible	24,139	4,857											28,996
Grand Total Individuals	26,544	17,256	13,286	8,336	8,361	13,584	13,753	138	176	180	182	2	101,798
% Estimated to Close	82%	66%	52%	53%	51%	49%	38%	41%	40%	41%	37%	90%	58%
Est. Pending Ineligible & Admin Closures	21,881	11,421	6,863	4,401	4,284	6,697	5,284	57	70	74	68	2	58,961

*Pending Ineligible	Mar-2023	Apr-2023	Total
Pending Ineligible with rede in first 2 months	4,468	2,841	7,309
Pending Ineligible no Rede	19,671	2,016	21,687
Total	24,139	4,857	28,996

First (3) Months Summary	Individuals	Percent
Impacted individuals	57,086	56%
Estimated to close	40,165	58%
Est % total protected to close in 1st 3M		39%



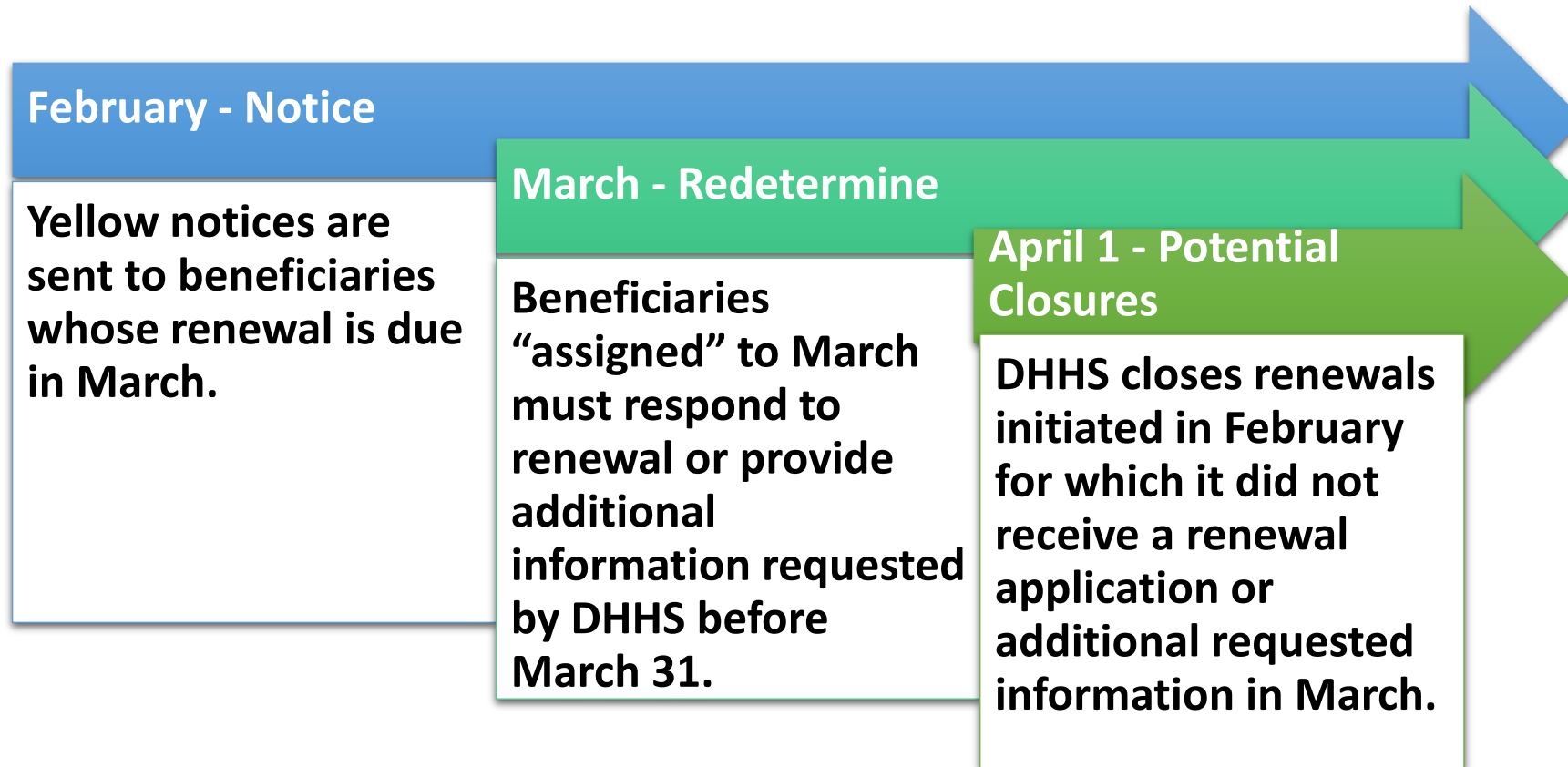
Pending Ineligible Notice and Opportunity

- There are some in the “Pending Ineligible” protected population who will not be re-assigned a renewal date because they have redetermined within the last 12 months and then subsequently submitted a “change in circumstance” which CMS has determined means they do not require a full renewal. There are approximately ~21.7K individuals in this group.
- Although they will not be re-assigned a renewal date, these Pending Ineligible households will receive notices about their coverage and the opportunity to update their information in two ways:
 - **Failed to Verify** – Despite their redetermination and change in circumstances, these cases are still missing verifications. DHHS will send these households a new verification checklist w/a 10-day due date.
 - **Financially Ineligible Group** – These households will be run through a data matching program to verify their income, known as VCI (verify current income). After VCI data match has been sent - if no match is received or income is lower than previously reported, HEIGHTS will send a Request to Verify current income w/a 10-day due date.





Initiation of March Renewals Sample Anticipated Timeline

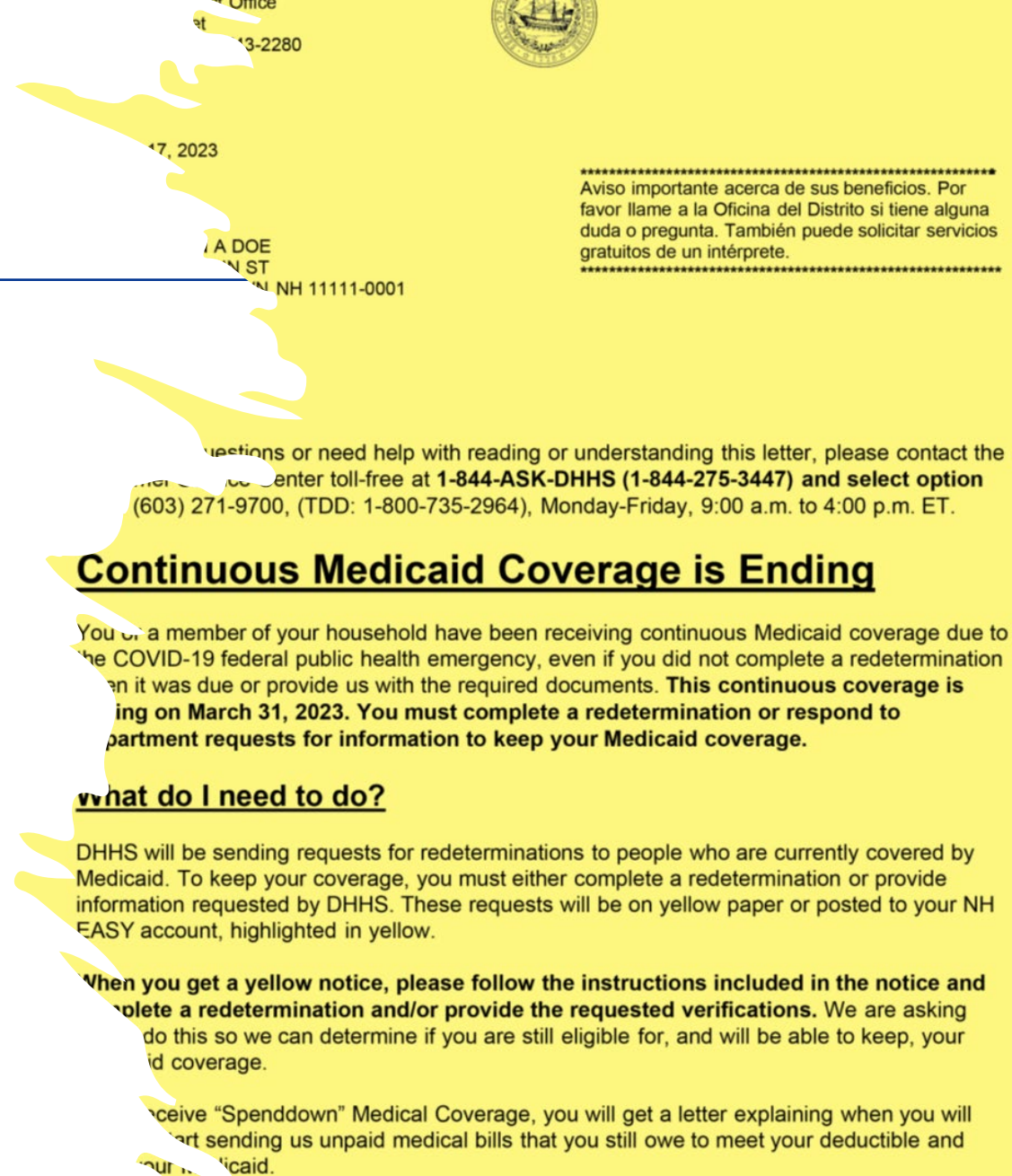


‘Time to respond’ is from the date of notice to end of following month. This cycle repeats over the 12-month unwind period.



Sample 'Heads Up' Letter

<https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/documents2/updatedaddressyellowletter.pdf>



“Heads Up” End of Continuous Coverage Letter

Bureau of Family Assistance
Claremont District Office
17 Water Street
Claremont, NH 03743-2280



NH DEPARTMENT OF
HEALTH AND HUMAN SERVICES

January 17, 2023

JOHN A DOE
123 MAIN ST
SOMETOWN NH 11111-0001

Aviso importante acerca de sus beneficios. Por favor llame a la Oficina del Distrito si tiene alguna duda o pregunta. También puede solicitar servicios gratuitos de un intérprete.

If you have questions or need help with reading or understanding this letter, please contact the Customer Service Center toll-free at **1-844-ASK-DHHS (1-844-275-3447)** and **select option #3** or (603) 271-9700, (TDD: 1-800-735-2964), Monday-Friday, 9:00 a.m. to 4:00 p.m. ET.

Continuous Medicaid Coverage is Ending

You or a member of your household have been receiving continuous Medicaid coverage due to the COVID-19 federal public health emergency, even if you did not complete a redetermination when it was due or provide us with the required documents. **This continuous coverage is ending on March 31, 2023. You must complete a redetermination or respond to Department requests for information to keep your Medicaid coverage.**

What do I need to do?

DHHS will be sending requests for redeterminations to people who are currently covered by Medicaid. To keep your coverage, you must either complete a redetermination or provide information requested by DHHS. These requests will be on yellow paper or posted to your NH EASY account, highlighted in yellow.

When you get a yellow notice, please follow the instructions included in the notice and complete a redetermination and/or provide the requested verifications. We are asking you to do this so we can determine if you are still eligible for, and will be able to keep, your Medicaid coverage.

If you receive “Spendedown” Medical Coverage, you will get a letter explaining when you will need to start sending us unpaid medical bills that you still owe to meet your deductible and open your Medicaid.

Ways to complete your redetermination or provide requested information:

1. **Online:** Through your NH EASY account <https://nheasy.nh.gov> if you do not have an NH EASY account, you can create one today using this same link.
2. **By mail:** Centralized Scanning Unit, PO Box 181, Concord, NH 03302.
3. **In person:** Visit one of our District Offices, locations can be found at <https://www.dhhs.nh.gov/about-dhhs/locations-facilities#locations>

Once you complete your redetermination and/or all requested information is provided, you will receive a notice of decision informing you of the status of your Medicaid eligibility.

What should I do if I no longer need Medicaid coverage?

If you no longer need Medicaid coverage, you can voluntarily request to end your coverage by using one of the three options above or by calling the Customer Service Center at one of the numbers listed at the top and bottom of this letter.

Options for those who are no longer eligible for Medicaid:

If you are no longer eligible for Medicaid and still need insurance, you can contact the New Hampshire Navigators to explore other health insurance options. New Hampshire has two Health Insurance Navigators that provide health insurance enrollment assistance in person, virtually, and by phone, at no cost to you.

New Hampshire's Navigators are:

- First Choices Services; 1-877-211-NAVI or (603) 931 3858; <https://acanavigator.com/nh/home>
- Health Market Connect; 1-800-208-5164; <https://hmcnh.com>

You can also visit the Federal Health Insurance Marketplace at <https://www.healthcare.gov/>, or call the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325).

Need Help?

Visit one of our District Offices in person or contact the DHHS Customer Service Center toll-free at **1-844-ASK-DHHS (1-844-275-3447)** and **select option #3** or (603) 271-9700, (TDD: 1-800-735-2964), Monday-Friday, 9:00 a.m. to 4:00 p.m. ET.

PIN Letter

Family Services Specialist
Bureau of Family Assistance
Manchester District Office
1050 Perimeter Road
Manchester NH 03103



NH DEPARTMENT OF HEALTH AND HUMAN SERVICES

February 03, 2023

JOHN DOE
123 MAIN ST
CONCORD NH 01234

Aviso importante acerca de sus beneficios. Por favor llame a la Oficina del Distrito si tiene alguna duda o pregunta. También puede solicitar servicios gratuitos de un intérprete.

Your Medicaid Redetermination is due in April 2023.

A request to complete your redetermination will be sent to you at least 30 days before it is due. This request will be on YELLOW paper. Please read the entire form and follow the instructions. You must complete your redetermination and respond to the Department's requests for information, **by the 15th of your redetermination month to see if you are still eligible for Medicaid.**

If you do not complete your redetermination or respond to the Department's requests for information by the end of April 2023 your Medicaid will close and your benefits will end.

Make it "NH EASY" on yourself

Many people use NH EASY because it is a fast and easy way to complete redetermination, upload verifications, and more using their phone, desktop, or tablet.

To activate your personal account, use your PIN and follow the instructions below:

Your PIN: **I3KSM**, which is valid for the next (15) days.

Go to the NH EASY URL at <https://nheasy.nh.gov>

From there, select the "Create Account" button and follow the instructions on each screen.

NH EASY can help you manage your benefits online with these features:

- Complete redeterminations
- Add new benefits and report changes

- Take pictures of your proofs, upload them, and check on processing status
- Opt in for important text message reminders such as upcoming appointments
- Find important information on your benefit status
- Reschedule appointments if you have a conflict
- "Go Green" to get Notices online, much faster than waiting for "snail mail" delivery
- Enroll in your health plan, if eligible
- Apply for WIC
- Get information about becoming a foster or adoptive parent
- Search for DHHS forms
- Explore other programs and services offered by DHHS.

Pending Ineligible - Financially Ineligible #1

Bureau of Family Assistance
Claremont District Office
17 Water Street
Claremont, NH 03743-2280



NH DEPARTMENT OF HEALTH AND HUMAN SERVICES

February 24, 2023

JOHN A DOE
123 MAIN ST
SOMETOWN NH 11111-0001

Aviso importante acerca de sus beneficios. Por favor llame a la Oficina del Distrito si tiene alguna duda o pregunta. También puede solicitar servicios gratuitos de un intérprete.

****IMPORTANT** **IMPORTANT** **IMPORTANT****

You are receiving this letter because we reviewed your case and based on your previously reported wages you are no longer eligible for Medicaid.

If you believe this is incorrect or your income has changed please provide verification of your gross wages by 3/7/2023. This information is needed to determine if you are still eligible for Medicaid. If you do not give us this proof, your medical assistance will end on 3/31/2023.

Gross wages means your pay before deductions. It must include all your tips, bonuses, commissions, overtime, and any other cash or in-kind benefits you got from your employer or through self-employment.

If you work for someone:

- Enclosed is an Employment Verification form. You may have your employer complete this form or have your employer give us a letter, on letterhead, giving us the hours you worked with your gross wages for the last 4 weeks; OR
- You may give us copies of your last 4 weeks of pay stubs. Your pay stubs must show the week dates, the number of hours worked per week, and your gross wages.

If you are no longer working for the employer you previously reported, you must still have the enclosed form completed by your former employer to verify the employment ended and return it to us.

If you are self-employed:

- Provide all pages of your most recently filed income tax return, or
- Profit and loss statements for the past 3 months.

Case# 12345678
ID : CN9996

Ways to send us the proofs requested:

1. **Online:** Through your NH EASY account <https://nheasy.nh.gov>. If you do not have an NH EASY account, you can create one today using this same link.
2. **By mail:** Centralized Scanning Unit, PO Box 181, Concord, NH 03302.
3. **In person:** Visit one of our District Offices, locations can be found at <https://www.dhhs.nh.gov/about-dhhs/locations-facilities#locations>.

If you no longer need Medicaid coverage, you can voluntarily request that your coverage end, using any of the ways above or by calling our Customer Service Center toll-free at 1-844-ASK-DHHS (1-844-275-3447) or (603) 271-9700 and select option #3.

Options for those who are no longer eligible for Medicaid:

If you are no longer eligible for Medicaid and still need insurance, you can contact the New Hampshire Navigators to explore other health insurance options. New Hampshire has two Health Insurance Navigators that provide health insurance enrollment assistance in person, virtually, and by phone, at no cost to you.

New Hampshire's Navigators are:

- First Choices Services; 1-877-211-NAVI or (603) 931 3858; <https://acanavigator.com/nh/home>
- Health Market Connect; 1-800-208-5164; <https://hmcnh.com>

You can also visit the Federal Health Insurance Marketplace at <https://www.healthcare.gov/>, or call the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325).

Need Help?

If you have questions or need help with reading or understanding this letter, please contact the Customer Service Center toll-free at **1-844-ASK-DHHS (1-844-275-3447) and select option #3** or (603) 271-9700, (TDD: 1-800-735-2964), Monday-Friday, 9:00 a.m. to 4:00 p.m. ET.

Case# 12345678
ID : CN9996

Page 2 of 2

Pending Ineligible - Financially Ineligible #2

Bureau of Family Assistance
Claremont District Office
17 Water Street
Claremont, NH 03743-2280



NH DEPARTMENT OF HEALTH AND HUMAN SERVICES

February 23, 2023

JOHN A DOE
123 MAIN ST
SOMETOWN NH 11111-0001

Aviso importante acerca de sus beneficios. Por favor llame a la Oficina del Distrito si tiene alguna duda o pregunta. También puede solicitar servicios gratuitos de un intérprete.

****IMPORTANT** **IMPORTANT** **IMPORTANT****

We reviewed your case and your previously reported wages do not match our new income records so we need more information.

You must give the Department proof of your gross wages by 3/6/2023, so we can determine if you are still eligible for Medicaid. If you do not give us this proof, your medical assistance will end on 3/31/2023.

Gross wages means your wages before deductions. It must include all your tips, bonuses, commissions, overtime, and any other cash or in-kind benefits you got from your employer or through self-employment.

If you work for someone:

- Enclosed is an Employment Verification form. You may have your employer complete this form or have your employer give us a letter, on letterhead, giving us the hours you worked with your gross wages for the last 4 weeks; OR
- You may give us copies of your last 4 weeks of pay stubs. Your pay stubs must show the week dates, the number of hours worked per week, and your gross wages.

If you are no longer working for the employer you previously reported, you must still have the enclosed form completed by your former employer to verify the employment ended and return it to us.

If you are self-employed:

- Provide all pages of your most recently filed income tax return, or
- Profit and loss statements for the past 3 months.

Ways to send us the proofs requested:

1. **Online:** Through your NH EASY account <https://nheasy.nh.gov>. If you do not have an NH EASY account, you can create one today using this same link.
2. **By mail:** Centralized Scanning Unit, PO Box 181, Concord, NH 03302.
3. **In person:** Visit one of our District Offices, locations can be found at <https://www.dhhs.nh.gov/about-dhhs/locations-facilities#locations>.

Please keep your original documents and give us copies.

Remember, you must report *any* changes that might affect your medical coverage. You must report the change within 10 calendar days of when the change happens. Please report changes for both you and other people in your household, for example, if someone moves, or if someone's income changes. Or if your household changes, for example, someone in your household marries or divorces, becomes pregnant, or has or adopts a child. Delays in reporting and verifying changes may result in your household getting benefits or services in error. You must pay back any benefits or services received in error, regardless of whether you made a mistake in the information you gave, or if you failed to provide it.

If you are having trouble getting the proofs, don't understand what is needed, or need help getting the proof, contact us before the due date. Our contact information is above.

If you no longer need Medicaid coverage, you can voluntarily request that your coverage end, using any of the ways above or by calling our Customer Service Center toll-free at 1-844-ASK-DHHS (1-844-275-3447) or (603) 271-9700 and select option #3.

Options for those who are no longer eligible for Medicaid:

If you are no longer eligible for Medicaid and still need insurance, you can contact the New Hampshire Navigators to explore other health insurance options. New Hampshire has two Health Insurance Navigators that provide health insurance enrollment assistance in person, virtually, and by phone, at no cost to you.

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- Health Market Connect; 1-800-208-5164; <https://hmcnh.com>

You can also visit the Federal Health Insurance Marketplace at <https://www.healthcare.gov/>, or call the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325).

Need Help?

If you have questions or need help with reading or understanding this letter, please contact the Customer Service Center toll-free at **1-844-ASK-DHHS (1-844-275-3447)** and **select option #3** or (603) 271-9700, (TDD: 1-800-735-2964), Monday-Friday, 9:00 a.m. to 4:00 p.m. ET.

Pending Ineligible - Failure to Verify

Department of Health and Human Services
Bureau of Family Assistance
PO Box 181
Concord, NH 03302



NH DEPARTMENT OF HEALTH AND HUMAN SERVICES

February 24, 2023

JOHN DOE
123 MAIN ST
HOOKSETT NH 03106

Aviso importante acerca de sus beneficios. Por favor llame a la Oficina del Distrito si tiene alguna duda o pregunta. También puede solicitar servicios gratuitos de un intérprete.

If you have questions or need help with reading or understanding this letter, please contact the Medicaid Service Center (NH only) toll-free at **1-844-ASK-DHHS** (1-844-275-3447) or (603) 271-9700 **and select option #3**, (TDD: 1-800-735-2964), Monday-Friday, 9:00 a.m. to 4:00 p.m. ET.

IMPORTANT REQUEST FOR INFORMATION. PLEASE READ THIS ENTIRE FORM

You or a member of your household have been receiving continuous Medicaid coverage due to the COVID-19 federal public health emergency, even if you did not complete a redetermination when it was due or provide us with the required documents. ***This continuous coverage is ending on March 31, 2023. You must complete a redetermination or respond to Department requests for information to keep your Medicaid coverage.***

Now that the continuous coverage period is ending, you must respond to all requests from the Department to keep your medical coverage.

Our records show that as of the date of this letter you failed to provide requested verification. Please provide the proofs listed in the box below. If you do not understand what is needed, or need help getting them, please contact us. Our contact information is listed at the top and bottom of this letter.

The individual(s) listed below are pending ineligible.

John Doe

Program	Reason
Granite Adv.	You did not give us enough information or proof for us to decide if you are eligible.

Failure to provide the proofs listed in the box below by March 6, 2023 will result in the termination of your medical coverage. If you do not understand what is needed, or need help getting them, please contact us. Our contact information is listed at the top and bottom of this letter.

We did not receive proof of:	Examples of what to send	For the following people:
Net profit/loss of self-employment	Fed/state tax returns with all schedules, business records	John Doe

You must give us the proofs shown above before the end of the continuous coverage period.

There are four ways to send us the proofs requested or to make updates to the information you told us:

- 1. Online:** Go to <https://nheasy.nh.gov> and make the updates using your NH EASY account. The majority of individuals use NH EASY because it is a fast and easy way to complete redetermination, upload verifications, and more using their phone, desktop or tablet. If you don't have an account, you can create one at <https://nheasy.nh.gov>.
- 2. By mail:** Send a copy to the Central Scanning Unit, PO. Box 181, Concord, NH 03302.
- 3. In person:** Bring a copy to any District Office that is convenient to you.
- 4. By phone:** Call (603) 271-9700 or 1-844-275-3447 (ASK-DHHS) (NH Only).

If you do not want to keep getting medical assistance, please let your District Office know.

Remember, you must report *any* changes that might affect your medical coverage. You must report the change within 10 calendar days of when the change happens. Please report changes for both you and other people in your household, like if someone moves, if someone's income changes, or if your household changes. For example, someone in your household marries or divorces, becomes pregnant, or has or adopts a child. Delays in reporting and verifying changes may result in your household getting benefits or services in error. You must pay back any benefits or services received in error, regardless of whether you made a mistake in the information you gave, or failed to give, to us.



NH Plan - Key Messages

The unwind process has begun!

Individuals who are overdue will be assigned a new redetermination date and notified of the date either by mail or through NHEasy.

Over the next several months, DHHS will be sending requests for redeterminations to those who must complete a redetermination or provide information to keep their coverage.

These requests are on yellow paper or posted to individuals' NH EASY accounts, highlighted in yellow.

Once an enrollee receives a notice, they need to follow the instructions.

If enrollees do not follow the instructions to complete a redetermination or provide requested documents, their Medicaid coverage will end



Communications - Resources

- Continuous #Medicaid coverage ends on March 31. Watch for a yellow notice from DHHS, so you can complete a redetermination or give us additional information. If you don't respond, your #Medicaid could close. Learn more at <https://www.dhhs.nh.gov/financial-assistance-0/post-pandemic-benefit-changes>.
- **MEDICAID RECIPIENTS:** Don't get caught without health insurance! If you get a yellow notice from DHHS, be sure to follow the instructions, or you could lose your Medicaid. Learn more at <https://www.dhhs.nh.gov/financial-assistance-0/post-pandemic-benefit-changes>.
- No longer eligible for #Medicaid? New Hampshire's Insurance Navigators can help you explore other health coverage options. Learn more at <https://www.dhhs.nh.gov/financial-assistance-0/post-pandemic-benefit-changes>

Continuous Medicaid coverage ends on March 31, 2023.

Watch for notices from DHHS to protect your Medicaid coverage.

NEW HAMPSHIRE
DHHS
DEPARTMENT OF
HEALTH & HUMAN SERVICES

State of New Hampshire
Department of Health and Human Services
JANE DOE
00123456789



Communications – Printable Poster

Click on the image or visit the site,
below to print your own copy!

<https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/inline-documents/sonh/medicaid-unwind-poster.pdf>

**Regular Medicaid
eligibility operations
resume on April 1.**

State of
New Hampshire

Department of Health
and Human Services

JANE DOE
00123456789



*Watch for yellow notices with instructions from DHHS
so you don't lose your Medicaid coverage.*



*For more information,
scan the QR code*

*or call DHHS Customer
Service at*

*1-844-ASK-DHHS
(275-3447).*



**No longer eligible for Medicaid? Questions about other coverage options?
New Hampshire Navigators can help!**

Health Market Connect
(603) 309-2021 | 1-800-208-5164 | www.hmcnh.com

NH Navigator/First Choices Services
(603) 931-3858 | 1-877-211-NAVI | www.acanavigator.com/nh/home





Key Takeaways

Look for your yellow letters!

Check for your assigned rede date and respond when instructed to with the required information!

Reach out for help if you have questions!

Most waived populations who are “protected” will be assigned rede months in late summer or early fall



COVID-19 Testing & Treatment – Medical Coverage Ends May 11, 2023

- Coverage for this group began in March of 2020, to provide coverage for healthcare expenses related to COVID-19, and terminates at the end of the Federal COVID-19 Public Health Emergency (PHE), now set for May 11, 2023
- People who need COVID Testing and Treatment may qualify for health coverage through the Medicaid program.
- People can apply for Medicaid the following ways:
 1. **Online:** Go to NHEASY <https://nheasy.nh.gov/#/> to learn more and apply.
 2. **By mail:** Complete and mail an application to the Central Scanning Unit, PO. Box 181, Concord, NH 03302.
 3. **By phone:** Contact the Customer Service Center toll-free at 1-844-ASK-DHHS (1-844-275-3447) and select option #3 or (603) 271-9700, (TDD: 1-800-735-2964), Monday-Friday, 9:00 a.m. to 4:00 p.m. EST
 4. **In person:** Visit one of our District Offices in person. District Office locations can be found at <https://www.dhhs.nh.gov/about-dhhs/locations-facilities#locations>
 5. **Office locations** can be found at <https://www.dhhs.nh.gov/contactus/districtoffices.htm>.



Health Insurance Opportunities for Those who are No Longer Eligible

- Many individuals may be eligible for alternative health insurance
- Employer sponsored insurance (group coverage) may be available to people who are working
- People may have aged into Medicare eligibility and can seek help through ServiceLinks: <https://www.servicelink.nh.gov/>
- Children under 26 may be able to enroll in their parents' coverage
- New Hampshire Marketplace Exchange offers insurance for individuals and their families through healthcare.gov.
 - Enhanced subsidies are available to reduce the costs of premiums and deductibles.
 - People who lose Medicaid coverage will have a Special Enrollment Period to help with enrollment through healthcare.gov
 - New Hampshire has active health insurance Navigators available to help across the state.



Expansion Adults: Ages 19-64 with income up to 138% FPL (1/23)

Number of people in household	Annual Income up to 138% of Federal Poverty Level
1	\$20,120
2	\$27,214
4	\$41,400

[detailed-guidelines-2023.pdf \(hhs.gov\)](#)



Unwinding Special Enrollment Period (SEP)

***HealthCare.gov* recently announced it will allow people who lose Medicaid eligibility to claim a Special Enrollment Period for Marketplace coverage (“SEP”) between March 31, 2023, and July 31, 2024, as the continuous coverage requirement ends.**

- The “Unwinding SEP” will be available in most states including New Hampshire using *healthcare.gov*.
- To access the Unwinding SEP, a marketplace-eligible person must submit a new application or update an existing one between **March 31, 2023, and July 31, 2024**, and attest to loss of Medicaid coverage during that time period.
- Consumers who are aware that their Medicaid is ending may report loss of coverage and select a plan up to 60 days prior to the loss event and will have 60 days after they submit their application to select a plan.
- Coverage starts the first day of the month following plan selection.
- Consumers should seek health insurance coverage as soon as possible.



Navigating Insurance Coverage Help is Available!

If you have questions about or lose your health insurance coverage, you have options! New Hampshire offers free enrollment assistance through NH Navigator programs. Navigators can help with private insurance or Medicaid.

To contact an insurance navigator call:

1-877-211-6284 or 800-208-5164.

Please contact the New Hampshire Insurance Department if you have questions or concerns about Marketplace plans: (800) 852-3416 or email consumerservices@ins.nh.gov

Jeremy Smith, First Choices Services;
Adrian Jasion, Foundation for Healthy Communities;
<https://acanavigator.com/nh/home>

Elias Ashooh, Health Market
Connect; <https://www.hmcnh.com/>
(603) 309-2021

Meet Your Navigators and Assisters!

- Because the companies are federally funded, the assistance is free!
- Health Market Connect has ~10 navigators located in all regions of the state. They offer assistance in eight languages, including American Sign Language, and can answer questions via Zoom, chat, text, Facebook messenger, and email. They also book appointments through their website, hmcnh.com.
- First Choice Services, based in West Virginia, has ~6 navigators dedicated to taking calls from people in New Hampshire. They speak English and Spanish but can arrange translation for other languages.
- The company also has three groups in the state that provide phone and in-person assistance: Harbor Care, Lamprey Health, and the Foundation for Healthy Communities. Its website is firstchoiceservices.org.
- Many health care professionals and entities also have people who can help assist with health insurance.

Contact Information for DHHS Team

Complex policy questions

- **Henry Lipman**, Medicaid Director, Henry.D.Lipman@dhhs.nh.gov
- **Dawn Tierney**, Medicaid Policy Administrator, Dawn.I.Tierney@dhhs.nh.gov

Challenging or complex client situations

- **Karen Hebert**, Director, Division of Economic Stability, Karen.E.Hebert@dhhs.nh.gov
- **Amy Newbury**, Administrator, Bureau of Family Assistance, Amy.L.Newbury@dhhs.nh.gov

Eligibility or Call Center questions or concerns

- **Amy Newbury**, Administrator, Bureau of Family Assistance, Amy.L.Newbury@dhhs.nh.gov

NH EASY questions or concerns

- **Debra Sorli**, Administrator, Bureau of Family Assistance, Debra.E.Sorli@dhhs.nh.gov
- **Amy Newbury**, Administrator, Bureau of Family Assistance, Amy.L.Newbury@dhhs.nh.gov



Questions





Thank you

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