

# **Medicaid Redetermination 101**

By April, states will begin the renewal process to reassess tens of millions of Medicaid members' eligibility for the first time since March 2020. Whether through Medicaid or another form of health coverage, it's critical for states to leverage all the resources and tools at their disposal to ensure Medicaid members remain covered and can access the care they need.



Medicaid members go through an annual renewal process to reassess their eligibility.

### **April 2020:**

Under the Families First Coronavirus Response ACT (FFCRA), disenrollments were halted until expiration of the PHE.

#### December 2022:

Continuous coverage requirements in the FFCRA were terminated, enabling states to restart the renewal process as early as February 2023.

#### **April 2023:**

States can begin terminating coverage during the renewal process for Medicaid members.

## Why It's Important to Get Renewals Right

According to a report by the Urban Institute, approximately **18 million** people could **lose Medicaid** coverage over the course of the 14-month renewal timeline. Urban Institute, 2022

Since February 2020, enrollment in Medicaid and CHIP has increased by 21,690,345 individuals (30.7%).

Centers for Medicare & Medicaid Services, 2022

- ✓ The report also indicates that there is a potential for **3.8 million** individuals to become **uninsured**. However, this number will be substantially higher without a rigorous approach to renewals by the states.
- ✓ For example, an estimated 6.8 million individuals who are eligible for renewals could lose Medicaid coverage because of not completing their renewal form, never receiving a renewal form, or other administrative issues. U.S. Department of Health & Human Services, 2022
- ✓ Gaps in coverage are detrimental to enrollees' health, and can lead to disruptions in accessing preventative care, timely diagnosis, treatments, medication, and care coordination.

States should consider a thoughtful approach to processing renewals, using the full14 months allowed by the Centers for Medicare & Medicaid Services (CMS). Proactively engaging with current Medicaid members can help ensure that those who are eligible remain covered, disruptions to care are limited, and ineligible individuals are informed of and enrolled in other available coverage options.

**64%** of Medicaid beneficiaries are not aware of the looming renewal process. <u>Urban Institute</u>, 2022

**16%** of beneficiaries had heard "a little" about the renewals process <u>Urban Institute</u>, 2022

**14%** of beneficiaries heard "some" about the process and only 5% had heard "a lot." <u>Urban Institute</u>, 2022

Managed care organizations (MCOs) can serve as an important resource during this time, helping states address these challenges and ensure members continue receiving the care they need. To learn more about strategies that states can utilize to create a smooth transition, read our Medicaid Redetermination Best Practices fact sheet.