



# New Work Requirements: Reporting of Work, Other Activities, and Exemptions

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# Overview of the Presentation

- ▶ What is the Healthy Michigan Plan (HMP)?
  - 2020 Changes
  
- ▶ What are the new work requirements?
  - Activities to Meet HMP Work Requirements
  - Reasons to Be Excused (Exemptions)
  - Reporting Process
  - New Legislative Changes
  
- ▶ What is the implementation process for HMP work requirements?
  - Implementation Timeline for HMP Work Requirements
  - Beneficiary Notifications
  - Regaining Eligibility after Loss of Coverage
  - MDHHS Application Changes
  
- ▶ Questions

# What is HMP?

- ▶ The Michigan legislature approved the expansion of the Michigan Medicaid program through Public Act 107 of 2013.
- ▶ The Michigan Department of Health and Human Services (MDHHS) established HMP in 2014.
- ▶ HMP provides monthly coverage to more than 655,000 individuals (as of September 23, 2019).
- ▶ HMP beneficiaries can access a wide range of health care services which includes, but is not limited to, primary care, emergency services, behavioral health services, and prescription drugs.
- ▶ The HMP program also includes unique requirements for cost-sharing and healthy behaviors.

# What is HMP?

- ▶ Michigan residents can qualify for HMP coverage if they:
  - Are between the ages of 19 and 64
  - Are not receiving or eligible for Medicare benefits
  - Are not eligible for other Medicaid programs
  - Are not pregnant at the time of application
  - Have income at or below 133% of the Federal Poverty Level (FPL)
    - Note – 5% disregard = 138%
  - Meet other federal requirements

# What are the 2020 changes to HMP?

## Public Act 208 of 2018

Mandates work requirements

Mandates new requirements after 48 months of cumulative enrollment in an HMP health plan

# What are the HMP new work requirements?

- Activities to Meet New HMP Work Requirements
- Reasons to Be Excused (Exemption)
- Reporting Process
- New Legislative Changes



# What are the new HMP work requirements?

## Population

- All HMP beneficiaries that are between the ages 19 and 62 that are not otherwise exempt (excused)

## Changes

- Required to work or complete other activities, such as job search, for at least 80 hours per month
- Loss of eligibility for non-compliance

## Date

- Implementation Date: January 1, 2020

# What are the new HMP work requirements?

- ▶ HMP beneficiaries are required to work or complete other activities for at least 80 hours per month.
- ▶ Beneficiaries must report work or other activities (through self-attestation) to MDHHS on a monthly basis.
- ▶ Beneficiaries may also receive an exemption (reason to be excused) from these requirements.
- ▶ If a beneficiary fails to meet work requirements for three months in a calendar year, the beneficiary will lose eligibility.
- ▶ Coverage may be reinstated after the beneficiary comes into compliance after serving a penalty month of non-coverage.



# Activities to Meet HMP Work Requirements

- ▶ **The beneficiary has a job or income.**
  - Beneficiaries are considered to be employed when they work for another individual or organization in exchange for money.
  - Self-employment includes:
    - Working in exchange for money.
    - Working in exchange for goods or services (in-kind). Work-In-Kind does not include the exchange of money.
  - Beneficiaries may also meet this requirement by making money equal to earning the state-mandated minimum wage for 80 hours per month. Examples include earnings from a pension or retirement plan, rental income, or other types of income.

# Activities to Meet HMP Work Requirements

- ▶ **The beneficiary is a student** (completing high school, GED or college).
  - This activity includes participating in an educational program directly related to employment. The beneficiary can participate in person or online. Study time also counts.
  - Examples of educational programs include:
    - Preparing for and taking a High School Equivalency test such as the General Equivalency Diploma (GED) exam
    - Attending a basic skills program (e.g. English as a Second Language, computer skills, reading and writing skills)
    - Taking classes with the goal of getting a degree or certificate
      - The beneficiary can take classes at a university, college, community college, or other post-secondary school.

# Activities to Meet HMP Work Requirements

- ▶ **The beneficiary is looking for a job.**
  - This activity is related to looking and applying for jobs.
  - Searching for a job includes:
    - Searching for a job through a workforce program
    - Completing a job skills assessment or job readiness workshop
    - Preparing or submitting resumes or e-mail applications to apply for job openings
    - Interviewing for jobs
    - Traveling to job interviews or job fairs

# Activities to Meet HMP Work Requirements

- ▶ **The beneficiary is volunteering.**
  - This activity includes volunteering or doing community service. The beneficiary must volunteer with a non-profit 501(c)(3) or 501(c)(4) organization.
  - Examples include, but are not limited to, volunteering with a church group, homeless shelter, soup kitchen, animal shelter, or food bank.
  - **The beneficiary can only count this activity for three months per calendar year.**
  - MDHHS will recognize participation in court-order community services as meeting the requirement.

# Activities to Meet HMP Work Requirements

- ▶ **The beneficiary is in job training.**
  - This activity includes doing training for a job.
  - Job training can also include:
    - Job skills training
    - Job training through a workforce program
    - Training to become self-employed
    - Job-training program at a community college.
- ▶ **The beneficiary is in a tribal employment program.**
  - If the beneficiary is a member of a federally recognized Tribe, the beneficiary can report hours spent in a work or employment program that has been approved by the beneficiary's Tribe.

# Activities to Meet HMP Work Requirements

- ▶ **The beneficiary is in rehab (substance use).**
  - This activity includes substance use disorder treatment that is ordered by a court or prescribed by a licensed medical professional.
  - Examples of related activities include participating in:
    - Counseling
    - Support group meetings or other recovery support programs
    - Residential or inpatient treatment programs
    - Intensive outpatient programs
    - Medication assisted treatment programs.

# Activities to Meet HMP Work Requirements

- ▶ **The beneficiary is participating in vocational training.**
  - This activity includes training for a job or trade. Examples include, but are not limited to:
    - Apprenticeship programs
    - Vocational training shorter than six months
    - Clinicals or similar program.
  - Vocational training can also include time spent in a classroom, laboratory, studying, or other related activity.
- ▶ **The beneficiary is completing an internship.**
  - This activity includes working for a company or organization who is not the beneficiary's employer and developing experience or skills for a future job.

# Reasons to Be Excused (Exemptions)

- ▶ An exemption means that an HMP beneficiary may be excused from:
  - HMP work requirements and/or
  - Other HMP program requirements.
- ▶ Exemptions can last up to one year. Some exemptions can be renewed.
- ▶ Beneficiaries can tell MDHHS about an exemption (through self-attestation). MDHHS may also use internal data to identify beneficiaries who should be excused from the requirements.
- ▶ Once a beneficiary tells MDHHS about an exemption, MDHHS will send the beneficiary a letter with the date the exemption ends.



# Reasons to Be Excused (Exemptions)

## “Reportable” HMP Work Requirement Exemptions

1. The beneficiary is pregnant or was pregnant in the last 2 months.
2. The beneficiary is the main caretaker for a family member under 6 (One parent per household).
3. The beneficiary is a full-time student.
4. The beneficiary is under age 21 and was in Michigan foster care.
5. The beneficiary was in prison or jail in the last 6 months.
6. The beneficiary gets State of Michigan unemployment benefits.
7. The beneficiary gets temporary or permanent disability payments from a private insurer or the government.
8. The beneficiary has a medical condition that limits work, approved by a doctor.
9. The beneficiary is caring for a dependent with a disability and doctor's order for full-time care (One claim per household).
10. The beneficiary is caring for a person who cannot make decisions for themselves.
11. The beneficiary is medically frail (See Slides 19 and 20).
12. The beneficiary has good cause (See Slide 21).

# Reasons to Be Excused (Exemptions)

- ▶ Medically Frail – The beneficiary is medically frail due to one or more of the following:
  - Physical, mental, or emotional condition that limits a daily activity, like bathing
  - Physical, intellectual, or developmental disability that makes it hard to do daily living activity
  - Physical, mental, or emotional condition that needs to be checked often
  - Disability based on Social Security criteria (SSDI)
  - Chronic substance use disorder (SUD)
  - Serious and complex medical condition, or special medical needs
  - The beneficiary is in a nursing home, hospice, or get home help services
  - The beneficiary is homeless
  - The beneficiary is a survivor of domestic violence

# Reasons to Be Excused (Exemptions)

- ▶ Medically Frail (CONTINUED)
  - MDHHS will use data to assign this exemption based upon a retrospective data analysis:
    - ICD-10 diagnosis codes (over 350 codes), which includes serious and complex medical conditions, physical, intellectual, or developmental disability, etc.
    - Data that identifies that a beneficiary is in a nursing home, hospice, or is receiving home help services
  - Beneficiaries may also report this exemption through:
    - Completing the Medicaid Application
    - Reporting the exemption in a similar way to other exemptions (through self-attestation)

# Reasons to Be Excused (Exemptions)

- ▶ Good Cause
  - The beneficiary has good cause because the beneficiary or a close family member:
    - Has a serious illness;
    - Is hospitalized; or
    - Has a disability that meets the government definition.

# Reasons to Be Excused (Exemptions)

- ▶ Individuals who are enrolled in the Supplemental Nutrition Assistance Program (SNAP) or Temporary Assistance for Needy Families (TANF) program are also exempt from work requirements.
- ▶ MDHHS will use data to assign this exemption to beneficiaries. Beneficiaries cannot report this exemption.



# Reporting Process

- ▶ How will beneficiaries be able to report work and other activities **after** February 1, 2020?
  - In-Person (Kiosks in MDHHS Field Offices – Head of Household Only)
  - Online (via the MI Bridges Portal – Head of Household Only)
  - By Phone (via the Healthy Michigan Plan Work Requirement and Exemption Reporting Line)
  - Through the Application and Redetermination Process (Renew My Benefits)

# Reporting Process

- ▶ How will beneficiaries be able to report exemptions **prior to February 1, 2020**?
  - MDHHS has created a form to allow beneficiaries to report exemptions, which can be submitted to the Special Processing Office by mail or fax.
- ▶ How will beneficiaries be able to report exemptions **after February 1, 2020**?
  - In-Person (Kiosks in MDHHS Field Offices – Head of Household Only)
  - Online (via the MI Bridges Portal – Head of Household Only)
  - By Phone (via the Healthy Michigan Plan Work Requirement and Exemption Reporting Line)
  - Through the Application and Redetermination Process (Renew My Benefits)

# Reporting Process

## Exemption Form

Use this form to state that you have a Healthy Michigan Plan (HMP) exemption. This means you may be excused from:

- HMP work requirements, and/or
- MI Health Account payments

Exemptions can last up to one year. Some exemptions can be renewed. Once you tell us about an exemption, Michigan Department of Health and Human Services (MDHHS) will send you a letter with the date the exemption ends.



You must mail this form by **January 31, 2020**.

If you need help filling out this form, call the Beneficiary Help Line at 1-800-642-3195. (TTY: 1-866-501-5656)

### 1 Tell us about yourself. Print clearly.

Fill out all information. Use one form for each person. (Must fill in all fields with \* )

*First name	*Last name	*Date of birth		
*Address	*City	*State	*ZIP Code	Telephone number
Beneficiary ID number		You can find your Beneficiary ID number on the top left of the letter that came with this form.		

### 2 Tell us about your reasons to be excused. (check all that apply)

Check the box next to each reason that applies to you.

- You can claim any of the following reasons to be excused from work requirements.
- **Medically frail** can excuse you from MI Health Account payments.

- I am **pregnant** or was pregnant in the last 2 months (Due date \_\_\_\_\_)
- I am **medically frail** due to one or more of the following:
  - Physical, mental, or emotional condition that limits a daily activity, like bathing
  - Physical, intellectual, or developmental disability that makes it hard to do daily living activity
  - Physical, mental, or emotional condition that needs to be checked often
  - Disability based on Social Security criteria (SSDI)
  - Chronic substance use disorder (SUD)
  - Serious and complex medical condition, or special medical needs
  - Am in a nursing home, hospice, or get home help services
  - Am homeless
  - Am a survivor of domestic violence

*Reasons to be excused continued on the back ►*

MSA-1905

### Reasons to be excused continued (check all that apply)

- I am the main caretaker for a family member under 6 (One parent per household)
- I am a full-time student
- I am under age 21 and was in Michigan foster care
- I was in prison or jail in the last 6 months
- I get State of Michigan unemployment benefits
- I get temporary or permanent disability payments from a private insurer or the government
- I have a medical condition that limits work, approved by a doctor
- I am caring for a dependent with a disability and doctor's order for full-time care (One claim per household)
- I am caring for a person who cannot make decisions for themselves
- I have good cause because I or a close family member:
  - Has a serious illness, or
  - Is hospitalized, or
  - Has a disability that meets the government definition

### 3 Sign below

You or your authorized representative or legal guardian must sign below. The signature means the information on this form is true.

HMP member signature		Date
►		
Or signature of authorized representative (AR) or legal guardian		
Printed name of AR or legal guardian	Telephone number	Relationship to beneficiary
Signature of AR or legal guardian		Date
►		

### 4 Return completed form by January 31, 2020

**Mail to:** MDHHS Special Processing Office  
Suite 1405  
PO Box 30800  
Lansing, MI 48909

Or fax to: 1-517-432-6079

Only use this form until January 31, 2020. Starting February 1, 2020, go to [Michigan.gov/MIbridges](http://Michigan.gov/MIbridges).

Special Mailing HMP Exemption  
Valid through 1/31/2020



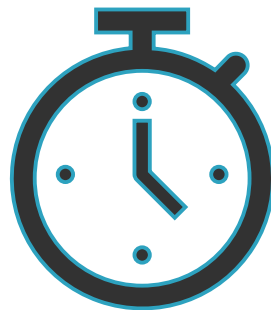


# New Legislative Changes

- ▶ Governor Whitmer recently signed Senate Bill 362 of 2019 (now Public Act 50 of 2019), which does the following:
  - Allow the department to use administrative data to determine that beneficiaries are completing work or other activities;
  - Allow beneficiaries to report work or other activities up until the end of the month; and
  - Allow beneficiaries to report work or other activities for months where the beneficiary previously failed to meet work requirements.

# What is the implementation process?

- Implementation Timeline for HMP Work Requirements
- Beneficiary Notifications
- Regaining Eligibility after Losing Coverage
- MDHHS Application Changes



# Implementation Timeline for HMP Work Requirements

Start of Webinars and Continued Outreach to Stakeholders

July & Aug.

Distribution of Notices  
Start of Exemption Reporting  
Posting of Draft Policy Bulletin for Public Comment  
Creation of Special Processing Office

Sept.

Continued Distribution of Notices  
Continuation of Public Comment  
Continuation of Exemption Reporting

Oct. & Nov.

Release of Revised Applications  
Launch of New Technology Systems  
Distribution of Critical Beneficiary Communications  
Publication of Final Policy Bulletin

Dec. & Jan.

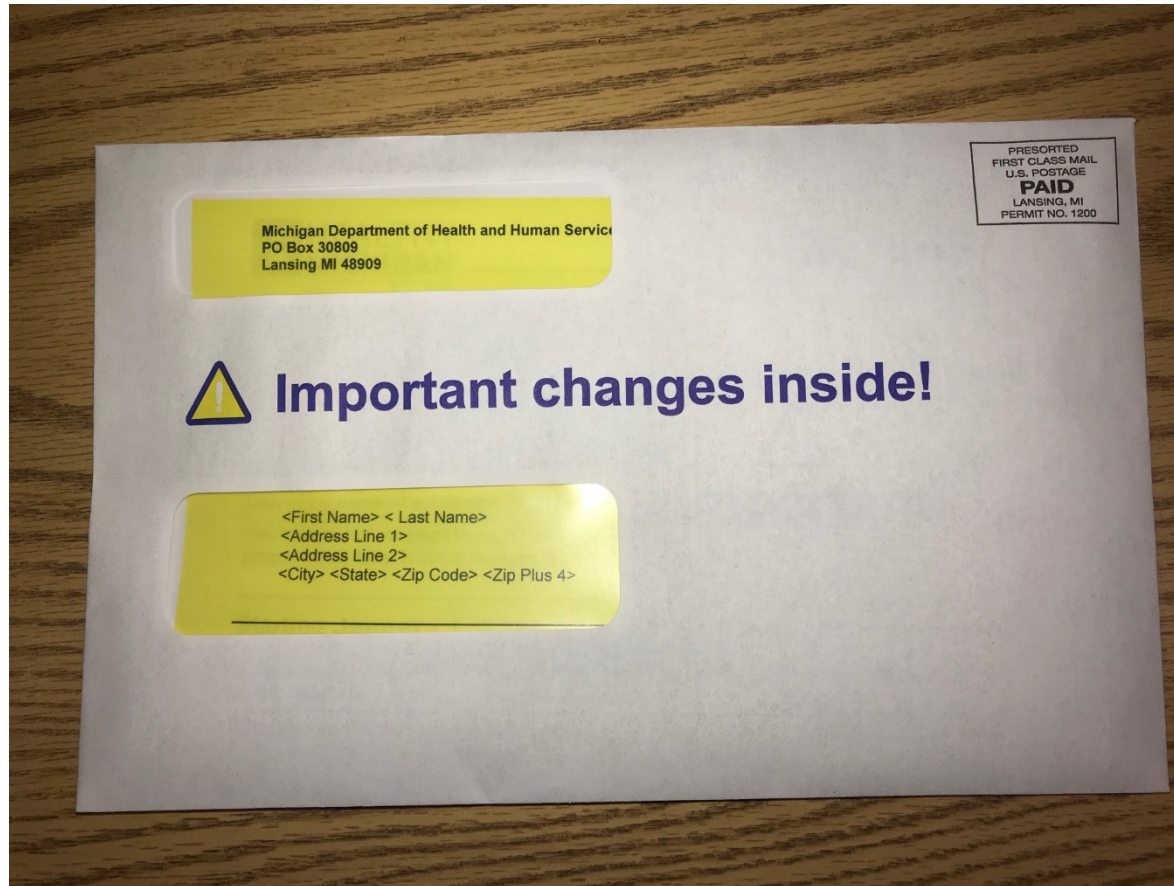
# Beneficiary Notifications

- ▶ MDHHS distributed high-level information about the new requirements to beneficiaries in February 2019.
- ▶ MDHHS will be issuing notices in September and October 2019 to beneficiaries to indicate whether (a) they are subject to the new requirements or (b) they have a known exemption.
- ▶ MDHHS's goal is to make these requirements and processes easy to understand and follow. To reach that goal, MDHHS will focus initial messaging around work requirements only. MDHHS will notify partners and stakeholders when MDHHS plans to begin sharing information related to healthy behavior and premium requirements.

# Beneficiary Notifications

Letter	Purpose	Who Gets The Letter	Send Date
B 19-36 (Not Exempt)	Notify the beneficiary about work requirements and that the requirements will apply to them unless they report an exemption.	Beneficiaries who are in HMP as of 9/1/2019 and who do not currently meet an exemption based on MDHHS records. This includes beneficiaries in fee for service and health plans.	Between 9/3/2019 - 9/30/2019
B 19-37 (Exempt)	Notify the beneficiary about work requirements but that the requirements do not currently apply to them due to an exemption. The beneficiary needs to be aware of the requirements in case they ever lose their exemption and are subject to requirements.	Beneficiaries who are in HMP as of 9/1/2019 and who meet an exemption based on MDHHS records.	Between 10/1/2019 - 10/24/2019
B 19-43 (Over 62 Exempt)	Notify the beneficiary about work requirements, but that the work requirements will not ever apply to them since they are 62 or over.	Beneficiaries who are in HMP as of 9/1/2019 and who are age 62 or over.	Between 10/1/2019 - 10/24/2019

# Beneficiary Notifications



# Beneficiary Notifications

Michigan Department of Health and Human Services  
PO Box 30809  
Lansing MI 48909



<First Name> <Last Name>  
<Address Line 1>  
<Address Line 2>  
<City> <State> <Zip Code> <Zip Plus 4>



## Important!

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**Starting January 1, 2020, Michigan law will require some people in Healthy Michigan Plan (HMP) to tell us each month about 80 hours of work or activities like job search.**

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**Read the enclosed letter to learn how to keep your health care coverage.**

# Beneficiary Notifications

**HEALTHY MICHIGAN PLAN**

Date: <Month><Day>, <Year>  
Name: <First name> <Last name>  
Beneficiary ID: <Beneficiary ID>

**Don't lose your health care coverage**

Dear <First name><Last name>,  
You have health coverage through Healthy Michigan Plan (HMP), a Michigan Medicaid program. This letter is about changes to HMP.

**Starting January 1, 2020, Michigan law will require some people in HMP to tell us each month about 80 hours of work or activities like job search.**

If you don't, you could lose your health care coverage unless you are exempt (excused).

**You are not exempt (excused) right now.**

Our records show that you are not exempt (excused). You will need to tell us each month about work or activities like job search.

An exemption would excuse you from telling us each month about work or activities to keep your HMP coverage. If you think you should be exempt because you have a medical condition or are disabled, pregnant, or have another reason, follow the 3 steps below.

**How do I claim an exemption?**

- 1 Read the Exemption Form that came with this letter.  
If you think you have an exemption:
- 2 Fill out the form before January 31, 2020.
- 3 Send the form to:  
MDHHS Special Processing Office  
Suite 1405  
PO Box 30800  
Lansing, MI 48909

*Continued on the back* ▶

**What do I have to do?**

**Fill out the form** | If you think you should be exempt (excused) because you have a medical condition, are disabled or pregnant, or have another reason, fill out and send the Exemption Form by **January 31, 2020**.

**Check for mail** | In December 2019, we will send you more information about HMP changes. We will tell you how to tell us about your work or activities. You may get another letter in January 2020, telling you if you have an exemption.

**What if I still have questions?**

To learn more, go to [HealthyMichiganPlan.org](http://HealthyMichiganPlan.org). If you still have questions, call the Beneficiary Help Line at 1-800-642-3195 (TTY: 1-866-501-5656). You can call Monday through Friday, 8 a.m. to 7 p.m.

Thank you,  
Medical Services Administration  
Michigan Department of Health and Human Services

**Fill out the Exemption Form and send it to us by January 31, 2020**

**Learn more online at [HealthyMichiganPlan.org](http://HealthyMichiganPlan.org)**

**More questions? Call us at 1-800-642-3195 (TTY: 1-866-501-5656)**

B 19-36



# Beneficiary Notifications



Date: <Month> <Day>, <Year>  
Name: <First name> <Last name>  
Beneficiary ID: <Beneficiary ID>



Dear <First name> <Last name>,  
You have health coverage through Healthy Michigan Plan (HMP), a Michigan Medicaid program. This letter is about changes to HMP.

**Starting January 1, 2020, Michigan law will require some people in HMP to tell us each month about 80 hours of work or activities like job search.**

If you don't, you could lose your health care coverage, unless you are exempt (excused).

### You are exempt (excused).

Our records show that you are exempt (excused) from telling us each month about work or qualifying activities like job search.

### What do I have to do?

You do not have to do anything right now. Your exemption will last for 12 months or until your next HMP renewal date, whichever is first.

**Remember:** If your exemption ends, you will need to meet the new requirement, unless you renew the exemption. Be sure to read all letters from the Michigan Department of Health and Human Services.

*Continued on the back ►*

B 19-37



### What happens next?

- In December 2019, we will send you more information about HMP changes.
- In January 2020, we will send a letter about your exemption and the date your exemption ends.

### What if I still have questions?

To learn more, go to [HealthyMichiganPlan.org](http://HealthyMichiganPlan.org). If you still have questions, call the Beneficiary Help Line at 1-800-642-3195 (TTY: 1-866-501-5656). You can call Monday through Friday, 8 a.m. to 7 p.m.

Thank you,

Medical Services Administration  
Michigan Department of Health and Human Services



Learn more online at  
[HealthyMichiganPlan.org](http://HealthyMichiganPlan.org)




More questions?  
Call us at 1-800-642-3195  
(TTY: 1-866-501-5656)

B 19-37

# Beneficiary Notifications


**Michigan Department of Health and Human Services**  
PO Box 30809  
Lansing MI 48909

**MDHHS**  
Michigan Department of Health & Human Services  
GRETCHEN WHITNER, GOVERNOR | ROBERT GORDON, DIRECTOR

  
**Important!**

<First Name> <Last Name>  
<Address Line 1>  
<Address Line 2>  
<City> <State> <Zip Code> <Zip Plus 4>

**HEALTHY MICHIGAN PLAN**

  
**No action needed**

Date: <Month> <Day>, <Year>  
Name: <First name> <Last name>  
Beneficiary ID: <Beneficiary ID>

Dear <First name> <Last name>,  
You have health coverage through Healthy Michigan Plan (HMP), a Michigan Medicaid program. This letter is about changes to HMP.


**Starting January 1, 2020, Michigan law will require some people in HMP to tell us each month about 80 hours of work or activities like job search.**  
If they don't, they could lose health care coverage.


You are **exempt** (excused) because you are at least 62 years old. Our records show that you are exempt (excused) from reporting work or activities like job search.

**What do I have to do?**  
You do not have to do anything. You do not need to report work or other activities and will not need to in the future.

**What if I still have questions?**  
To learn more, go to [HealthyMichiganPlan.org](http://HealthyMichiganPlan.org). If you still have questions, call the Beneficiary Help Line at 1-800-642-3195 (TTY: 1-866-501-5656). You can call Monday through Friday, 8 a.m. to 7 p.m.

Thank you,  
Medical Services Administration  
Michigan Department of Health and Human Services

  
Learn more online at  
[HealthyMichiganPlan.org](http://HealthyMichiganPlan.org)

  
More questions?  
Call us at 1-800-642-3195  
(TTY: 1-866-501-5656)

B 19-43

# Beneficiary Notifications

- ▶ Beneficiaries without an exemption will be notified by mail in December 2019 that they must complete work or other activities.
- ▶ HMP beneficiaries with an active exemption will be notified after January 24, 2020.
- ▶ New enrollees will be notified that they are potentially subject to work requirements as part of the enrollment process.

# Beneficiary Notifications

- ▶ Beneficiaries will receive a variety of communications related to whether they have an active exemption.
  - Beneficiaries who are the Head of Household will be able to view whether they have an exemption to the requirements in the MI Bridges system. Beneficiaries who are the Head of Household can also view whether other household members have exemptions.
  - All beneficiaries have the option of calling the “Healthy Michigan Plan Work Requirement and Exemption Reporting Line” after January 27, 2020 to check their current exemption status.
- ▶ Beneficiaries will also receive a letter when they have failed to meet the requirements for a given month. Beneficiaries can call the “Healthy Michigan Plan Work Requirement and Exemption Reporting Line” for more information on this issue.

# Beneficiary Notifications


- ▶ Beneficiaries will also receive notices when they have failed to meet requirements for three months. MDHHS will send the beneficiary a Health Care Coverage Determination Notice (1606) by mail, which will indicate that a beneficiary's case is closing due to failure to meet work requirements.
- ▶ Beneficiaries who are Head of Household will be able to view correspondence about case closure from MDHHS through the MI Bridges system.
- ▶ Beneficiaries can also call the Beneficiary Helpline to learn whether they have active HMP or other health care coverage.

# Beneficiary Notifications


The screenshot shows the MI Bridges mobile application interface. At the top, there is a blue header with the MI Bridges logo and a hamburger menu icon. Below the header, there is a navigation bar with a back arrow and the text "Healthcare Coverage". A teal bar below that contains "Participant 1 of 4" with left and right arrows. The main content area is white and contains the following information:

- Participant: Tamara Davis (with an edit icon)
- Beneficiary ID: 37425899
- Coverage: Full
- Renewal Due Date: 01/30/2018
- A yellow warning icon followed by text: "You have Healthy Michigan Plan healthcare coverage. In January 2020, the requirements for keeping your benefits will change. Visit [here](#) for more information."
- Health Plan (with a help icon): Meridian Health Plan
- Health Plan Website (with a help icon): [www.meridianhealthplan.com](http://www.meridianhealthplan.com)
- Doctor (with a help icon): BYRD HELEN MD I
- Doctor's Phone Number: (555) 555-5555

# Beneficiary Notifications

Home Apply for Benefits To Do List Benefits Resources Settings Logout


## View Benefits



### Healthcare Coverage

You currently have 4 household members receiving coverage.

[Hide Benefit Details](#)





### Child Development & Care (CDC)

Your payment is \$100 every 2 weeks.

[Show Benefit Details](#)

### Healthcare Coverage

PARTICIPANT	BENEFICIARY ID	COVERAGE	RENEWAL DUE DATE
Tamara	12345678	Full	01/30/2018
 You have Healthy Michigan Plan healthcare coverage. In January 2020, the requirements for keeping your benefits will change. Visit <a href="#">here</a> for more information.			
Maria	12345678	Full	01/30/2018
 You have Healthy Michigan Plan healthcare coverage. In January 2020, the requirements for keeping your benefits will change. Visit <a href="#">here</a> for more information.			
Brennan	12345678	Full	01/30/2018
Sarah	12345678	Full	01/30/2018

# Regaining Eligibility after Losing Coverage

- ▶ Beneficiaries who are non-compliant with work requirements will serve a penalty month unless they can report an exemption.
- ▶ Beneficiaries can re-enroll once they complete and report the completion of work or other activities.

Online

[www.michigan.gov/mibridges](http://www.michigan.gov/mibridges)



# MDHHS Application Changes

- ▶ MDHHS is adding a new appendix to two applications:
  - [MDHHS-1171](#) (Multi-Program Coverage Application)
  - DCH-1426 (Medicaid Health Coverage)
- ▶ The appendix will allow beneficiaries to:
  - (1) Tell MDHHS about an exemption; and
  - (2) Tell MDHHS that they completed work or other activities after they have lost coverage for non-compliance.
- ▶ MDHHS will use data from other parts of the applications to identify beneficiaries who may be excused from the work requirements.
- ▶ During the redetermination process, MDHHS staff can renew a current exemption or end an existing exemption based on new data.

# Resources

- ▶ Participate in upcoming webinars and other outreach events
  - [www.Michigan.gov/Medicaidproviders](http://www.Michigan.gov/Medicaidproviders) >> click on Training
- ▶ Watch for updates on the MDHHS website
  - Beneficiary page: [www.healthymichiganplan.org](http://www.healthymichiganplan.org)
  - Provider page: <https://www.michigan.gov/healthymichiganplan>
- ▶ Download and review beneficiary-specific communications
  - <https://www.michigan.gov/healthymichiganplan> >> click on Changes Coming January 2020
- ▶ Review and provide comments on the draft policy bulletins for new requirements
  - [www.Michigan.gov/Medicaidproviders](http://www.Michigan.gov/Medicaidproviders) >> click on Policy, Letters & Forms

# Resources

- ▶ Beneficiary Resources:
  - Beneficiary Support Information:  
[https://www.michigan.gov/mdhhs/0,5885,7-339-71547\\_4860\\_78446\\_78447\\_78453---,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4860_78446_78447_78453---,00.html)
  - Michigan Enrolls:  
<https://healthcare4mi.com/MISelfService/resources/portal/index.html>
  - MI Bridges:  
[www.michigan.gov/mibridges](http://www.michigan.gov/mibridges)
- ▶ Email questions to: [healthymichiganplan@michigan.gov](mailto:healthymichiganplan@michigan.gov)

# Questions?

