



Changes to your health coverage in 2024

Date: <Month> <Day>, <Year>

Name: <First name> <Last name>

Beneficiary ID: <Beneficiary ID>

Dear <First name> <Last name>,

You have Healthy Michigan Plan (HMP) health care coverage. HMP is a Michigan Medicaid program. This letter is about changes to HMP starting January 1, 2024.

WHAT IS STAYING THE SAME:

All the health care services that HMP covers now will stay the same. There won't be any changes to what's currently covered.

WHAT IS CHANGING:

The MI Health Account is going away. Starting in 2024, you won't pay monthly fees or use the MI Health Account anymore.

The last HMP statements will be sent in December 2023. The last payments are due January 15, 2024. **If you have automatic payments set up through your bank or credit union, make sure to STOP them before the end of January 2024.**

Copayments:

Starting in 2024, there will be changes to copays. This means that some people who didn't have to pay copays before might need to start paying them in 2024. For some people, the copay amount may decrease.

You may have to pay copays to your provider when you receive health care services.

These services have a \$1 copay:

- Pharmacy Generic/Preferred Brand
- Chiropractic Visits

These services have a \$2 copay:

- Doctor's Office or Urgent Care Visit
- Outpatient Hospital Clinic Visit
- Podiatric Visits
- Vision Visits

More on the back



These services have a \$3 copay:

- Emergency Room Visit (only for non-emergencies)
- Pharmacy Brand/Non-Preferred
- Dental Visits
- Hearing Aids (per aid)

These services have a \$50 copay:

- Inpatient Hospital Stay (except for emergent admissions)

Not all providers or health plans will require you to pay the copay amounts shown above. To find out more about how copays apply to you, visit HealthyMichiganPlan.org.

Healthy Behaviors Incentive Program:

If you've been earning rewards for healthy behaviors, there will be some changes to the program. Your health plan will still offer rewards for healthy behaviors and will provide more information on new rewards soon.

Tax Offset Discontinued:

Unpaid amounts won't be taken out of your state tax refund or lottery winnings anymore.

WHAT TO DO:

If you have automatic payments set up through your bank or credit union, make sure to STOP them before the end of January 2024.

If you do not have automatic payments set up, you don't need to do anything right now.

QUESTIONS:

If you have more questions or want to learn more, visit HealthyMichiganPlan.org. You can also call the Beneficiary Help Line at **1-800-642-3195** (TTY 1-866-501-5656), Monday through Friday from 8 a.m. to 7 p.m.

Thank you,

Behavioral and Physical Health and Aging Services Administration
Michigan Department of Health and Human Services

Nondiscrimination

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- Provides free aids and services to people with disabilities to communicate with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats); and
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Section 1557 Coordinator. The contact information is found below.

If you believe that MDHHS has not provided the above services, or discriminated in another way, you can file a grievance with the Section 1557 Coordinator. You can file a grievance by mail, fax, or email. If you need help filing a grievance, the Section 1557 Coordinator is available to help you.

- **In person or mail:**
MDHHS Section 1557 Coordinator
Compliance Office, Suite 411
PO Box 30037
Lansing, MI 48909
- **Phone: 517-284-1018** (Main), TTY users call 711
- **Fax:** 517-335-6146
- **Email:** MDHHS-Section-1557@michigan.gov

You can also file a civil rights complaint with the responsible federal agency.

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| <p>If your grievance or complaint is about your Medicaid application, benefits or services you can file a civil rights complaint with the U.S. Department of Health and Human Services at https://bit.ly/2pBS4YG, or by mail or phone at:</p> <p>U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 800-368-1019, 800-537-7697 (TDD)</p> <p>Complaint forms are available at https://bit.ly/2IKsHMS.</p> | <p>If your grievance or complaint is about your application for or current food assistance benefits, you can file a discrimination complaint with the U.S. Department of Agriculture (USDA) Program by:</p> <p>Completing a Complaint Form, (AD-3027) found online at: https://bit.ly/2g9zzpU or at any USDA office, or write a letter addressed to USDA at the address below. In your letter, provide all the information requested in the form.</p> <p>To request a copy of the complaint form, call 866-632-9992. Send your completed form or letter to USDA by mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410</p> <p>Fax: 202-690-7442; or Email: program.intake@usda.gov</p> |
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