

Renewal returned mail

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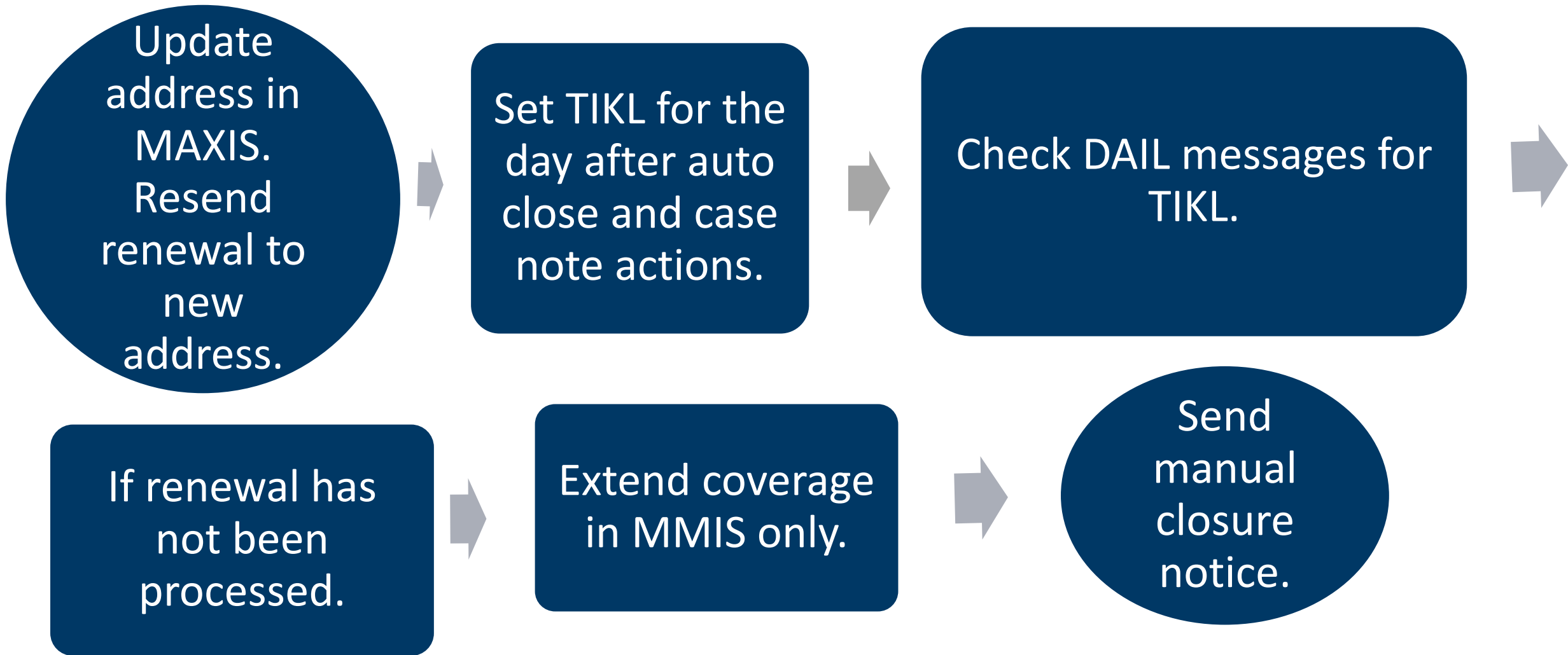
The Consolidated Appropriations Act 2023, set the end date of March 31, 2023, for the Medicaid continuous coverage policy and authorizes additional enhanced Medicaid funding to states during 2023. To qualify for the enhanced funding, a state must make a good-faith effort to contact a Medicaid enrollee using more than one modality prior to disenrollment when the agency receives renewal-related mail returned by the U.S. Postal Service as undeliverable.

What does this mean for processing?

When there is undeliverable mail returned to agencies related to a renewal of Medical Assistance (MA) eligibility, agencies must make additional attempts to contact the enrollee before closure due to failure to return a renewal, including forwarding or resending a renewal to an in-state forwarding address and providing additional time to complete the renewal.

- Agencies are prioritizing processing returned mail.
- Renewal returned mail must be forwarded if an in-state forwarding address is listed.
- Workers must call the enrollee when renewal returned mail without a forwarding address, or with an out-of-state forwarding address is received.
- After renewal form returned mail is forwarded, workers must allow 35 days for the enrollee to respond to the renewal and extend coverage as needed.
- Workers must reopen coverage if the former enrollee contacts the agency within 30 days after the case Auto Closed and provides an updated address.

MAXIS Returned Mail Coverage Extension Process Flow



METS Returned Mail Coverage Extension Process Flow

Update address in METS. Resend renewal to new address.

Send ticket to HCESS.

Case note actions taken.

HCESS will extend coverage after auto close occurs if renewal has not been processed.

HCESS will send manual closure notice.

HCESS will case note.

Questions?