

Office of Public Assistance
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**DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES**



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Contact Fax: 1-877-418-4533
Contact Website: apply.mt.gov

Why am I getting this letter?

This letter tells you about upcoming changes happening with Medicaid. DPHHS Office of Public Assistance is going to begin reviewing Medicaid and Healthy Montana Kids members' coverage in April 2023. You may need to take action.

What's happening?

Starting in April, DPHHS Office of Public Assistance will check to see if every Medicaid/HMK member is eligible to keep getting Medicaid/HMK. This process will happen throughout 2023. We will try to see if you are still eligible with the information we have. If we can confirm your eligibility, we will tell you that your coverage will continue. If we need more information to see if you still qualify, we will send you a renewal packet. You must complete the packet if you receive one by mail or email, or your coverage will end. Please make sure to use the contact information provided on the packet if you need to reach out to DPHHS. After you complete your packet, we will send you a notice that will tell you whether your Medicaid/HMK will continue or end.

What happens if I'm not eligible for Medicaid anymore?

There is no penalty if we determine you are no longer eligible for Medicaid. However, your Medicaid coverage will end. You may be eligible for other low-cost, quality health insurance through [HealthCare.gov](http://www.healthcare.gov) <<http://www.healthcare.gov>> (the Health Insurance Marketplace). If DPHHS finds that you are not eligible for Medicaid, we will send your information to [HealthCare.gov](http://www.healthcare.gov) <<https://www.healthcare.gov>>. Contact Cover Montana for help signing up for insurance through [HealthCare.gov](http://www.healthcare.gov) <<https://www.healthcare.gov>>. They will connect you to free, confidential, and local help. Visit <https://covermt.org/> <<http://www.covermt.org/>> or call 1-844-682-6837.

What happens if I am still eligible for Medicaid?

If you are still eligible for Medicaid, you will remain eligible for up to 12 months or until there is a change in your case that makes you no longer eligible. For most adults receiving Medicaid, DPHHS will have to check if you still qualify for Medicaid each time we know of a change in your case. This includes changes in income or household size. We must check if you still qualify each time you report a change and each time our electronic database shows a change. We must end your coverage if you no longer qualify as a result of the change.

Report any changes in your household that might affect your eligibility for Medicaid. These include:

- o Changes in your address
- o If someone gets married or divorced
- o If someone moves in or out, becomes pregnant, adopts a child, or any other changes in the people who live in your home
- o If someone's income changes
- o Change in third party insurance or employer sponsored coverage

Report these changes to DPHHS within 10 days of knowing them by calling us at 1-888-706-1535 or by going to apply.mt.gov <<https://apply.mt.gov/>>.

What do I need to do?

Update your contact information - Make sure DPHHS has your current contact information so that you receive important notices. Check your mail - DPHHS Office of Public Assistance will mail you a letter about your Medicaid or HMK coverage. This letter will also tell you if you need to complete a redetermination packet to see if you still qualify for Medicaid or HMK. Complete your renewal packet (if you get one) - Go to apply.mt.gov <<https://apply.mt.gov/>>, return the renewal packet by mail, or call us at 1-888-706-1535. You will have 30 days to complete this step. If you receive a packet, you must return it by the deadline, or your Medicaid/HMK will end.