

# Washington Apple Health Guide to Unwinding from the PHE

**What happens to Apple Health  
(Medicaid) eligibility starting in 2023  
as Washington State Moves ForWARD**

**Version 3: Released 05/18/2023**





**Important note!**

This document is updated as much as possible. For any issues, email [AHeligCovid19@hca.wa.gov](mailto:AHeligCovid19@hca.wa.gov).


In March 2020, the Families First Coronavirus Response Act allowed Medicaid to continue if the public health emergency (PHE) continued. Federal rules separated the continuous Medicaid requirement from the PHE and required states to begin redetermining eligibility as of April 2023.

Updated versions can be found at: [hca.wa.gov/phe](https://hca.wa.gov/phe)

For questions, comments, or concerns on the information in this guide, email [AHeligCovid19@hca.wa.gov](mailto:AHeligCovid19@hca.wa.gov).

## Change log

Version	Page No.	What Changed	Reason for Change
3	10	Added in language about Classic Apple Health renewal	Incorporated ex parte renewal overview
3	11, 16	Updated dates for renewal outreach	Process finalized after last published version of guide
3	14, 20, 26	Updated references to Covid-19 testing and treatment	Covid-19 testing and treatment coverage under AEM ends with the public health emergency
3	18	Deleted dates for domestic production activities deduction	Activity was completed.
3	25	Updated dates relating to premiums	Policy and procedures finalized after last published version of guide
3	26	Added section on returned renewal mail	Policy and procedures finalized after last published version of guide
3	27	Updated section with webinar info	Webinars already occurred




3	28	Outreach (texts, MCO) timeline updated	Processes finalized after last published version of guide
3	36	Updated image of envelope	Version 3 has updated image of envelope
3	40, 42	Updated description for Apple Health letters	Clarified difference between Apple Health requests for information letters
3	Appendix 3	Updated with current version of eligibility reviews	Text change slightly for eligibility reviews since last publication
3	Throughout	Corrected hyperlinks	
3	Throughout	Updated with date PHE ended	HHS ended the PHE after the last published version of the guide
3	Appendices 4, 7	Added images of postcards	Developed after last published version of guide
3	Throughout	Corrected hyperlinks	
3	Throughout	Updated with date PHE ended	HHS ended the PHE after the last published version of the guide




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## How to use this guide

This guide is for external use by navigators, brokers, providers, managed care organizations (MCOs), tribal entities, and other stakeholders. It is maintained by staff within Health Care Authority's (HCA) Office of Medicaid Eligibility Policy (OMEP). This guide is all inclusive and may contain information not applicable to you or your organization.

The guide is divided into four different sections:

1. Apple Health Classic Medicaid (non-Modified Adjusted Gross Income (MAGI)) clients who apply with the Department of Social and Health Services (DSHS), including through Washington Connection.
  - a. Including clients who receive long-term services and supports (LTSS) through Home and Community Services (HCS) or Developmental Disabilities Administration (DDA) and all other Classic Apple Health Programs through DSHS' Community Services Division (CSD).
2. MAGI clients who apply for coverage through Washington Healthplanfinder.
3. Clients who need to move between MAGI and Classic Apple Health (Medicaid).
4. Miscellaneous information that applies to both Classic and MAGI Apple Health clients.

A list of common acronyms are in [appendix 8](#).

We are readily available to assist with any training, review, or meetings to clarify any information in this guide. Email [AHeligCovid19@hca.wa.gov](mailto:AHeligCovid19@hca.wa.gov) to arrange a time for review or address any questions, comments, or concerns.

**Note:** Nothing in this guide is intended to provide legal rights to any person or entity. The guide is intended solely for informational purposes and should not be relied upon as the basis for any legal action. Eligibility policies and procedures are governed by federal and state statutes, regulations, and formal sub regulatory guidance.



## Overview

### *PHE background and Apple Health impact*

The Department of Health and Human Services (HHS), a federal agency, determined COVID-19 to be a public health emergency (PHE) starting in January 2020. The PHE ended May 11, 2023.

The Families First Coronavirus Response Act (FFCRA) allowed most Apple Health clients to continue receiving Apple Health coverage for the duration of the PHE. This is called “continuous enrollment.” Certain eligibility and verification factors were also relaxed. Apple Health no longer terminated clients who failed to renew or complete an eligibility review. If a client’s eligibility terminated for any other reason, HCA and DSHS reopened coverage, unless the client passed away or moved out of state.

### *New changes*


In December 2022, Congress signed into law the Consolidated Appropriation Act, 2023, which separates the continuous enrollment requirement from the PHE. This required Washington state to begin redeterminations 04/01/2023.

### *Unwinding*

HCA worked closely with the Washington Health Benefit Exchange (HBE), which operates Washington Healthplanfinder, and DSHS to develop post-PHE plans to redetermine clients’ eligibility for Apple Health. We are calling this “unwinding” from all the changes that occurred during the PHE.

HCA will utilize new and improved ways of reaching clients, including automated phone calls, text messages, enhanced envelopes, and updated correspondence. The goal is to ensure clients respond to renewals and eligibility reviews to see if they are eligible for continued Apple Health coverage or other insurance through Washington Healthplanfinder.





# Chapter 1: Classic Apple Health coverage through DSHS

## **Who**

Clients eligible for Classic (non-MAGI) Apple Health coverage are those who are:

- Age 65 or older; or
- Have blindness or a disability and are not eligible for MAGI coverage through Washington Healthplanfinder; or
- Eligible for Medicare.

Classic Apple Health coverage includes clients receiving long-term services and supports (LTSS), which is administered by Home and Community Services (HCS) and Developmental Disabilities Administration (DDA). DSHS' Community Services Division (CSD) administers all other Classic Apple Health programs. DSHS also administers some programs to children who have disabilities and/or need long-term services and supports.

See [appendix 1](#) for a list of medical programs administered by CSD, DDA, and HCS.

## *Eligibility Reviews (ER)*


### **During the PHE**

ER processes continued, but clients were not terminated for failing to provide an ER.

### **Unwinding**

HCA and DSHS will take up to 12 months to redetermine eligibility for clients who were reinstated during the PHE. This process is based on clients' post-PHE review end dates. Clients go through the ER process based on their system-assigned review end date.

ER processes began in April when DSHS mailed ER notices to clients due for review 05/31/2023. The ER notice is updated to include language about the PHE ending; see [appendix 3](#) for a copy of



the notice. This includes eligible clients, clients active on coverage only because of the PHE, and those receiving state-funded LTSS.

DSHS staff will first attempt to renew eligibility for clients without the client needing to provide an ER form. This is called an ex parte or administrative renewal. Staff will look to see if data matches show a client can be renewed on the same coverage group(s). If the data matches show a client cannot be renewed or would change to a coverage group with lesser services, the client will need to submit an ER.

#### Key takeaways

- May, June, and July will have a higher than usual number of ERs mailed and received compared to August-onward.
- Terminations for not renewing eligibility resume 05/31/2023 for clients due to renew 05/31/2023.
- Clients reinstated solely due to the PHE will have eligibility redetermined at their next ER.

DSHS sends ERs by mail 45 days before a client's certification end date. Copies of ER notices are also mailed to authorized representatives when one is on file. The system mails a termination notice at least 10 days before the end of the month to anyone who has not submitted their ER.

**Terminations for not submitting an ER resume 05/31/2023 for clients due to renew by 05/31/2023.** Assigned HCS and DDA staff follow [equal access policy](#) and contact clients if their annual eligibility review is not received.


## Outreach

DSHS and HCA will complete the below activities for the 12 months beginning with clients due for review 05/31/2023. The goal is to encourage responses to ER notices.

Days before certification end date	Example of ER due by 05/31/2023	Activity	Outreach method
85	03/06/2023	Contact information update campaign: are your address(es) and phone number(s) up to date	Postcard via USPS
49	04/12/2023	Mail-in ER notice goes out with new added text about need to respond	Letter via USPS; see <a href="#">appendix 3</a> for an example
20	05/09/2023 to 05/11/2023	Text message reminder to complete ER. Go to <a href="http://hca.wa.gov/ah-texts">hca.wa.gov/ah-texts</a> for more information.	Text message from HCA
16	05/15/2023	Reminder calls begin to complete ER	DSHS – CSD automated call-out*
10	05/21/2023	Termination letter for not renewing goes out to those who did not submit an ER	Letter via USPS

\*DSHS – CSD begins automated call campaign to clients who have not had their ER initiated. The prerecorded message will remind the client to submit their ER and how to do it as well as providing an option to connect to an agent to complete their renewal over the phone.

**Note:** This automated call will not be initiated to HCS and DDA clients. Assigned Public Benefits Specialists for HCS follow equal access policy and contact clients if their annual eligibility review is not received.



The above activities are in addition to any statewide outreach to clients by managed care plans and HCA, such as social media posts encouraging clients to respond to any notices.

### *Resuming normal operating procedures – Classic Apple Health*

#### **Key takeaways**

- Staff began requesting verification of income, resources, and other eligibility factors on 04/01/2023, unless they can be verified through electronic data sources.
- Change reporting requirements and case action on reported changes resumes.
- Some terminations resumed 04/30/2023, but more likely 05/31/2023.

#### **During the PHE**

Staff accepted self-attestation of income, resources, and medical expenses.

## Unwinding

Beginning 04/01/2023, staff resumed requesting verification of income, resources, medical expenses, and other eligibility factors, unless staff can verify through electronic data sources.

Procedure	Resume date	Details
Verification of medical expenses, income, and resources	04/01/2023	DSHS began requesting verification of medical expenses, income, and resources if the information cannot be verified through electronic data matches. If a client reports their employer or source of income is unavailable (i.e., business closed), DSHS will take self-attestation as allowed prior to the PHE. DSHS will provide clients with more time if requested to provide verification and can take self-attestation, if needed. Staff may also accept self-attestation and allow 30 days to provide needed verification.
Return mail	04/01/2023	Terminations for whereabouts unknown resume effective no sooner than this date. See <a href="#">Returned Mail</a> .
Change reporting requirements and case action on reported changes	04/01/2023	If a client has not had a medical ER completed in the last 12 months and a change is reported that impacts eligibility, an ER may be initiated.



## *Clients receiving Long-term services and supports (LTSS)*

- When return mail is received, staff use two methods to verify the client's whereabouts. They first try to call the client and authorized representative, and if unable to reach anyone, they will contact the assigned social service case manager for updated client contact information. If contact is unsuccessful, clients may be terminated.
- As of 4/1/23, staff began requesting verification, including proof of earned income, court orders for guardianship fees, and certain resources if information cannot be verified through electronic data sources.
- Staff will accept self-attestation of most unearned income types, liquid resources and primary residence, and some expenses, if the information can be verified through electronic data sources.
- Assigned HCS and DDA staff follow [equal access policy](#) and contact clients if their annual eligibility review is not received.

## *General reminders*

- Clients terminated for not providing verification have until the date of termination to provide the verification. They can also request an extension. If information is provided, DSHS will review to see if the client remains eligible.
- Clients may reapply at any time.

## *Alien Emergency Medical (AEM) – Classic*

AEM clients will receive one final ER notice with text shown in [appendix 3](#); see [Eligibility Reviews \(ER\)](#) process. AEM coverage ends with 10 days' notice if clients do not respond to an ER, request for medical evidence, or are not clinically eligible.

Note: Coverage under AEM of COVID-19 testing and treatment ended May 11, 2023. Inpatient hospital services relating to COVID-19 testing and treatment are still covered.



## Chapter 2: MAGI Apple Health through Washington Healthplanfinder

### Who

Adults under age 65 without Medicare, children, pregnant individuals, or parents and caretakers get coverage through the Washington Healthplanfinder online application, administered by the Health Care Authority (HCA). Income eligibility is based on modified adjusted gross income (MAGI). This includes clients on Washington Apple Health for:

- Family/Caretaker Relatives
- Family/Caretaker Relatives – Extension
- Pregnant Individuals and After-Pregnancy Coverage
- Newborns
- Kids
- Kids with Premiums
- Alien Emergency Medical
- Adults
- [Family Planning Only](#) – HCA processes applications, not through Washington Healthplanfinder.

### *Renewals*

#### Key takeaways

- May, June, and July will have a higher than usual number of renewals compared to the August-onward.
- Terminations for not renewing eligibility resume 05/31/2023.
- Clients receiving Apple Health solely due to the PHE may have eligibility redetermined at their next renewal or change report, whichever occurs first.



## During the PHE

Renewal processes continued, but clients were not terminated for failing to renew. If they did not attempt to renew, the system extended Apple Health 3 months at a time.


## Unwinding

HCA will take up to 12 months to redetermine eligibility for MAGI clients who were reinstated during the PHE based on clients' post-PHE renewal dates. Clients go through the renewal process based on their system-assigned renewal end date.

The regular renewal processes continue: Between 04/03/2023 and 04/10/2023, Washington Healthplanfinder attempts to auto-renew clients due for renewal by 05/31/2023. Auto-renewal is when the system looks at a household's self-reported income and compares it to available data sources. If the self-attested income and data sources both show income is under the limit, the client auto-renews, and the system sends the "[Washington Apple Health Renewal – Review Only](#)" notice.

Procedure	Resume date	Details
Pre-PHE renewal processes	04/03/2023	Washington Healthplanfinder will attempt to auto-renew clients due for renewal in May.
Renewal notice	04/10/2023	If a client cannot be auto-renewed, Washington Healthplanfinder sends the " <a href="#">Response Required: Apple Health Renewal</a> " by this date.
Text message reminder	05/09/2023 to 05/11/2023	Text message reminder to complete renewal. Go to <a href="https://hca.wa.gov/ah-texts">hca.wa.gov/ah-texts</a> for more information.
Termination letters	05/10/2023	Washington Healthplanfinder sends the " <a href="#">Washington Apple Health Termination</a> " letter to clients who did not respond.
Reminder calls begin	05/18/2023	Phone call reminder to complete renewal





<b>Terminations for non-renewal</b>	05/31/2023	Clients who did not complete their renewal will have coverage terminated.
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## What happens when a client needs to take action to renew?

There are three routes clients take after receiving the “[Response Required: Apple Health Renewal](#)” notice:

1. They can take action to renew and are determined eligible for Apple Health based on self-attestation.
  - If their attestation is not compatible with state or federal sources, they may have to respond to a [post-eligibility review letter](#). This letter is sent within the following few weeks and requires a response within 15 days.
2. If they take action to renew and no longer qualify for Apple Health, coverage terminates at the end of the month.
  - Washington Healthplanfinder will offer them additional coverage options, which may include coverage through a Qualified Health Plan with possible savings provided under the American Rescue Plan Act (ARPA) and Cascade Care Savings.
  - Clients who meet the criteria for Classic Apple Health, such as age or Medicare eligibility, are given the choice to be referred to DSHS’ Washington Connection.
3. If they do not respond, Apple Health terminates at the end of the month for not renewing.

## What happens after termination for not renewing?

Clients terminated for not renewing have 90 days from the termination date to complete their renewal and be retroactively reinstated from the termination date, if they are still eligible, without a gap in coverage.

- For example, a client who terminates 05/31/2023 for not renewing has until 08/31/2023 to complete their renewal. If eligible for Apple Health, they are automatically approved as of 06/01/2023.

## Domestic Production Activities (DPA) deduction

HCA added a “domestic production activities” income deduction to some applications to keep Apple Health active during the PHE. This deduction is no longer allowed and will be automatically removed from applications. Client eligibility will not be redetermined until the next renewal or change report.

## *Resuming normal operating procedures – MAGI*

### Key takeaways

- Staff began requesting verification of income and other eligibility factors as of 04/01/2023, unless verified through electronic data sources.
- Change reporting requirements and case action on reported changes resumes.
- Some terminations occurred 04/30/2023, but more likely on or after 05/31/2023.

Procedure	Resume date	Details
HCA began requesting verification	04/01/2023	Request verification for income, deductions, and medical expenses for spenddown.
Return mail	04/01/2023	Terminations for whereabouts unknown resume, effective no sooner than 04/30/2023. See <a href="#">Returned Mail</a> .
Change reporting requirements and case actions on reported changes	04/01/2023	Clients who report changes will have eligibility redetermined, even if their renewal date hasn't approached.

<b>Notices for newly-eligible Medicare clients</b>	04/01/2023	Clients on Apple health for Adults who become eligible for Medicare on or after April 2023 will be sent a notice to apply at DSHS.
<b>Terminations resume for Medicare-eligible clients</b>	04/30/2023	Terminations of Apple Health for Adults for being Medicare-eligible.

### *Post-eligibility reviews (PER)*

HCA resumed its PER process in April 2023. Any changes to a client’s Apple Health eligibility occur no sooner than 04/30/2023. HCA will use a redesigned PER notice developed with the Consumer Notices Workgroup and the new envelope (see [appendix 2](#)).

### *ProviderOne extensions*

Some clients lost coverage in Washington Healthplanfinder and could not be reinstated in that system. Their coverage was extended in ProviderOne. These clients:

- Turned 19 and their immigration status does not qualify them for ongoing Apple Health, or
- Received 12 months’ post-partum coverage and their immigration status does not qualify them for ongoing Apple Health.

HCA will send a unique form to determine their continued eligibility when the PHE ends. See [appendix 5](#) for copy of the letter.

Redetermination occurs between May 2023 and April 2024. The due date for the form is the 5<sup>th</sup> of the following month. HCA will review the case file to determine if the client responded.

- No response received: Staff manually send a termination notice from Washington Healthplanfinder with at least 10 days’ notice, and ProviderOne coverage ends at the end of the month.
- Response received: Staff redetermine ongoing eligibility and send applicable eligibility notices. This may include a termination notice from Washington Healthplanfinder with at least 10 days’ notice, and ProviderOne coverage ends at the end of the month.



## *After-Pregnancy Coverage (APC)*

Substitute Senate Bill (SSB) 5068 directed HCA to extend post-partum coverage to 12 months. HCA implemented After-Pregnancy Coverage in July 2022. Clients within 12 months of the end of their pregnancy end date will stay on Apple Health coverage until the end of their 12-month post-partum period when they will go through the MAGI renewal process explained above.

It is important for a client to update their Healthplanfinder application to reflect their current pregnancy status or the date their pregnancy ended.

## *Alien Emergency Medical (AEM) – MAGI*

Once the PHE ends, AEM clients follow the [MAGI renewal process](#) above. AEM clients extended three months at a time will have a renewal due between May 2023 and July 2023. Clients who do not respond will terminate for not renewing.

Note: Coverage under AEM of COVID-19 testing and treatment ended May 11, 2023. Inpatient hospital services relating to COVID-19 testing and treatment are still covered.

## *Foster care (FC) and adoption support (AS)*

HCA's Foster care and adoption support (FCAS) team maintain Apple Health for children in foster care (FC), receiving adoption support (AS), and those under age 26 who age out of foster care.

### **During the PHE**

Children in FC or AS who had a change in circumstances remained eligible for coverage even if FC or AS ended. Children who age out of FC move to Former Foster Care Apple Health coverage until they turn 26. Staff moved clients who turned 26 during the PHE to Apple Health for Adults.

Children in an institution, including in Children's Long Term Inpatient Program (CLIP) facility or hospital, for 30+ days, remained on their program.



## Unwinding

Clients who moved to MAGI Apple Health for Adults or Apple Health for Kids in Washington Healthplanfinder will have their eligibility redetermined based on their renewal end date or change report. See the [Renewals – MAGI](#) section above.


Clients released from an institution more than 12 months ago will have their eligibility redetermined by HCA FCAS staff. FCAS staff can be reached Monday through Friday from 7:30 a.m. to 5 p.m. at 1-800-562-3022, extension 15480 or email [fcas@hca.wa.gov](mailto:fcas@hca.wa.gov).

## *Moving to a Qualified Health Plan*

If a client is no longer eligible for Apple Health, *Washington Healthplanfinder* offers coverage of Qualified Health Plans with financial help to lower their premiums. Individuals and families who lose Apple Health can sign up for a health plan through [wahealthplanfinder.org](http://wahealthplanfinder.org), in the 60 days before or after their Apple Health coverage end date. New coverage for clients who sign up during this special enrollment period will begin the day after their Apple Health coverage end date unless a later start date is requested.

Clients who are unable to enroll within 60 days of their Apple Health coverage end date have additional opportunities to get covered. Those earning up to 250% of the federal poverty level (up to \$34,000 annually for an individual and \$70,000 for a family of four) may qualify for the Cascade Care Savings special enrollment period. This allows Washingtonians to enroll in a high-quality Cascade Care plan for less than \$10 a month by using Cascade Care Savings, Washington's new state-funded premium financial assistance. These plans, offered by all *Washington Healthplanfinder* insurance companies, have lower deductibles, and cover important services like primary care visits, mental health services, and generic medications with low co-pays before the deductible.

Clients may also qualify for special enrollment periods based on [qualifying life events](#) including job loss, income changes, and household changes (birth, adoption, marriage, and more). Clients who lose Apple Health coverage during the Medicaid unwind who are unable to use an existing special enrollment period can request that their circumstances be reviewed, which *Washington Healthplanfinder* will do on a case-by-case basis.



For help enrolling in coverage, clients should call the *Washington Healthplanfinder* Customer Support Center at 1-855-923-4633 (TTY 1-855-627-9604) or [find help in their community](#) from *Washington Healthplanfinder* enrollment partners. Free language assistance is available in over 200 languages.

**Note:** If Apple Health coverage terminates for not responding or not completing a renewal clients will not be able to take advantage of the ARP savings until they reapply and are eligible.



## Chapter 3: Moving between Classic and MAGI Apple Health programs

### *Apple Health for Adults (N05) and 65+ or Medicare-eligible*

#### **During the PHE**

Clients on MAGI Apple Health for Adults who turned age 65 or became Medicare-eligible received notice to apply for ongoing Apple Health at DSHS. If they responded, N05 ended, but staff opened SSI-related medical with DSHS. If they did not respond, the system extended eligibility 3 months at a time.

#### **Unwinding**

Clients extended on MAGI Apple Health for Adults who are age 65 or older or Medicare-eligible will be included in the May, June, and July [MAGI renewals](#). HCA will mail these clients an additional notice ([appendix 6](#)). If they do not respond by applying through DSHS, the redetermination process is complete and Apple Health coverage ends. Clients will receive notice that their Apple Health coverage closed, and they can apply at DSHS anytime. HCA will also stop covering Medicare premiums when Apple Health ends, unless the client qualifies for a Medicare Savings Program.

#### *SSI terminations*

Clients who receive Supplemental Security Income (SSI) automatically receive SSI medical through DSHS.

#### **During the PHE**

If a client's SSI ended, DSHS continued clients on SSI medical.

#### **Unwinding**

DSHS will resume the SSI redetermination processes by sending clients updated notices to apply at Washington Healthplanfinder or Washington Connection for continued coverage. If the client does not act, SSI medical ends.



## *MAGI Apple Health and LTSS*

Some clients extended on MAGI Apple Health programs receive long-term services and supports (LTSS) administered by HCS and DDA. HCA provides HCS monthly reporting for MAGI closures for clients accessing LTSS. Public benefit specialists and social service case management staff at HCS will assist clients with applications and necessary verifications as they are redetermined for Apple Health through DSHS. Assigned HCS and DDA staff follow [equal access policy](#) and contact clients if their annual eligibility review is not received.



## Chapter 4: Other Classic and MAGI Apple Health program information

The following sections apply to both Classic and MAGI Apple Health clients.

### *Language access*


HCA, DSHS, and Washington Healthplanfinder provide written and verbal translation and interpreter services free of charge, including to clients who are deaf or hard of hearing.

### *CHIP and HWD premiums*

#### Key takeaways

- Apple Health for Workers with Disabilities (HWD) and Apple Health for kids with premiums (also known as the Children’s Health Insurance Program or CHIP) premium requirements resume July 2023.
- Clients who are American Indian/Alaskan Native do not have to pay a premium.

Procedure	Date	Details
<a href="#">CHIP postcard for premiums resuming</a>	05/15/2023	CHIP clients receive a postcard advising them of premium collection resuming and which monthly invoice to pay.
<a href="#">HWD postcard for premiums resuming</a>	06/01/2023	HWD clients receive a postcard advising them of premium collection resuming and which monthly invoice to pay.
<b>Premium requirements resume</b>	07/2023	HCA will update invoice language to explain premium requirements resuming.
<b>CHIP terminations for non-payment of premium</b>	09/30/2023	First round of post-PHE terminations for not paying premium



<b>HWD terminations for non-payment of premium</b>	12/31/2023	First round of post-PHE terminations for not paying premium
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## *Public charge*

Clients can receive Apple Health coverage and emergency medical care without impacting their ability to become a Lawful Permanent Resident in the future.

Currently, the only health benefit that immigration officials can consider for the public charge test is government-funded long-term institutional care, such as care received in a nursing facility. Alien Emergency Medical (AEM) and state-funded programs are excluded from reporting under public charge.

HCA will continue to protect the confidentiality of each client's personal information and does not share this information unless required by law.

## *Appeals*

Clients who disagree with a decision by HCA or DSHS to terminate, change, or deny Apple Health coverage have the right to appeal. This is called an administrative hearing, which is a legal process where a judge reviews an agency decision. Clients may be able to keep their Apple Health coverage during the appeal process, if they request an appeal within 10 days from the date of the notice or by the end of the month of the notice, whichever is later.


[Find out more information on Apple Health appeals.](#)

## *Reconsideration*

Clients who received a termination notice have until the end of that month of the notice to submit all information to have their eligibility reconsidered. Clients may reapply for coverage at any time.

## *Returned renewal mail*

If the United States Postal Service (USPS) returns a renewal or eligibility review notice as undeliverable, HCA and DSHS staff will attempt to contact the household to obtain a valid



address. Staff will attempt to contact the household through two methods when available, including by phone or email. Clients may be given additional time to complete their renewal if USPS returns the original renewal or eligibility review notice.

When USPS returns mail with an in-state forwarding address, staff update all systems with the new address and re-mail the returned notices to the new address. If the forwarding address is out-of-state, staff send a letter requesting verification of residency.

## Upcoming webinars

HCA hosted several webinars to review unwinding activities. Find our previous webinars on our [Webinars, video, and presentations](#) page. Sign up for [GovDelivery](#) to register for webinars and receive weekly updates.

## Contact

Email [AHeligCovid19@hca.wa.gov](mailto:AHeligCovid19@hca.wa.gov) if you'd like to arrange a time for review or address any questions, comments or concerns. View the [Cross Agency Desk Aid](#) for more information.

### **Clients with questions should contact the agency that determined their eligibility:**

- Washington Healthplanfinder Customer Support Center  
Monday to Friday 7:30 a.m. – 5:30 p.m.  
Phone: 1-855-923-4633  
TTY: 1-855-627-9604  
Language assistance is available in more than 200 languages and disability accommodations are provided at no cost.  
[Navigator search](#)
- Apple Health through Washington Healthplanfinder:  
HCA Medical Eligibility Determination Services (MEDS)  
Email [MEDS](#)  
[Contact Us](#)  
Phone: 1-800-562-3022  
Monday to Friday 7 a.m. – 5 p.m., except state holidays



[HCA community-based specialists](#) for assistance in your area

- Foster care, adoption support, and alumni Apple Health through Foster Care and Adoption Support (FCAS) staff:  
Email [FCAS](#)  
Phone: 1-800-562-3022, extension 15480  
Monday to Friday 7:30 a.m. – 5 p.m., except state holidays
- Classic Apple Health (non-MAGI) through DSHS – CSD:  
Phone: 1-877-501-2233  
Monday to Friday 8 a.m. – 3 p.m., except state holidays
- Classic Apple Health (non-MAGI) through DDA (cases in office 017):  
Phone: 1-855-873-0642  
Monday to Friday 8:00 a.m. – 5 p.m., except state holidays
- Classic Apple Health and Long Term Service and Supports (non-MAGI) through HCS:  
[Contact Local HCS office](#) (may take a minute to load)

## Outreach

HCA's outreach plan includes:

- 1) A postcard mailed the month before renewal and eligibility reviews are sent. The postcard is to encourage the client to update their address and phone number.
- 2) Updated language to renewal and eligibility review notices explaining the need to respond now that the PHE-related extensions are ending.
- 3) Text messages to clients at-risk of termination for not completing a renewal or eligibility review. See [hca.wa.gov/ah-texts](http://hca.wa.gov/ah-texts) for more information.
- 4) Automated phone call to clients at-risk of termination for not completing a renewal or eligibility review.
- 5) Member outreach from managed care plans.

More information on outreach can be found in HCA's [End of PHE Communications Toolkit](#).



## *Apple Health ambassador program*

HCA's new Apple Health ambassador program uses community organizations and influencers to act as volunteer Apple Health ambassadors! Ambassadors will work to ensure that Apple Health clients have the information and resources needed to maintain coverage at the end of the continuous coverage requirement period.

More information can be found on our [Apple Health ambassador](#) page.

## *MCOs and 834 information*

HCA worked with managed care organizations (MCOs) to conduct member outreach to ensure clients respond to renewal notices. The 834 file is a standard report sent from HCA to the MCOs containing the MCO's member information.

When a client is auto-renewed, the next daily 834 file will show a new recertification end date. The auto-renewal process ends on or before the 10th of every month so MCOs should begin outreach to clients after the 11<sup>th</sup>. Additionally, as clients complete their renewal, the new recertification end date will show in the next 834 file so renewal outreach does not need to be conducted by the MCO.

For example, clients with a recertification end date of 11/30/2023 go through auto-renewal October 1-10<sup>th</sup>. MCOs should use the 834 issued October 11<sup>th</sup> to see who is still due to renew 11/30/2023 and conduct outreach. When a client manually renews, their new recertification end date will appear on the next daily 834 file.

Another enhancement for the 834 file is improved communication between HCA and the MCOs on why clients are losing Apple Health eligibility. Depending on the reason for termination, MCOs can conduct outreach to clients to reconnect them to Apple Health or other health insurance options.

# Appendices

## *Appendix 1: Coverage groups*

**SSI and SSI-related Classic Apple Health, also called Aged/Blind/Disabled (ABD)**

<b>Group</b>	<b>Description</b>	<b>RAC(s)</b>	<b>Administering Agency</b>
<b>G03</b>	Categorically Needy Non-Institutional Medical in an Alternate Living Facility	1046, 1047	DDA, HCS
<b>S01</b>	SSI recipients	1104, 1105, 1106, 1107	CSD DDA, if client is in ARTF
<b>S02</b>	ABD Categorically Needy	1108, 1109, 1110, 1111	CSD DDA, if client is in ARTF
<b>S03</b>	QMB Medicare Savings Program (MSP) Medicare premium and co-pays	1112, 1113	CSD if not receiving services from HCS or DDA
<b>S04</b>	QDWI Medicare Savings Program	1114	CSD if not receiving services from HCS or DDA
<b>S05</b>	SLMB Medicare Savings Program - Medicare premium only	1115, 1116	CSD if not receiving services from HCS or DDA
<b>S06</b>	QI-1 Medicare Savings Program	1117, 1118	CSD if not receiving services from HCS or DDA
<b>S07</b>	Emergency Related Service Only (AEM)	1119, 1120	CSD
<b>S95</b>	Medically Needy no spenddown	1124, 1125, 1126, 1127	CSD
<b>S99</b>	Medically Needy with spenddown	1124, 1125, 1126, 1127	CSD

### SSI-related Healthcare for Workers with Disability

Group	Description	RAC(s)	Administering Agency
S08	Apple Health for Workers with Disabilities CNP premium based program	1121, 1134, 1271	DDA or HCS

### Institutional Home and Community Based Waivers, and Hospice SSI and SSI-related

Group	Description	RAC(s)	Administering Agency
L21	DDD/HCS Waiver on SSI	1146, 1147, 1152, 1153, 1218, 1219, 1220, 1221	HCS or DDA
L22	DDD/HCS Waiver – gross income under the SIL	1148, 1149, 1150, 1151, 1174, 1175, 1222, 1223, 1224, 1225	HCS or DDA
L24	Undocumented alien/non-citizen LTC – residential placement.	1190, 1191, 1192, 1193, 1194, 1195	HCS
L31	PACE or hospice on SSI	1226, 1227, 1228, 1229, 1236, 1237, 1138, 1239	HCS if PACE DDA if Hospice
L32	PACE or hospice – SSI-related	1230, 1231, 1232, 1233, 1234, 1235, 1240, 1241, 1242, 1243	HCS if PACE DDA if Hospice
L41	Roads to Community Living on SSI	1260, 1261, 1262, 1263	HCS or DDA
L42	Roads to Community Living – SSI related	1264, 1265, 1266, 1267, 1268, 1269	HCS or DDA

### Non-Institutional Community First Choice – Personal care services in the community

Group	Description	RAC(s)	Administering Agency
L51	Community First Choice (CFC) on SSI	1104, 1105, 1106, 1107, 1244, 1245, 1246, 1247	HCS or DDA

<b>Group</b>	<b>Description</b>	<b>RAC(s)</b>	<b>Administering Agency</b>
<b>L52</b>	Community First Choice (CFC) – SSI related at home or in an ALF	1046, 1047, 1108, 1109, 1110, 1111, 1248, 1249, 1250, 1251, 1252, 1253, 1254, 1255, 1256, 1257, 1258, 1259	HCS or DDA

**SSI-related: Residing in a medical institution 30 days or more**

<b>Group</b>	<b>Description</b>	<b>RAC(s)</b>	<b>Administering Agency</b>
<b>L01</b>	SSI recipient in a medical institution - residing in a medical institution 30 days or more	1065, 1066, 1067, 1068, 1069, 1070, 1168, 1169	HCS or DDA
<b>L02</b>	SSI related CNP in a medical institution income under the SIL	1071, 1072, 1073, 1074, 1162, 1163, 1164, 1165	HCS or DDA
<b>L04</b>	Undocumented alien/non-citizen LTC must be pre-approved by ADSA program manager. Emergency Related Service Only (45 slots)	1077, 1078, 1081, 1082, 1158, 1159, 1160, 1161, 1182, 1183, 1184, 1185	HCS
<b>L95</b>	SSI related Medically Needy no spenddown. Income over the SIL. Income under the state rate.	1083, 1084, 1085, 1086, 1087, 1186, 1187, 1154, 1155, 1156, 1157, 1166	HCS or DDA
<b>L99</b>	SSI related Medically Needy with spenddown Income over the SIL. Income over the state rate but under the private rate. Locks into state NF rate.	1083, 1084, 1085, 1086, 1087, 1088, 1089, 1090, 1091, 1092, 1154, 1155, 1156, 1157, 1167, 1186, 1187, 1188, 1189,	HCS or DDA



### Institutional Family/Children

Group	Description	RAC(s)	Administering Agency
K01	Categorically Needy family in medical institution	1052, 1053, 1054, 1055	MEDS
K03	Undocumented alien family in medical institution Emergency Related Service Only	1056, 1176, 1057, 1177	MEDS
K95	Family LTC Medically Needy no spenddown in medical institution	1059, 1060, 1179, 1061, 1062, 1180	MEDS
K99	Family LTC Medically Needy with spenddown. In medical institution	1059, 1060, 1179, 1061, 1062, 1180	MEDS

### Family Planning

Group	Description	RAC(s)	Administering Agency
P05 P06	Family Planning	1097, 1098, 1099, 1100, 1101, 1272	MEDS

### Refugee Coverage

Group	Description	RAC(s)	Administering Agency
R02	Transitional 4-month extension	1103	CSD
R03	Refugee Categorically Needy	1103	CSD

### Foster Care and Adoption Support

Group	Description	RAC(s)	Administering Agency
D01	SSI recipient FC/AS/JRA Categorically Needy	1014, 1015, 1016, 1017, 1018	MEDS
D02	FC/AS/JRA Categorically Needy	1019, 1020, 1021, 1022, 1023	MEDS
D26	Title IV-E federal foster care	1196	MEDS

### Family/Children spenddown

Group	Description	RAC(s)	Administering Agency
F99	Medically Needy children spenddown	1039, 1040	MEDS
P99	Medically Needy pregnant spenddown	1101, 1102	MEDS

### MAGI Apple Health

Group	Description	RAC(s)	Administering Agency
N01	Apple Health for Family/Caretaker Relatives	1197	MEDS
N02	Apple Health for Family/Caretaker Relatives – 12-month Extension	1198	MEDS
N03	Apple Health for Pregnant Clients	1199, 1200	MEDS
N04	Apple Health After-Pregnancy Coverage (on Apple Health when pregnancy ended)	1274, 1275	MEDS
N05	Apple Health for Adults	1201, 1217	MEDS
N07	Apple Health After-Pregnancy Coverage (applied after pregnancy ended)	1276	MEDS
N10	Apple Health for Newborns	1202	MEDS
N11	Apple Health for Kids	1203, 1204, 1205	MEDS
N13	Apple Health for Kids with Premiums (CHIP)	1206, 1207	MEDS
N21	Apple Health for Family/Caretaker Relatives, AEM	1208	MEDS
N23	Apple Health for Pregnant Clients, non-citizens	1209	MEDS
N24	Apple Health After-Pregnancy Coverage non-citizens (on Apple Health when pregnancy ended)	1277	MEDS

<b>Group</b>	<b>Description</b>	<b>RAC(s)</b>	<b>Administering Agency</b>
<b>N25</b>	Apple Health for Adults, AEM	1210	MEDS
<b>N27</b>	Apple Health After-Pregnancy Coverage non-citizens (applied after pregnancy ended)	1278	MEDS
<b>N31</b>	Apple Health for Kids, non-citizens	1211	MEDS
<b>N33</b>	Apple Health for Kids with Premiums (CHIP), non-citizens	1212, 1213	MEDS

### **Medical Care Services**

<b>Group</b>	<b>Description</b>	<b>RAC(s)</b>	<b>Administering Agency</b>
<b>A01</b>	MCS Medical Care Services – non-citizen (Aged/Blind/Disabled)	1214, 1215	DSHS
<b>A05</b>	MCS Medical Care Services – non-citizen (under 65, incapacitated)	1216	DSHS
<b>A24</b>	MCS for Survivors of Certain Crimes	1216	DSHS

### **Breast and Cervical Cancer Program**

<b>Group</b>	<b>Description</b>	<b>RAC(s)</b>	<b>Administering Agency</b>
<b>S30</b>	Breast and Cervical Cancer Program (BCCTP)	1122, 1123	MEDS

### **Tailored Supports for Older Adults**

<b>Group</b>	<b>Description</b>	<b>RAC(s)</b>	<b>Administering Agency</b>
<b>T02</b>	TSOA – no medical benefits issued	3199	HCS

## *Appendix 2: MAGI renewal notices, PER notice, and outreach*

### **New enhanced envelope**

Effective April 2023, when Washington Healthplanfinder mails these two letters to a client receiving mail via USPS, it will use the following envelope:

- **Response Required: Apple Health Request for Information (EE005)**
- **Response Required: Apple Health Renewal (EE009)**



**Washington Apple Health Renewal – Review Only (EE008)**

**Clients successfully auto-renewed receive this notice:**



Washington Health Benefit Exchange  
PO Box 657  
Olympia WA 98507

JANE SIMPSON  
742 EVERGREEN TER  
SEATTLE WA 98125

08/03/2022

Application ID:  
0000000

**Washington Apple Health Renewal - Review Only**

Dear Jane Simpson,

Please review your attached application. Based on this information you previously reported, the Washington Apple Health coverage for the following individuals was **renewed automatically**:

	<b>Begin Date</b>	<b>End Date</b>
Jane Simpson	12/01/2014	09/30/2023
John Simpson	07/05/2015	09/30/2023
Jordan Simpson	07/25/2018	09/30/2023


If the information on your attached account information is still correct, **you do not need to do anything.**

If any of this information is incorrect, update your account:

- Online <http://www.wahealthplanfinder.org>
  - o From your dashboard under "Quick Links," click on "Report a Change in Income or Household" to make any necessary changes to your application.

**Response Required: Apple Health Renewal (EE009)**

**Clients who could not be auto-renewed and must take action receive this notice:**



washington  
**healthplanfinder**  
click. compare. covered.

Washington Health Benefit Exchange  
PO Box 857  
Olympia WA 98507

JANE SIMPSON  
742 EVERGREEN TER  
SEATTLE WA 98125

04/03/2023  
Application ID:  
0000000

**Response Required: Apple Health Renewal**

Dear Jane Simpson,

Coverage for the individual(s) listed below will end unless you take action to complete the renewal for:

- Jane Simpson

If you do not complete your renewal by 04/30/2023, the health care coverage for the individuals listed above will end on 04/30/2023. You may be eligible for other coverage if your income has increased or if you believe you no longer qualify for Apple Health. You must complete your renewal to see if you qualify.

Some individuals received extended Apple Health coverage during the COVID-19 pandemic. This special temporary extension is ending.

To avoid a gap in coverage, complete your renewal by doing one of the following:

- Online [wahealthplanfinder.org](http://wahealthplanfinder.org)
  - From your dashboard under "Quick Links," click on "Update My Application and Renew My Coverage" to make any necessary changes to your application.
- Call 1-855-WAFINDER (855-923-4633)
- You can also make changes on the attached application, sign, and return:
  - By Mail: Washington Healthplanfinder  
PO Box 946  
Olympia WA 98507
  - By Fax: 1-855-867-4467

## Washington Apple Health Termination (EE011)

Clients whose Apple Health is ending. In this example, the client did not complete their renewal.



Washington Health Benefit Exchange  
PO Box 657  
Olympia WA 98507

ELLE WOODS  
742 EVERGREEN TER  
SEATTLE WA 98125

05/10/2023  
Application ID:  
00000000

### Washington Apple Health Termination

Dear Elle Woods,

Your Washington Apple Health coverage for the individuals listed below will end on 05/31/2023.

Name	Reason
Elle Woods	You have not completed your renewal for Washington Apple Health.

You must complete your renewal by 05/21/2023 or coverage for the individuals listed above will end.


Even if you no longer qualify for Washington Apple Health, complete your renewal to see if you qualify for other coverage.

#### Reconsideration

We will reconsider this decision if you complete your renewal within 90 days of the date coverage ends. If the renewal is not completed within 90 days, you will need to reapply for coverage:

- Online: [www.wahealthplanfinder.org](http://www.wahealthplanfinder.org)
- Call: 1-855-WAFINDER (1-855-923-4633)
- Mail or Fax: print and return a paper application from <https://www.hca.wa.gov/assets/free-or-low-cost/18-001P.pdf>

**Post-Eligibility Review – Response Required: Apple Health Request for Information (EE005)**  
**Clients who apply or renew may need to respond to this PER notice:**

 <p>Washington Health Benefit Exchange          PO Box 657          Olympia WA 98567</p>	<p>JANE SIMPSON          742 EVERGREEN TER          SEATTLE WA 98125</p>	<p>04/03/2023</p> <p>Application ID:          0000000</p>
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**Response Required: Apple Health Request for Information**

Dear Jane Simpson,

**We are requesting information to verify eligibility for Apple Health.**

Individual name	Information needed	Documents due by
All household members	Household income	04/18/2023

If you have questions about this letter or need more time to provide this information, call the Health Care Authority (HCA) at 1-855-682-0798.

If we do not receive this information by the due date, you or other individuals in your household could lose or be denied coverage.

Provide proof of your household income and deductions for each household member. We need one form of verification for each income source. Refer to the table below. **If you do not have any income, you must still respond.**

Type of income	Acceptable forms of verification
<ul style="list-style-type: none"> <li>• No income</li> </ul>	<ul style="list-style-type: none"> <li>• Letter showing employer name and last day worked; or</li> <li>• Call to provide information over the phone</li> </ul>
<ul style="list-style-type: none"> <li>• Earned income (income from a job, including tips and commission)</li> </ul>	<ul style="list-style-type: none"> <li>• Full copy of all wage stubs for the last 60 days; or</li> <li>• Letter signed and dated by employer to include tips, weekly hours worked, hourly wage, and pay frequency</li> </ul>
<ul style="list-style-type: none"> <li>• Self-employment income</li> <li>• Rental income</li> <li>• Farming income</li> </ul>	<ul style="list-style-type: none"> <li>• A complete copy of your most recent tax return including all schedules and attachments if it is a good representation of your current income for the full year; or</li> </ul>



	<ul style="list-style-type: none"> <li>• Most recent 3-month profit and loss statement that includes gross monthly business income, IRS allowable deductions, and net business income</li> </ul>
<ul style="list-style-type: none"> <li>• Social Security</li> <li>• Unemployment benefits</li> <li>• Capital gains</li> <li>• Dividend income</li> <li>• IRA/401K income</li> <li>• Annuity/pension income</li> <li>• Interest income</li> <li>• Taxable tribal income</li> <li>• Royalty income</li> <li>• Alimony/spousal support</li> <li>• Income from a trust</li> <li>• Foreign income</li> <li>• Railroad retirement</li> <li>• Other taxable income</li> </ul>	<ul style="list-style-type: none"> <li>• Most current award letter; or</li> <li>• Monthly statement showing gross income; or</li> <li>• A complete copy of your most recent tax return including all schedules and attachments</li> </ul>

IRS allowable deductions (Subject to change and limitations based on IRS tax rules)	Acceptable forms of verification
<ul style="list-style-type: none"> <li>• Self-employment tax</li> <li>• Self-employment retirement plan</li> <li>• Self-employment health insurance</li> <li>• Pre-tax retirement account contributions</li> <li>• Health saving account (HSA) contributions</li> <li>• Certain claimable business expenses</li> <li>• Alimony/spousal support court ordered before 01/01/2019</li> <li>• Penalty on early withdrawal of savings</li> <li>• Moving expenses for members of the armed forces</li> <li>• Educator expenses</li> <li>• Student loan interest</li> <li>• Student tuition</li> </ul>	<ul style="list-style-type: none"> <li>• A complete copy of your most recent tax return including all schedules and attachments if it is a good representation of your yearly deductions; or</li> <li>• IRS forms (1098T, 1098E); or</li> <li>• A monthly or quarterly statement from the source of the deduction; or</li> <li>• Receipts from the source</li> </ul>

When we receive this information, we will review your household's eligibility for Apple Health and notify you of the decision. If you are no longer eligible for Apple Health coverage, and you do not have other affordable coverage options available, you may have the option to purchase a plan through Washington Healthplanfinder.

If you need more information about how we count income and deductions, visit <http://wahealthplanfinder.org/us/en/tools-and-resources/how-to/how-report-income.html>.

**Response Required: Apple Health Request for Information (EE005)**  
**Clients who apply or renew may need to provide other verification**



Washington Health Benefit Exchange  
PO Box 657  
Olympia WA 98507

JANE SIMPSON  
742 EVERGREEN TER  
SEATTLE WA 98125

10/19/2022

Application ID:  
00000000

**Response Required: Apple Health Request for Information**

Dear Jane Simpson,

We need the following information to see if the individuals in your household are eligible for Washington Apple Health coverage.

Matthew: Proof of United States (U.S.) citizenship.

Examples can include: U.S. passport, enhanced driver's license or enhanced state ID, official state/county U.S. birth certificate, Certificate of Naturalization, Certificate of Citizenship, tribal ID card, etc.

Matthew: Proof of lawful presence.

Examples can include: Department of Homeland Security (DHS) notice, permanent resident card with photograph (form I-551), entry visa with alien number, I-94 record with alien number, passport with an I-94 record, employment authorization document, decision from an immigration judge or the Executive Office of Immigration Review, pending asylum application, pending withholding or removal, pending adjustment of status application, pending temporary protected status application, etc.

If this information is not received by 11/03/2022, your coverage may be stopped or denied.

### *Appendix 3: Classic Eligibility Review notices and outreach*

#### **Mail-in Eligibility Review (0022-01)**

**The ER is mailed to clients receiving services from DSHS – CSD:**

KING NORTH CSO  
PO BOX 11699  
TACOMA WA 98411-6699



Phone #  
TTY/TDD # 800-833-6384  
Toll Free # 877-501-2233

05/12/23

Client ID # 00000000

JANE SIMPSON  
742 EVERGREEN TER  
SEATTLE WA 98133

Dear JANE SIMPSON

**Some individuals received extended Apple Health (Medicaid) coverage during the COVID-19 pandemic. This special temporary extension is now ending.**

We need to find out if you can still receive the following benefits

- Cash
- Food
- Health Care Coverage
- Tailored Supports for Older Adults
- Working Family Support

Please complete, sign and return the enclosed form to us by 06/15/23. You will stop getting your benefits on 06/30/23 if we do not get the form back.

**Mail-in Eligibility Review (0022-04)**

**The ER is mailed to clients receiving services from DSHS – HCS or DDA:**

HOLGATE HCS  
PO BOX 45826  
OLYMPIA WA 98504-5826



Phone # 206-341-7600  
TTY/TDD # 206-626-5710  
Toll Free # 800-346-9257

05/12/23

Client ID # 00000000

JANE SIMPSON  
742 EVERGREEN TER  
SEATTLE WA 98125

Dear JANE SIMPSON

**Some individuals received extended Apple Health (Medicaid) coverage during the COVID-19 pandemic. This special temporary extension is now ending.**

**Please complete, sign, date, and return the enclosed eligibility review form within 15 days of receiving this letter.**

We need the form to see if you can continue receiving medical and Long Term Care (LTC) services after 06/30/23. If you need more time, call me at the number listed below.

A friend, relative, or advocate may help you complete this form.

**Please provide the following information with your completed and signed Eligibility Review form:**

## *Appendix 4: Notices to CHIP and HWD clients*


### Healthcare for Workers with Disabilities (HWD) premium postcard

Postcard sent to clients receiving Apple Health for Workers with Disabilities (HWD) informing them of premium requirements resuming.



## [Apple Health for Kids with Premiums \(CHIP\) postcard](#)

Postcard sent to households receiving Apple Health for Kids with Premiums (CHIP) informing them of premium requirements resuming.



**Important news!**


Monthly premiums are starting again for Apple Health for Kids with Premiums, also known as **Children's Health Insurance Program (CHIP)**. Premiums were paused during the COVID-19 pandemic which started in March 2020.

- Premiums are based on current information. Login at **wahealthplanfinder.org** or call 1-855-923-4633 if income has decreased since the last Apple Health application or renewal.
- Billing notices begin in June 2023 and payments are due July 15, 2023.

HCA 19-0074 (3/23)

Washington State  
**Health Care Authority**  
P.O. Box 45531  
Olympia, WA 98504-5531

**For more information visit:**  
**[hca.wa.gov/phe](https://hca.wa.gov/phe)**  
or call 1-800-562-3022.  
**Watch your mailbox!**



## Appendix 5: Redetermination Notice to ProviderOne extensions

### ProviderOne redetermination notice

### Notice sent to clients extended in ProviderOne only

**Washington State Health Care Authority**

Helena Carter  
742 Evergreen Ter  
Seattle, WA 98125

07/03/2023

Subject: Response required Apple Health renewal

Dear Helena,

You received extended Apple Health (Medicaid) coverage during the COVID-19 pandemic. This special temporary extension is now ending. You must take action to see if you are eligible to keep getting Apple Health or other health coverage.

If you do not respond by August 7, 2023, Apple Health coverage will end August 31, 2023.

Review the information below and do one of the following:

- Answer all questions and make any changes if necessary. Mail the form to:
  - Health Care Authority
  - PO Box 45531
  - Olympia, WA 98504-5531
- Call the Apple Health customer service at 1-855-682-0798. Have the requested information below gathered and ready to give over the phone.
- Submit via email to [Apple@hca.wa.gov](mailto:Apple@hca.wa.gov).
- Fax form to 1-866-841-2267.

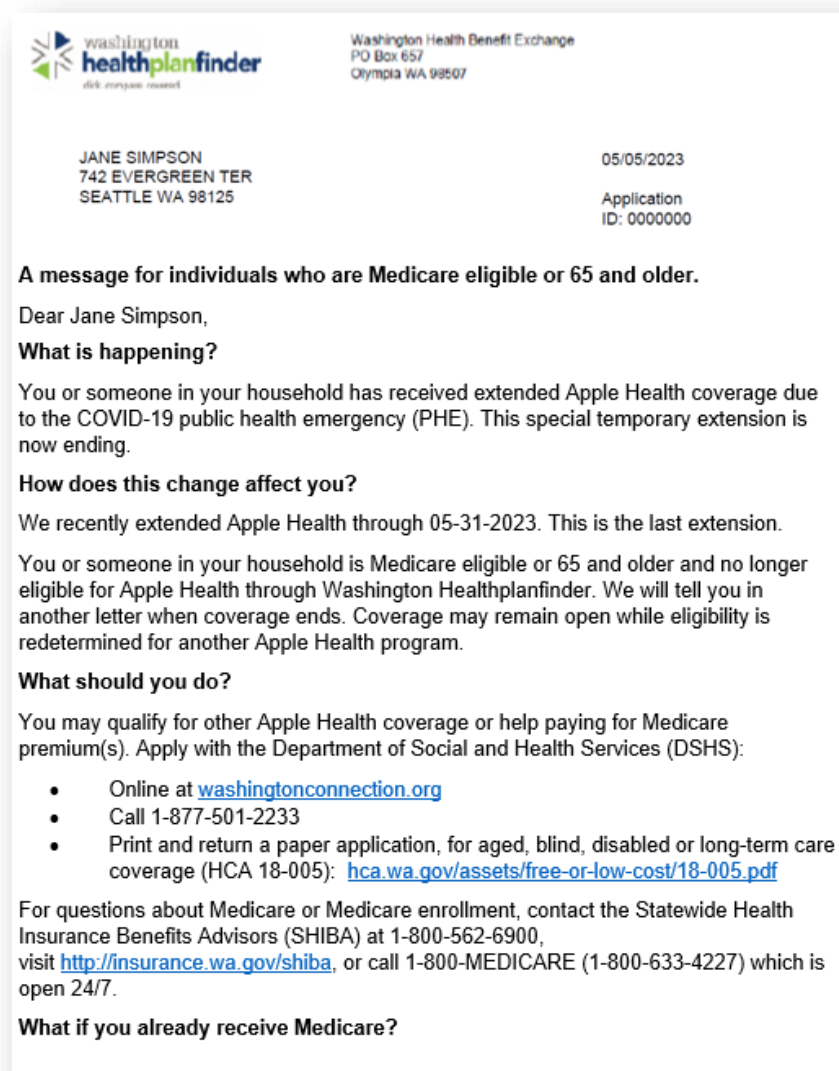
If you have any questions, need help, or need language assistance services or large-print, call 1-855-682-0798 or email [AskMAGI@hca.wa.gov](mailto:AskMAGI@hca.wa.gov).

Name	Helena Carter	Client ID	0000000
Physical address	742 Evergreen Ter		
Mailing address (if different)	Seattle WA 98125		


## *Appendix 6: Notice to MAGI Apple Health for Adults who are 65+ or Medicare eligible*

### Medicare FAQ notice

Notice sent to clients active on Apple Health for Adults who are Medicare eligible or 65+







The Health Care Authority (HCA) has been paying your Medicare premium(s). If you no longer qualify for an Apple Health program, your Medicare premiums will no longer be paid.

**What happens if you do not take action?**

HCA will stop paying for your Medicare premium(s) and Apple Health will end for you or your household on 05-31-2023.

**What happens when you apply at DSHS?**

DSHS will determine if you are eligible for other Apple Health coverage, including help paying for your Medicare premiums.

**What if you have questions?**

- For help applying for coverage, contact DSHS Community Services Division at 1-877-501-2233.
- For questions about long term services and supports, contact the DSHS Home and Community Services at 1-800-422-3263.

**For more help**

- Visit <http://www.wahealthplanfinder.org> or visit <http://www.wahbexchange.org> for tips and resources
- Call our Customer Support Center at 1-855-923-4633 (TTY: 1-855-627-9604)
- Contact us by fax at 1-855-867-4467 or by mail at PO Box 946 Olympia WA 98507

You can drop off an application, renewal form, or any other documents at:

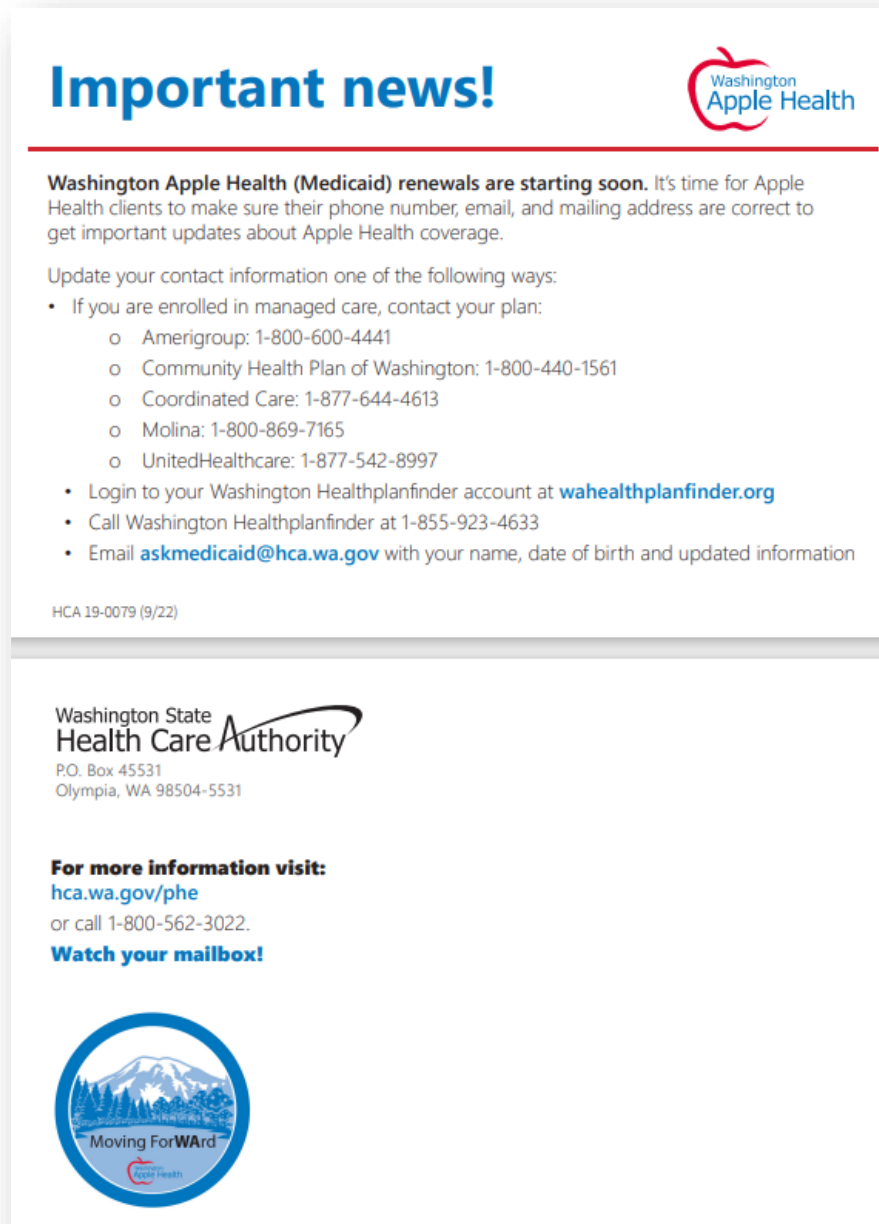
- An HCA Community-Based Specialist near you at [www.hca.wa.gov/HCAcommunitystaff](http://www.hca.wa.gov/HCAcommunitystaff)
- A local DSHS Community Service Office near you at <http://www.dshs.wa.gov/onlinecso/findservice.shtml>

Contact Customer Support for help locating a drop-off location in your area.


## Appendix 7: Postcard sent prior to renewal/eligibility review

### End of PHE Postcard (MAGI)

Postcard is sent to clients who will go through the auto-renewal process



**Important news!**



**Washington Apple Health (Medicaid) renewals are starting soon.** It's time for Apple Health clients to make sure their phone number, email, and mailing address are correct to get important updates about Apple Health coverage.


Update your contact information one of the following ways:

- If you are enrolled in managed care, contact your plan:
  - Amerigroup: 1-800-600-4441
  - Community Health Plan of Washington: 1-800-440-1561
  - Coordinated Care: 1-877-644-4613
  - Molina: 1-800-869-7165
  - UnitedHealthcare: 1-877-542-8997
- Login to your Washington Healthplanfinder account at [wahealthplanfinder.org](http://wahealthplanfinder.org)
- Call Washington Healthplanfinder at 1-855-923-4633
- Email [askmedicaid@hca.wa.gov](mailto:askmedicaid@hca.wa.gov) with your name, date of birth and updated information

HCA 19-0079 (9/22)

Washington State  
**Health Care Authority**  
P.O. Box 45531  
Olympia, WA 98504-5531

**For more information visit:**  
[hca.wa.gov/phe](http://hca.wa.gov/phe)  
or call 1-800-562-3022.  
**Watch your mailbox!**



## End of PHE Postcard (Classic)

Postcard is sent to clients who will get the Eligibility Review the following month

# Important news!



**Washington Apple Health (Medicaid) eligibility reviews are starting again!** It's time for Apple Health clients with Department of Social and Health Services (DSHS) to make sure their phone number, email, and mailing address are correct to get important updates about Apple Health coverage.

Update your contact information with DSHS one of the following ways:

- If you are enrolled in managed care, contact your plan:
  - o Amerigroup: 1-800-600-4441
  - o Community Health Plan of Washington: 1-800-440-1561
  - o Coordinated Care: 1-877-644-4613
  - o Molina: 1-800-869-7165
  - o UnitedHealthcare: 1-877-542-8997
- Login to Washington Connection at [washingtonconnection.org](http://washingtonconnection.org).
- Email [AHUpdateMyInfo@hca.wa.gov](mailto:AHUpdateMyInfo@hca.wa.gov) with your name, date of birth, and updated information.
- Call Apple Health customer service at 1-800-562-3022.

HCA 19-0091 (3/23)

Washington State  
Health Care Authority

P.O. Box 45531  
Olympia, WA 98504-5531




### **For more information visit:**

[hca.wa.gov/phe](http://hca.wa.gov/phe)

or call 1-800-562-3022.


**Watch your mailbox!**





## *Appendix 8: Acronyms*

AEM	Alien Emergency Medical
ALTSA	Aging and Long-Term Support Administration, part of DSHS
APC	After-Pregnancy Coverage
ARPA	American Rescue Plan Act
ARTF	Adult Residential Treatment Facility
AS	Adoption support
CHIP	Children’s Health Insurance Program (Apple Health for Kids with Premiums)
CLIP	Children’s Long-Term Inpatient Program
CMS	Centers for Medicare & Medicaid Services
COFA	Compact of Free Association
CSD	Community Services Division, part of DSHS
DDA	Developmental Disabilities Administration, part of DSHS
DSHS	Department of Social and Health Services
ER	Eligibility review
FC	Foster care
FCAS	Foster care and adoption support
FFCRA	Families First Coronavirus Response Act
HBE	Washington Health Benefit Exchange
HCA	Health Care Authority
HCS	Home and Community Services, part of DSHS
HHS	United States Department of Health and Human Services
HWD	Apple Health for Workers with Disabilities
LTSS	Long-term services and supports
MAGI	Modified Adjusted Gross Income



MACSC	Medical Assistance Customer Service Center, part of HCA
MCO	Managed care organization
MEDS	Medical Eligibility Determination Services, part of HCA
OE	Open enrollment
OIC	Office of the Insurance Commissioner
OMEP	Office of Medicaid Eligibility and Policy, part of HCA
PER	Post-eligibility review
PHE	Public health emergency
QHP	Qualified health plan
SEP	Special enrollment period
SHIBA	Statewide Health Insurance Benefits Advisors, part of OIC
SSI	Supplemental Security Income, differs from SSDI
WAC	Washington Administrative Code