Unwinding the public health emergency for Apple Health (Medicaid)

Unwinding overview

What does it mean to "unwind"?

The Health Care Authority (HCA) and the Department of Social and Health Services (DSHS) maintained Apple Health (Medicaid) coverage during the COVID-19 public health emergency, unless clients:

- Moved out of state.
- Did not meet the immigration and citizenship requirements.
- Requested closure.
- Passed away.

HCA and DSHS also changed certain rules to make it easier for people to apply for Apple Health and keep their coverage.

HCA and DSHS are now unwinding these temporary rules. This means renewals and eligibility reviews will resume, resulting in changes or terminations of Apple Health coverage.

Will all clients have to take action in April?

No. HCA and DSHS will redetermine clients' eligibility when they report a change or are approaching their renewal end date. See the question and answer section below for more information.

How long is the unwind?

Redeterminations must be initiated for all clients between April 2023 and March 2024 and completed by the end of May 2024.

When will clients lose Apple Health?

Most clients receive Apple Health because they are eligible and will continue to receive Apple Health because they remain eligible for the program. Clients who are no longer eligible may see changes and terminations of coverage begin April 30, 2023.

What would cause a client to lose coverage?

There are several circumstances that may cause a client to lose coverage as of April 30, 2023. These include:

- Reporting a change that causes termination.
- Completing a renewal or eligibility review.
- Not responding to a request for information.

What options do clients have if they lose Apple Health?

Clients who are no longer eligible for Apple Health coverage have several options:

- Select a qualified health plan through the Washington Healthplanfinder with possible savings, including Cascade Care.
- Enroll in employer sponsored insurance. Clients should check with their employer about a special enrollment period for employer's insurance because they lost Apple Health.
- If eligible for Medicare, enroll in Medicare through one of Medicare's various enrollment periods, including a special enrollment period when a client loses Apple Health.

Clients can reapply for Apple Health at any time of the year.

Do clients still need to report changes?

Yes. Clients need to report changes even if they are not due for a renewal. Making changes may impact eligibility. Learn more about reporting changes.

Apple Health for adults, children, pregnant individuals, and parents or caretakers

Who are MAGI clients?

MAGI stands for modified adjusted gross income. Clients enrolled in a MAGI program get coverage through the Washington Healthplanfinder and are:

- Adults age 19 to 64 years old, without Medicare.
- Children.
- Pregnant individuals.
- Parents or caretakers relative of a minor child

Most clients receive MAGI Apple Health.

What is the renewal process for MAGI Apple Health?

See page 13 of the Washington Apple Health Guide to Unwinding from the PHE for more information.

How can we find out when a client is due for renewal?

There are several ways to see if a client is due for renewal:

- Check with the client's managed care organization (MCO).
- View their account in Washington Healthplanfinder.
- View the latest Washington Healthplanfinder notice.

Renewals and eligibility reviews are sent before the 10th of the month prior to the review end date. For example, a client due for renewal or review 12/31/2023 will get a renewal notice by 11/10/2023.

What will happen with the income deduction added to a Washington Healthplanfinder application?

The domestic production activities (DPA) deduction was added by HCA staff as a workaround option to Washington Healthplanfinder to maintain Apple Health coverage during the PHE. By the end of April 2023, the deduction will be removed from applications.

Clients will still stay on Apple Health until their next renewal or they report a change. Reporting a required change may cause a termination or change prior to the next renewal period.

What is a post-eligibility review (PER)?

A PER happens when a MAGI client applies for or renews Apple Health through Washington Healthplanfinder, attests to income under the income limits, and electronic data sources do not match their attestation. Coverage is approved or renewed based on self-attestation and Washington Healthplanfinder sends the household a letter to verify income and deductions.

HCA staff review information sent in by the client and redetermines eligibility. This could cause a client to move to another Apple Health program, including one that has premium requirement, or they may lose Apple Health coverage.

If a client does not verify their income, Apple Health coverage will end.

When do post-eligibility reviews (PERs) start?

Clients who apply for or renew coverage on or after 04/01/2023 may have to respond to a PER.

When do premiums for Apple Health for Kids with premiums (also known as CHIP) restart?

Premium collection for Apple Health for Kids with premiums restart July 2023. HCA will mail a postcard by May 15, 2023, to households enrolled in Apple Health for Kids with premiums advising them of premiums restarting and to tell us if their income decreased.

DSHS mails premium invoices on behalf of HCA. DSHS mails the first invoice June 30, 2023, with a due date of July 15, 2023. Apple Health coverage will end if a household does not pay the premium for three months.

Note: Households with kids who are pregnant or American Indian or Alaskan Native are exempt from paying premiums.

What can a family do if they are unable to pay their premium?

Families who are unable to pay their premium should contact Apple Health customer service as soon as possible.

Online: Secure form

Email: Ask MAGI Phone: 1-800-562-3022 Assistance in your local area: HCA community-based specialists Business hours: Monday - Friday 7 a.m. to 5 p.m. (Pacific) (except state holidays) TRS: 711 through Washington Relay

What happens when clients report changes before their renewal?

When reporting a change, Washington Healthplanfinder will ask the client to review all their circumstances, such as household size and income. Depending on the update, this may change Apple Health programs or cause a client to lose Apple Health coverage.

What is the process for clients extended in ProviderOne only?

See page 13 of the Washington Apple Health Guide to Unwinding from the PHE for more information.

Can 19 year olds stay on their parents' application?

Yes, Apple Health clients who are 19 years of age or older can stay on their parents' application if they are tax dependents of their parents. They will need to apply for coverage on their own application if they are not tax dependents. Learn more about adult tax dependents.

How early can clients renew?

Clients can renew coverage the first of the month before their renewal end date. For example, a client due for renewal 10/31/2023 can renew as early as 9/1/2023.

What happens after a renewal date has passed?

Clients who lose coverage for not renewing have 90 days after termination of Apple Health to complete their renewal. If they are eligible for Apple Health, coverage automatically starts the day they terminated so there is no break in coverage.

Why would a client not get approved for a full 12 months?

There are a few reasons someone is not approved or renewed for 12 full months. This includes clients:

- Turning age 19 or 65 during the next 12 months.
- Whose pregnancy ended less than 12 months ago.
- Approved for Alien Emergency Medical (AEM) for emergent medical conditions.

Are clients eligible for Apple Health After-Pregnancy Coverage (APC) regardless of immigration status?

Yes, view the After-Pregnancy Coverage webpage for more information.

Are children be eligible for Apple Health for Kids coverage regardless of immigration status?

Yes, Apple Health for Kids and Apple Health for Kids with premiums is available to children regardless of citizenship and immigration status, if they meet all other eligiblity criteria.

Will children under 18 years of age lose coverage if their parents miss the renewal deadline?

Coverage will end if a parent does not respond to a renewal notice. Clients have 90 days after coverage ends to complete their renewal and be fully reinstated if they are eligible for Apple Health.

Classic Apple Health

Who are Classic Apple Health clients?

Clients eligible for Classic Apple Health coverage are those who are:

- Age 65 or older.
- Have blindness or a disability.
- Not eligible for MAGI coverage through Washington Healthplanfinder or are eligible for Medicare.
- In need of long-term services and supports (LTSS).

LTSS 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 programs to children who have disabilities or need LTSS.

Will everyone have to submit an eligibility review in April?

No. Clients will have to submit eligibility reviews based on their renewal or review end date. Eligibility reviews begin in April 2023 and continue into 2024. DSHS staff will look to see if a client's coverage can be renewed without the clients needing to take action.

What is happening with premiums for Apple Health for Workers with Disabilities (HWD)?

Premium collection for HWD restart July 2023. HCA will mail a postcard on behalf of DSHS by June 1, 2023, to HWD clients advising them of premiums restarting and to tell us if their income decreased.

DSHS mails the first invoice 07/27/2023, and payment is due August 15th. If a household does not pay the premium for four months, HWD coverage ends.

Note: Clients who are American Indian or Alaskan Native are exempt from paying premiums.

What can clients do if they are unable to pay the premium?

They should contact DSHS' HWD staff as soon as possible at 1-800-871-9275.

How do you know when a client is due for renewal?

There are several ways to see if a client is due for renewal:

- Through Washington Connection client benefit account.
- View the latest DSHS notice.
- Check with the clients MCO.

What happens after a renewal date has passed?

Clients who lose coverage for not renewing can reapply at any time and request retroactive coverage, if needed.

Do clients on SSI have to renew?

Clients receiving Supplemental Security Income (SSI) from the Social Security Administration are entitled to Apple Health and do not have to complete a renewal. If SSI payments end, DSHS will redetermine their eligibility for other Apple Health programs.

Note: SSI is different from Social Secuity Disability Insurance (SSDI). Clients receiving SSDI do have to renew.

What is a mobile CSO? Can I request one for an event?

The mobile Community Services Office (CSO) are trucks managed by DSHS that transform into functioning offices. Each vehicle includes a reception area, interview stations, a sunshade for protection from the elements or extra space, and a mechanical lift as an option for access instead of the stairs. Mobile CSO units are staffed by experienced program specialists who can determine financial eligibility for the cash, food, and medical assistance programs. They process new applications, reviews, and changes for active cases. They also issue EBT cards and receive documents.

Contact the Mobile CSO for your area to schedule an event in your community. Priority will be given to community partners who agree to help publicize the event to connect as many people as possible to DSHS services. Examples include housing authorities, libraries, job fairs, public health clinics,

temporary labor centers, senior centers, county fairs, community events, and areas with under-served populations. Mobile CSO events are not limited to normal DSHS business hours.

Contact the Mobile CSO by:

- Mail: Mobile CSO PO Box 45440 Olympia, WA 98504-5440
 - Phone: 360-480-4772
- Email:
 - o Eastside Mobile CSO
 - o Westside Mobile CSO

Additional questions

Do clients have the right to appeal?

Yes. If a client receives a letter from Apple Health and disagrees with a decision, they may have a right to a hearing. Follow the appeal directions in the letter or call the Office of Administrative Hearings (OAH) at 1-800-583-8271.

What outreach is happening to reach clients experiencing

homelessness?

If a client experiencing homelessness shows income under the income limit in our systems, they will likely stay on coverage without having to act. They should make sure Washington Healthplanfinder or DSHS has a good mailing address and phone number for them. If they get coverage through Washington Healthplanfinder and have access to email, signing up for email correspondence is the best way to get notices about their coverage.

HCA has several homeless organizations represented in its Apple Health Ambassador Program. People can become ambassadors at any time.

Does ProviderOne show a client's renewal dates?

ProviderOne does not show renewal dates to individuals with provider access, but ProviderOne staff are exploring this as an option.

What is Medicare?

Medicare is federal health insurance for individuals:

- 65 years of age or older,
- With a disability,
- With End-State Renal Disease (ESRD), or
- With Lou Gehrig's disease (ALS).

Medicare and Medicaid are different. Medicaid is a join federal and state program that gives health coverage to people with limited income and resources.

What should Medicare recipients on Apple Health for adults expect as the unwind happens?

When a client becomes Medicare eligible, they are no longer eligible for Apple Health for adults through Washington Healthplanfinder. During the PHE, HCA maintained Apple Health for adults

coverage and paid Medicare part B premiums. These clients will go through a renewal between April 2023 and July 2023. The renewal will terminate their Apple Health for adults.

HCA will no longer pay the Medicare part B premium unless the client applies for a Medicare Savings Program and is approved.

What resources are available to clients who need to enroll in

Medicare?

Clients can contact the Statewide Health Insurance Benefits Advisors (SHIBA) for assistance and questions about enrolling in Medicare. The Washington State Office of the Insurance Commissioner (OIC) provides this free, unbiased, and confidential service using volunteers with training on Medicare.

Contact SHIBA:

- **Phone:** 1-800-562-6900, TDD: 360-586-0241
- In person: Contact a local office in your county
- **Online:** Fill out their online contact form

Will Medicare assess a late enrollment penalty?

Medicare sometimes assesses a late enrollment penalty if an eligible client does not enroll timely. Medicare will not assess a late enrollment penalty for Apple Health clients transitioning to Medicare when enrolling through a special enrollment period.

How can clients leaving Apple Health get help reviewing free and low-cost options available through Washington Healthplanfinder?

Washington Healthplanfinder offers enrollment help through:

- Insurance Brokers who are experts who can help individuals shop for plans, understand financial help, and get individuals enrolled.
- Navigators who can help individuals get enrolled and answer any general questions about health insurance options or the application process.

Help from brokers and navigators is typically free for people of any income level.

How many clients renew each month?

View the Continuous enrollment unwind data for Apple Health entering the unwind for more information.

How do I know who to call?

The cross-agency desk aid includes contact information for HCA, DSHS and other important Apple Health programs, such as Foster Care and Adoption Support.

Managed care information

What is managed care?

Most Apple Health clients are covered through managed care. Managed care is a prepaid, comprehensive system of medical and health care delivery. It includes preventive, primary, specialty and ancillary health services. Learn more about managed care and the five plans offered through Apple Health.

Apple Health managed care plan	Phone number
Amerigroup (AMG)	1-800-600-4441
Community Health Plan of Washington (CHPW)	1-800-440-1561
Coordinated Care of Washington (CCW)	1-877-644-4613
Molina Healthcare of Washington, Inc. (MHW)	1-800-869-7165
UnitedHealthcare Community Plan (UHC)	1-877-542-8997

What role do managed care plans play in the unwind?

The managed care plans play a key role by conducting outreach and helping Apple Health clients understand their options to stay insured.

What kind of outreach will the managed care plans do?

The managed care plans are outreaching to Apple Health clients through:

- Text messaging for members who opted-in to receive texts from the plan.
- Phone call reminders.
- Mailing and emailing information.

The plans will also get information on why their member is losing Apple Health so they can conduct detailed outreach to get them reenrolled into Apple Health, when applicable.

Can clients update their information with their managed care plan?

A new option for the unwind allows plans to send HCA updated client contact information through a form. HCA staff use this information to update Washington Healthplanfinder or DSHS with the latest information.

Information updated through this process includes:

- Address (physical or mailing address).
- Phone number(s).
- Email address.

All other information, including changes to income or household members, must be reported through normal processes and not through the managed care plans.

Outreach

What kind of outreach is happening?

HCA and DSHS are outreaching to clients in a variety of ways, including:

- Automated phone call reminders when a client needs to renew.
- Text messages.
- Social media.
- Postcards to remind clients to keep their contact information current.
- Letters.
- Radio ads.

HCA and DSHS are also working closely with community partners and Apple Health ambassadors so clients stay informed on actions needed to stay insured.

Will clients get a phone call?

HCA and DSHS will call clients mid-month if they are at risk of termination for not renewing. The prerecorded phone calls will go to the phone number on file.

Will clients get a text message?

Yes, text message reminders are an exciting new way of reaching clients to help them stay insured. HCA will text clients who get coverage through Washington Healthplanfinder or DSHS mid-month if they have not renewed their coverage.

What if clients suspect a phone call or text message is a scam?

HCA, DSHS, and Washington Healthplanfinder will never ask for money to enroll or re-enroll in Apple Health coverage. Clients should never share banking or credit card information with anyone claiming to be from HCA, Apple Health, DSHS or Washington Healthplanfinder.

If clients receive a phone call or text message that they think is a scam, instruct them to hang up and not respond. Clients should report potential scams to Apple Health customer service at 1-800-562-3022. HCA may text and call clients with a reminder when it's to update information or renew coverage.

What unwind resources are translated?

Apple Health clients can use the translated resources below to learn how to report a change or apply for or renew coverage.

- Report a change
- Apply for or renew coverage
- End of PHE Postcard (MAGI)
- End of PHE Postcard (Classic)
- Update your Apple Health (Medicaid) contact info video | Spanish

More information

- Apple Health and the public health emergency
- Washington Apple Health Guide to Unwinding from the PHE
- End of PHE Communications Toolkit
- End of PHE Social Media Toolkit
- Online Reference Guide for Apple Health