



#STAYCOVERED

HOW TO STAY COVERED IF YOU ARE NO LONGER ELIGIBLE FOR MEDICAID

Nationwide, Medicaid beneficiaries will have to renew their coverage starting this year to comply with federal legislation. In Michigan, annual renewals will begin again in June 2023.

If you receive notice that you or a family member are no longer eligible for Medicaid or MIChild benefits, don't worry, you have other options including options for low or no-cost coverage:

- **Purchasing a plan on the Health Insurance Marketplace.** Thanks to savings recently put in place by the federal government, many Michiganders are eligible to buy a Marketplace plan for less than \$10 per month. Free local enrollment help is available in-person, over the phone, or by email to help you choose the plan that meets your needs and budget.

Losing Medicaid coverage is a qualifying life event, allowing you to enroll in a Marketplace plan outside of the normal open enrollment period. You can enroll as early as 60 days before you expect to lose coverage. People who are signing up for a Marketplace plan because they lost Medicaid coverage have up to 60 days to select a plan after submitting a Marketplace application – but signing up right away reduces the risks that come from a lapse in coverage.

To shop and compare available health plans, visit [HealthCare.gov](https://www.healthcare.gov) or call 1-800-318-2596 (TTY: 1-855-889-4325). For free local help, visit [LocalHelp.HealthCare.gov](https://www.localhelp.healthcare.gov).

- **Enrolling in employer-sponsored health coverage through your job.** Many employers offer health insurance to their employees, and those plans often offer a special enrollment period, generally at least 30 days, for employees who experience a qualifying life event, such as losing Medicaid coverage. Contact your employer's benefit office or human resources department to ask about enrolling in your employer's health plan.
- **Enrolling in Medicare.** Eligible seniors who lose their Medicaid coverage can enroll in Medicare Parts A and B up to six months after their Medicaid coverage ends. For Medicare Advantage Plans (also known as Part C), newly enrolled Medicare beneficiaries can sign up for a plan within three months after the start date of their Medicare coverage.

Michiganders who turned 65 during the COVID-19 Public Health Emergency and missed their initial enrollment window may also sign up for a Medicare Supplement plan, thanks to a recent order from the Michigan Department of Insurance and Financial Services.

To enroll in Medicare or shop for a Medicare Advantage or Medicare Supplement plan, visit [Medicare.gov](https://www.medicare.gov) or call 800-772-1213 (TTY: 800-325-0778). Michigan Medicare Assistance Program counselors also are available to provide free help with Medicare enrollment. For more information visit [MMAPInc.org](https://www.MMAPInc.org) or call 1-800-803-7174 to speak with a counselor.

Having health insurance is important, not just for when you are sick or hurt, but also to help you stay healthy and avoid big medical bills. It is important that you take action to get the coverage you need to protect yourself and your family.

For questions about purchasing a health plan on [HealthCare.gov](https://www.healthcare.gov), visit [Michigan.gov/HealthInsurance](https://www.michigan.gov/HealthInsurance), or call the Michigan Dept. of Insurance and Financial Services at 877-999-6442, Monday through Friday from 8 a.m. to 5 p.m.

More information about changes to food assistance and Medicaid benefits connected to the COVID-19 Public Health Emergency can be found at [Michigan.gov/2023BenefitChanges](https://www.michigan.gov/2023BenefitChanges).