

# Have you heard the news?

Louisiana Medicaid restarts eligibility reviews beginning April 2023 to see who is still qualifies for coverage.

Everyone who has Medicaid needs to make sure their account is updated.

**DON'T RISK LOSING YOUR COVERAGE!!**

Following these steps will help determine if you still qualify:

## STEP 1

Contact *Navigators for a Healthy Louisiana* for assistance by scanning the QR code below

## STEP 2

Schedule a one-on-one appointment with a Navigator to make sure your account is up-to-date

## STEP 3

Check your mail for a letter from Louisiana Medicaid

**Navigators for a  
Healthy Louisiana**

Health Insurance  
Marketplace

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Scan the code or call for **FREE** one-on-one assistance with a Certified Navigator

**1-800-435-2432**

## WHAT DO MEDICAID MEMBERS NEED TO KNOW?

- Medicaid renewals are returning. **It is VITAL that Medicaid members make certain Medicaid has their current contact information.**
- Make sure your contact information, including your mailing address, phone number, cell phone number and email address, is up to date so you receive important letters about your health insurance coverage.
- Check your mail and if you get a letter from Louisiana Medicaid, read the letter and follow the instructions in the letter. The letter will almost always require you to send Medicaid documentation or information.
- Members who do **not** respond to renewal letters or requests for information risk losing their coverage, even if they are eligible.
- Members can make changes to their contact information by:
  - logging on to MyMedicaid.la.gov
  - emailing MyMedicaid@la.gov
  - calling their health plan on the number on their ID card
  - calling Medicaid's Customer Service hotline at 1-888-342-6207. Hotline assistance is available Monday through Friday, 8 a.m. – 4:30 p.m.
- In-person help is also available at any of the regional Medicaid offices. For an office closest to you, visit [www.ldh.la.gov/medicaidoffices](http://www.ldh.la.gov/medicaidoffices)

## WHAT IS LDH DOING TO ENSURE ELIGIBLE MEMBERS DO NOT LOSE COVERAGE?

- LDH is planning a comprehensive outreach and communications campaign that will include a range of methods for alerting Medicaid members and sharing information with those stakeholders and trusted community partners that serve and support Medicaid members.
- In addition to mailed letters, members who have shared a mobile telephone number will receive text message reminders.
- LDH will also utilize traditional paid media and grassroots outreach efforts to reach Medicaid members. This will include radio, TV and digital advertising as well as on-site, in-person outreach to share information with Medicaid members in familiar community settings where people gather.
- As always, Medicaid will work collaboratively with the managed care organizations (MCOs) that provide coverage for the majority of the Medicaid population to amplify outreach and education efforts for members and those stakeholders (providers, community organizations, etc.) that serve them.

## MEDICAID RENEWAL: BACKGROUND INFORMATION

- In March 2020, Louisiana Medicaid changed some of its eligibility rules in response to the federal COVID-19 Public Health Emergency (PHE). This included stopping closures for most Medicaid members.
- The recent passage of the 2023 Consolidated Appropriations Act ends this continuous Medicaid coverage.
- We are preparing to send letters and renewal packets to those members where redeterminations – or more information is needed – to determine if a member is still eligible. This will occur over a 12-month time period.
- We want everyone who is eligible for Medicaid to maintain their coverage.
- Individuals enrolled in Medicaid are guaranteed 12 months of coverage postpartum.

## IMPORTANT DATES:

- The first batch of renewal letters will be mailed out at the end of April and beginning of May. Members who are no longer eligible will close at the end of June 2023.
- Mailing of renewal letters will be staggered across 12 months, and it will take 14 months to complete the redetermination process for all Medicaid members



## LOUISIANA DEPARTMENT OF HEALTH CONTACT INFORMATION FORM

MEMBER INFORMATION:		
Name:		
Medicaid ID:	Social Security Number:	Date of Birth:

Please include all known information. The **member's name**, **date of birth** and at least the **last four numbers of the Social Security Number** are required to process the form.

CHANGE OF CONTACT INFORMATION:			
<b>HOME ADDRESS:</b>	Street Address:		Apt/Suite Number:
	City:	State:	ZIP Code:
<b>MAILING ADDRESS:</b> <i>(if different from Home Address)</i>	Street Address:		Apt/Suite Number:
	City:	State:	ZIP Code:
Cell Phone Number:		Email Address:	
Home/Alternative Phone Number:		Do you want to receive information from Medicaid by email? <div style="text-align: center;"><input type="checkbox"/> Yes   <input type="checkbox"/> No</div>	

**SIGN THIS FORM:**

By signing this form, I am giving my permission to the State of Louisiana and its agents to verify the information given on this form. Under penalty of perjury, I certify that all information contained in this form is true and correct to the best of my knowledge.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Must be signed by hand. Digital or electronic signature will not be accepted.*

**FORMS MAY BE SUBMITTED:**  
By email to [MyMedicaid@la.gov](mailto:MyMedicaid@la.gov)  
By fax to **1-877-523-2987**