



Medicaid

Redetermination

2023

Agenda

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Purpose

We want working with us to be easy.

We have designed these materials to organize and simplify important information that can help your patients retain their Medicaid coverage.

We want to work in partnership with you to:

- Minimize the number of eligible members who lose coverage
- Provide all members with access to multiple customer-centered redetermination completion and submission opportunities
- Ensure all Medicaid eligible members continue to connect with their healthcare providers



State of Illinois Updates

Managed Care Updates

- Continuous enrollment is no longer tied to the Public Health Emergency (PHE) end date
- Redeterminations are beginning again
- The timing is from June 2023 to May 2024
- First group of redetermination letters will be mailed by early May 2023
- First date Medicaid recipients could lose coverage is July 1, 2023
- All Medicaid enrollees will have to renew their coverage at some point
- Redetermination is a monthly on-going process



Redetermination Overview

Redetermination or Renewal

What is redetermination?

Medicaid redetermination (often referred to as Medicaid renewal) is the process Medicaid members **must complete annually** to determine their eligibility for Medicaid.

** Redetermination is every six months if members also receive SNAP benefits.*

If Medicaid members do not complete the process and provide the required eligibility documents, their Medicaid benefits may be terminated.

Why is Medicaid redetermination restarting?

Medicaid redetermination termination was on hold during the COVID-19 Public Health Emergency (PHE). With the PHE ending, HFS is restarting the redetermination process for Medicaid members. Many Medicaid members may be unfamiliar with the redetermination termination process because it was on hold for nearly three years.



Redetermination Timeline

When is Medicaid Redetermination?

- HFS is re-starting redetermination beginning with members who have a June renewal due date
- Redetermination paperwork will be mailed out at least 30 days prior to the completion due date that is printed on the forms
- Enrollees are instructed to complete the renewal process by the due date, or they could lose their Medicaid coverage
- HFS has built in a grace period of 15 days for enrollees who submit late
- If the information is not received by the end of the grace period, the enrollee’s coverage will be cancelled

Redetermination Timeline Examples				
Month of renewal	Date HFS Mails Renewal Forms	Renewal Due Date Printed on Forms	Date 15 Day Grace Period Ends	First Day/Month of Coverage Loss
June	04/27/2023	06/01/2023	06/15/2023	07/01/2023 - July
July	05/30/2023	07/01/2023	07/17/2023	08/01/2023 - August
August	06/28/2023	08/01/2023	08/15/2023	09/01/2023 - September

Redetermination is a monthly on-going process. All Medicaid enrollees will need to renew their coverage at some point during the rest of the year.

Redetermination Forms

Form A (Ex Parte): No Response Required

- Many Medicaid enrollees can be redetermined without submitting any forms or documents
 - This is called ex parte or Form A
- Form A notifies the enrollee that their coverage has been renewed using electronic verification
 - No action is required to keep Medicaid coverage
- Providers can find out if patient is Form A by checking MEDI within 30 days of the patient's renewal due date

Form B: Response is Required

- Medicaid enrollees using Form B, must complete their renewal either by returning the forms mailed to them or completing the renewal application on ABE's Manage My Case

HFS estimates that approximately 35 – 40 % of Medicaid enrollee will be renewed through ex parte

What can Providers Do?

Support Members with Sample Messaging

Message to Members	Resources	Sample Messages
<p>Update Your Address</p> <p>You can help your Medicaid patients by encouraging them to make sure their information is up-to-date with HFS:</p> <ul style="list-style-type: none"> • Mailing address • Phone number • Email 	<p>Members can update their information in two ways:</p> <ol style="list-style-type: none"> 1. Call the HFS hotline (877-805-5312) 2. Complete an HFS <u>web form</u> 	<p>Don't risk losing your Medicaid coverage. Illinois Medicaid needs to be able to send you renewal paperwork. Make sure you give them an address where mail can reach you.</p>
<p>Complete Redetermination by Your Due Date</p> <p>Encourage your Medicaid patients to submit their redetermination paperwork by the due date indicated on their forms to maintain their Medicaid benefits.</p>	<p>You can find your patient's renewal dates in two ways:</p> <ol style="list-style-type: none"> 1. <u>MEDI</u> 2. <u>Meridian Provider Portal</u> 	<p>Don't lose your Meridian Medicaid! Complete and submit your renewal paperwork by the due date listed on your form to keep your coverage.</p>

Redetermination Action Plan

- **Find** your Meridian patients' renewal dates using the Meridian Provider Portal or MEDI
- **Share** the Meridian patient renewal list with your lead and front office staff who have direct contact with patients
- **Flag** patient redetermination dates in your billing and registration systems
- **Connect** Medicaid patients to the HFS ABE website
- **Post** Medicaid renewal information in your office

HFS does not allow MCOs to assist with completing the redetermination paperwork. Meridian will assist Medicaid recipients with enrolling in Manage My Case. Manage My Case allows individuals to receive their redetermination information electronically.



Perform outreach to patients with upcoming renewal dates through:

- Phone calls
- Texts
- Emails
- Mailings
- Secure Provider Portal

The Meridian Secure Provider Portal

Check member eligibility using our easy-to-use secure provider portal

Log in to check

- From the homepage, use the *Quick Eligibility Check for Medicaid* tool
- Click on the *Eligibility* or *Patients* icons in the top navigation bar

Look for the green thumbs-up icon for eligibility

- Primary Care Providers (PCPs) can view their *Patient List*
- The *Overview* screen highlights individual members

Product TIN(s) Plan Type Option(s) New Functionalities

meridian Manage Practice Eligibility Patients Authorizations Claims

Viewing Dashboard For: TIN [] Plan Type IL Medicaid GO

Quick Eligibility Check for Medicaid

Member ID or Last Name: 123456789 or Smith Birthdate: mm/dd/yyyy Check Eligibility

Recent Claims

STATUS	RECEIVED DATE	MEMBER NAME	CLAIM NO.
✓	04/16/2022	[REDACTED]	U106
✓	04/16/2022	[REDACTED]	U106
✓	04/16/2022	[REDACTED]	U106
✓	04/16/2022	[REDACTED]	U106
✗	04/19/2022	[REDACTED]	U109

Welcome

Add a TIN to My ACCOUNT

Manage Accounts

Reports

Patient Analytics

Provider Analytics

Recent Activity

Date Activity

Quick Links

Viewing Patients For: TIN [1799] Plan Type Medicaid GO

Patient List as of 07/31/2020

This is only a list of your patients, please check eligibility to confirm the effective date and benefits.

Eligible	Preferred Language ↑	Member Name ↑	Member ID ↑
👍		[REDACTED]	[REDACTED]

2,146 items found, displaying 1 to 10. Page 1/215 1 2 3 4 5 6 7 8 Next Last

meridian Manage Practice Eligibility Patients Authorizations Claims Rodney Cook

Viewing Patients For: TIN [] Plan Type IL Medicaid GO Find Patient

Back to Patient List

Overview

Cost Sharing

Assessments

Growth Chart

Health Record

Care Plan

Authorizations

Referrals

Coordination of Benefits

Claims

Document Resource Center

Notes

Special Needs

Overview

👍 This patient is eligible as of today, Feb 16, 2023

Print Eligibility Overview

Patient Information

PCP Information

Name [REDACTED] Name [REDACTED]

Gender F Address [REDACTED]

Birthdate Aug 31, 1987 Address [REDACTED]

Age 45 years old Practice Type Pediatrics

Member # [REDACTED] View PCP History

Address [REDACTED]

Eligibility History

Start Date End Date Product Name

Sep 1, 2022 Ongoing Medicaid Expansion

Care Gaps

None On File

Allergies

The Meridian Secure Provider Portal

Access redetermination member lists *monthly* using our easy-to-use secure provider portal

- **Step 1:** Click on “Patients” on the top navigation
- **Step 2:** Download your patient list and sort by the “Redetermination Date”

The screenshot displays the Meridian Secure Provider Portal interface. At the top, the Meridian logo is on the left, and navigation tabs for 'Eligibility', 'Patients', 'Authorizations', and 'Claims' are on the right. Below the navigation, there are search filters for 'Viewing Patients For : TIN' and 'Plan Type' (set to 'IL Medicaid'), with a 'GO' button and a 'Find Patient' button. The main content area shows a 'Patient List as of 03/14/2023' with a 'Download' button and a 'Filter' button. Below this, a message states 'Only first 1500 records will be displayed. Use filters to view specific records.' and 'This is only a list of your patients, please check eligibility to confirm the effective date and benefits for this member.' A table of patient records is shown, with columns for 'Eligible', 'Preferred Language', 'Member Name', 'Member ID', 'Member #', 'Date of Birth', 'Phone Number', 'ALERTS', and 'Redetermination Date'. The table contains 8 rows of data, each with a green thumbs-up icon in the 'Eligible' column and a 'No HRA' alert in the 'ALERTS' column. The 'Redetermination Date' column shows dates ranging from 07/01/2023 to 11/01/2023.

Eligible	Preferred Language	Member Name	Member ID	Member #	Date of Birth	Phone Number	ALERTS	Redetermination Date
👍	OTHER	AMICA, JESSIE	1511488	1000004781	08/10/1988	(872) 214-2278	No HRA	11/01/2023
👍	OTHER	AMICA, DANIELA	1704488	1000004781	08/10/1988	(773) 946-3485	No HRA	04/01/2023
👍	OTHER	AMICA, JESSIE	2100423	1000004781	08/10/1988	(872) 214-2278	No HRA	11/01/2023
👍	OTHER	AMICA, DANIELA	2100787	1000004781	08/10/1988	(773) 946-3485	No HRA	04/01/2023
👍	OTHER	AMICA, DANIELA	3400072	1000004781	08/10/1988	(312) 466-8855	No HRA	09/01/2023
👍	OTHER	AMICA, JESSIE	1000001	1000004781	08/10/1988	(773) 946-3485	No HRA	11/01/2023
👍	OTHER	AMICA, DANIELA	1000000	1000004781	08/10/1988	(773) 946-3485	No HRA	07/01/2023
👍	OTHER	AMICA, DANIELA	3400078	1000004781	10/11/1988	(773) 946-3485	No HRA	07/01/2023

Using MEDI to Find Renewal Dates

Visit <https://medi.hfs.illinois.gov/> to login into your account

- On the left side of your screen, select **Eligibility Inquiry**
- Search for your patient either by using their Recipient Number or First and Last Name, DOB and Zip Code

HFS ILLINOIS DEPARTMENT OF Healthcare and Family Services

Recipient Eligibility Verification System

Eligibility Inquiry Home IEC Links

Eligibility Results

Retain Inquiry New Inquiry Print Everything

<u>Transaction Audit Number:</u> 123456789	<u>Recipient Name:</u> JOHN DOE
<u>Recipient Number:</u> 12345689	<u>Recipient SSN:</u>
<u>Recipient Date of Birth:</u> 01/18/2021	<u>Recipient Sex:</u> M
<u>Provider Number:</u> 11345678	<u>Provider Name:</u> J H STROGER HOSP OF COOK CTY
<u>County Code:</u>	<u>Case Name:</u> JOHANNAH DOES
<u>Case Address:</u> 1234 W POLK ST APT1	<u>City - State - Zip:</u> CHICAGO, IL 60624
<u>Begin Date:</u> 04/19/2022	<u>End Date:</u> 04/19/2022
<u>NPI Number:</u>	<u>Renewal Due Date:</u> *** 05/01/2022 ***
	<u>Renewal Form:</u> B

Coverage Detail Expand Hide

For the date(s) of service entered, the client is eligible for medical benefits.

Case Type: ALL KIDS, MEDICAID ELIGIBLE, FULL COVERAGE

Begin Date	End Date	Case Id	System Date
04/19/2022	04/19/2022	123456789	01/25/2021

Service Type(s): OCCUPATIONAL THERAPY - SPEECH THERAPY - SKILLED NURSING CARE - SUBSTANCE ABUSE - VISION (OPTOMETRY) - PSYCHOTHERAPY - PSYCHIATRIC-INPATIENT - PSYCHIATRIC-OUTPATIENT - CARDIAC REHABILITATION - PEDIATRIC - MENTAL HEALTH - URGENT CARE - MEDICAL CARE - DURABLE MEDICAL EQUIPMENT PURCHASE - AMBULATORY SERVICE CENTER FACILITY - DURABLE MEDICAL EQUIPMENT RENTAL - SURGICAL - SECOND SURGICAL OPINION

Redetermination date is "renewal due date"
 Type of renewal form is noted

Four Ways Patients Can Complete Renewal Paperwork



1. Online

Visit [ABE.Illinois.gov](https://abe.illinois.gov) and click on Manage My Case



2. Phone

Call the DHS Call Center at 1-800-843-6154/
1-866-324-5553 (TTY)



3. Mail

Return envelope included or fax to:
Central Scanning Office
P.O. Box 19138
Springfield, IL 62763
Fax: 1-844-736-3563



4. In Person

Visit a Department of Human Services (DHS) office.
Visit <https://www.dhs.state.il.us/> for a list of Family Community Resource Centers (FCRC).

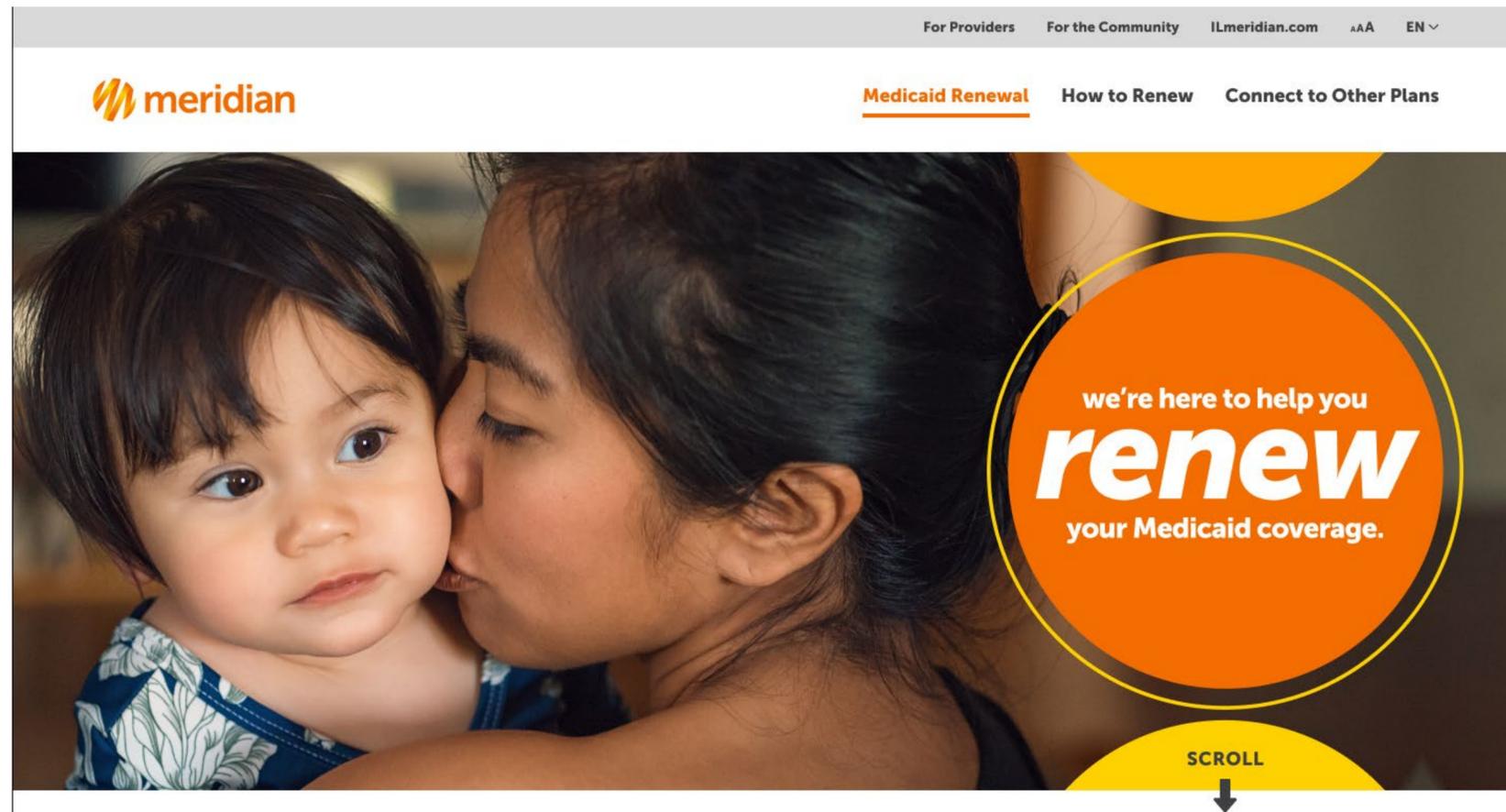
If your patients need help accessing their ABE Manage My Case account or have other questions, call HFS at 800-843-6154.

What Meridian is Doing

Meridian is Meeting Members Where They Are

Microsite

The central online hub for all Meridian redetermination communications channels.



Other channels

Smart Video

Provides real time personalized information to members.



Static Video

A step-by-step guide to complete redetermination.



Text/SMS

Texts will reach members at critical redetermination times.

Emails

Gives an overview of the redetermination process.

Mailer

Members will get a direct mailer close to their redetermination date.

Paid Social

Facebook and Instagram social platforms will drive awareness.

Paid Search

Google ads will drive awareness to Meridian members searching for redetermination info.

Display

Display banners on high traffic areas of external websites, will encourage members to complete the redetermination process.

Display Out of Home (DOOH)

Digital ads will appear in 5k+ locations, like pharmacies, subway stations, taxis, and healthcare facilities. QR codes will lead to the microsite.

Member Portal

The portal will display Medicaid renewal messages.

Univision Contigo exclusive partnership with Meridian

Our partnership will broaden DE&I efforts to underserved Chicagoland Hispanic communities.

Building Awareness for Redetermination

Community Engagement Activities

- Partner with community-based organizations to host HFS Medicaid eligibility presentations
- Leverage Key Influencers to Educate Members: Partner with state general assembly members and local elected officials in high-membership areas to share informational materials
- Build Education and Awareness at Events: Provide approved redetermination materials at events
 - Meridian staff will wear redetermination T-shirts and buttons
- Partner with Providers and Provider Organizations: Work with key stakeholders, such as the Illinois Health and Hospital Association to offer education and awareness



Provider Relations Outreach & Education

- 1) Meridian's redetermination microsite is the main hub for all redetermination information
- 2) The Meridian Provider Relations team will educate high-volume PCPs first, including all tier 1 and tier 2 providers
- 3) FQHCs will be prioritized due their impact on Medicaid populations
- 4) Provider Relations will also:
 - Distribute the Medicaid eligibility and redetermination slide deck
 - Work with PCP associations to present the deck
 - Add as a standing agenda item on all monthly provider meetings
 - Educate providers on how and where members can update their information
 - Host monthly provider orientations that include redetermination updates and timelines

Appendix

Resources

Resources

Contact Meridian or ABE if:

- You or a patient are not clear about the renewal process and need additional help.
- A patient is unsure of when their renewal date is or if they are Form A or B.
- A patient wants to update their address or phone number with Meridian and the Medicaid office.
- A patient never received or lost their renewal paperwork from the state.



**To speak to a Meridian provider representative,
please call or email:**

866-606-3700 (TTY: 711)

ProviderHelp.IL@mhplan.com

Monday through Friday, 8 a.m. to 5 p.m.

**For questions regarding Medicaid applications &
redetermination please call or visit the ABE website:**

800-843-6154

<https://abe.illinois.gov/>- Application for Benefits Eligibility
(ABE) - apply for Medicaid, SNAP, and TANF

ABE's Manage My Case

Assisting Members with Manage My Case

Manage My Case (MMC) is one of the easiest ways for Medicaid patients to submit redeterminations



MMC allows Medicaid patients to:

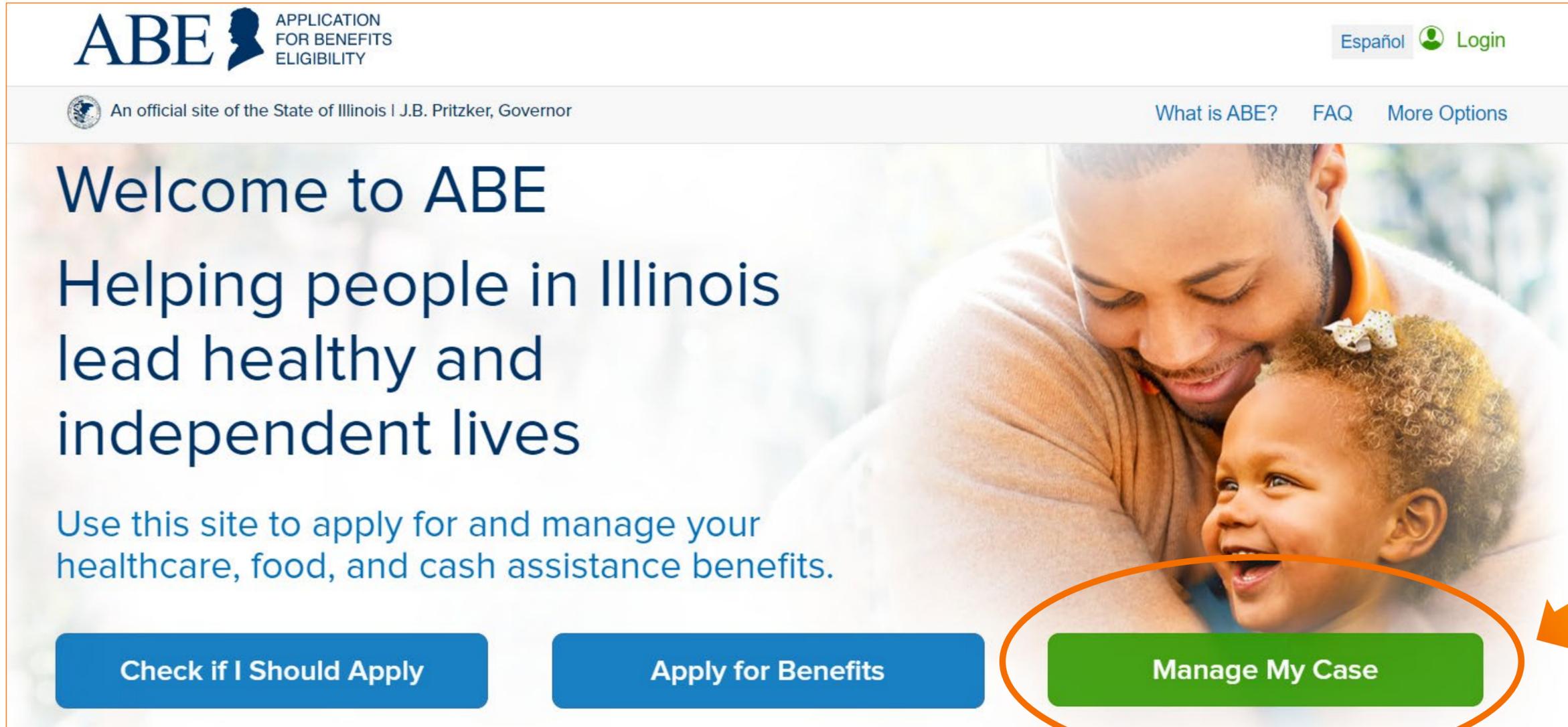
- Make fewer visits to their local DHS office
- Stay informed on the status of their benefits and manage their case information

Help patients set up their MMC accounts so they can:

- Check the status of an application
- Renew benefits
- Report changes – income, household members, expenses or new address
- Upload documents
- View notices
- View and reschedule upcoming appointments
- File and manage appeals

NEW! Members can use Manage My Case to request text messaging about appointments and important due dates about benefits.

How to Set up Manage My Case (MMC)



The screenshot shows the ABE website homepage. At the top left is the ABE logo with the text 'APPLICATION FOR BENEFITS ELIGIBILITY'. To the right are links for 'Español' and 'Login'. Below the logo is the text 'An official site of the State of Illinois | J.B. Pritzker, Governor'. On the right side of the header are links for 'What is ABE?', 'FAQ', and 'More Options'. The main content area features a large image of a man hugging a young girl. Overlaid on the left side of the image is the text: 'Welcome to ABE', 'Helping people in Illinois lead healthy and independent lives', and 'Use this site to apply for and manage your healthcare, food, and cash assistance benefits.' At the bottom of the page are three buttons: 'Check if I Should Apply', 'Apply for Benefits', and 'Manage My Case'. The 'Manage My Case' button is highlighted with an orange oval and an orange arrow pointing to it from a text box on the right.

Step 1

Go to:

<https://abe.illinois.gov>

And click on Manage My Case

How to Set up Manage My Case (MMC)

ABE APPLICATION FOR BENEFITS ELIGIBILITY

Help | Print

Español

| Am I Eligible? | Apply For Benefits | Manage My Case | Appeals |

WARNING! THIS SYSTEM CONTAINS U.S GOVERNMENT INFORMATION. BY USING THIS INFORMATION SYSTEM, YOU ARE CONSENTING TO SYSTEM MONITORING FOR LAW ENFORCEMENT AND OTHER PURPOSES. UNAUTHORIZED OR IMPROPER USE OF, OR ACCESS TO, THIS COMPUTER SYSTEM MAY SUBJECT YOU TO STATE AND FEDERAL CRIMINAL PROSECUTION AND PENALTIES AS WELL AS CIVIL PENALTIES. AT ANY TIME, THE GOVERNMENT MAY INTERCEPT, SEARCH, AND SEIZE ANY COMMUNICATION OR DATA TRANSITING OR STORED ON THIS INFORMATION SYSTEM. YOU MAY HAVE ACCESS TO OR SEE CONFIDENTIAL OR PROPRIETARY INFORMATION OR DATA (ALL HEREINAFTER REFERRED TO AS "CONFIDENTIAL INFORMATION"), SUCH AS NATIONAL DIRECTORY OF NEW HIRE INFORMATION, PROTECTED HEALTH INFORMATION (HIPAA) OR PERSONALLY IDENTIFIABLE INFORMATION. AUTHORIZED USE OF THE ABE CLIENT LOGIN IS FOR CUSTOMER APPLICATION AND CASE INFORMATION AND MANAGEMENT. BY CLICKING LOGIN YOU UNDERSTAND AND AGREE THAT ALL SUCH CONFIDENTIAL INFORMATION OR DATA MAY NOT BE RELEASED, COPIED OR DISCLOSED, IN WHOLE OR IN PART, UNLESS PROPERLY AUTHORIZED BY ILLINOIS DEPARTMENT OF HUMAN SERVICES (IDHS)/ ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES (IHFS).

* User ID

* Password

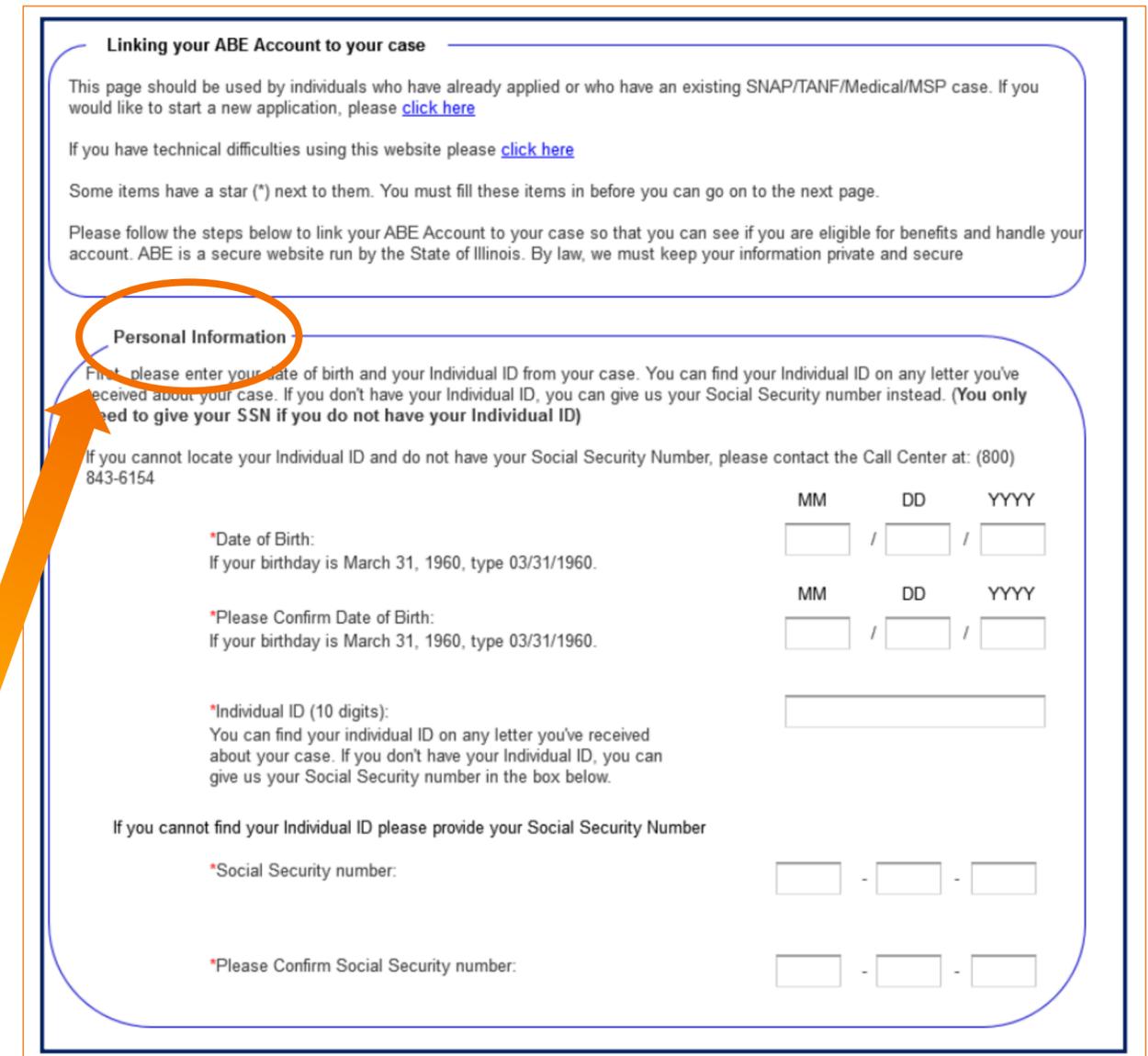
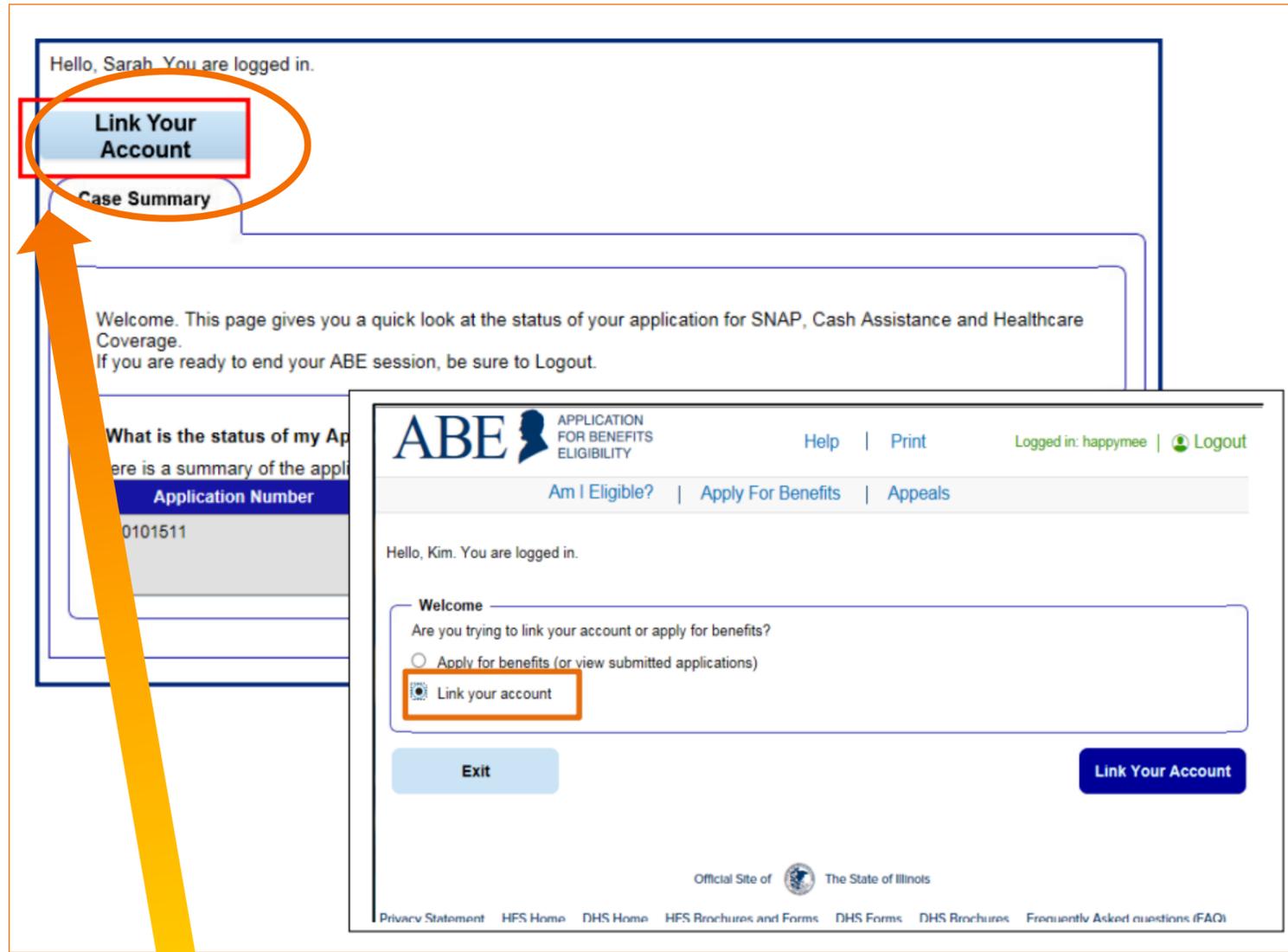
Login

[Reset Password](#)

[Create a new ABE User Id and Password](#)

Step 2
Enter ABE User ID and Password.
If the patient does not have an ABE account, click
“Create an ABE account” to register.

How to Set up Manage My Case (MMC)



Step 3

After logging in, select "Link your account"

Enter date of birth, social security number or individual ID number

How to Set up Manage My Case (MMC)

Step 4

Link the case to the patient's ABE account and will be asked to answer a few questions to confirm their identity.

If successful, the patient will be able to go right into MMC.



**APPLICATION
FOR BENEFITS
ELIGIBILITY**

Help | Print

Logged in: happy1540 | [Logout](#)

Verify Your Identity

To protect you from identity theft, and to confirm your identity, please answer these questions. If the correct answer isn't here, choose "None of the above". When you are done, click "Next".

1. Which of the following streets have you lived on?
 - Sunnyside Rd.
 - Main St.
 - Michigan Ave.
 - Grand Ave.
 - None of the above
2. Which of the following phone numbers have you been associated with?
 - 217-555-1212
 - 312-000-1234
 - 773-555-0000
 - 872-111-0000
 - None of the above
3. What street number have you lived at?
 - 111
 - 34786
 - 14177
 - 300
 - None of the above
4. What is your mother's maiden name?
 - Smith
 - Johnson
 - Williams
 - Brown
 - None of the above
5. What county do you currently live in?
 - Cook
 - Adams
 - Sangamon
 - DuPage
 - None of the above

[Next](#)

Manage My Case Steps Overview

How to Set up Manage My Case (MMC)	
Medicaid enrollees need the following to set-up MMC	<ol style="list-style-type: none"> 1. Social Security Number 2. Established Credit History
Step 1	Go to http://ABE.Illinois.gov
Step 2	Click on the Green “Manage My Case” button. Enter ABE User ID and Password. If the patient does not have an ABE account, click “Create an ABE account” to register.
Step 3	After logging in, select “Link your account”. Enter date of birth, social security number or individual ID number.
Step 4	When you link the case to the patient’s ABE Account, they will be asked to answer a few questions to confirm their identity. If successful, the patient will be able to go right into MMC

For step-by-step instructions on how to use ABE’s Manage My Case click [here](#).





Questions?

Contact your assigned Provider Relations representative, or call 866-606-3700 (TTY: 711) Monday through Friday, 8 a.m. to 5 p.m.





Thank you!

