We lost Medicaid coverage. Now what?



During the COVID-19 pandemic, children and families with Medicaid could keep their coverage without having a review to see if they were still eligible. Now that the public health emergency is over, most people who have Medicaid need to go through redetermination, the process to see if you are still eligible for Medicaid.

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Millions of families have lost their Medicaid coverage in the Medicaid redetermination process, which puts children at risk of having gaps in their medical care. It's important to understand the redetermination process and what to do if you no longer qualify for Medicaid.

Why did we lose our Medicaid coverage?

You can lose Medicaid for a few different reasons:

- Filing paperwork incorrectly or missing renewal notices in the mail is the main reason families lose Medicaid coverage.
- Your family's income may be too high now to qualify for Medicaid. However, there are different income eligibility levels for adults and kids, so your child may still be eligible even if you aren't.

Medicaid redetermination

is the process your state uses to see if you still qualify for Medicaid coverage. Everyone with Medicaid is now required to go through redetermination. Medicaid redetermination is also called **Medicaid unwinding** and **Medicaid renewal**.

 Your child may have aged out of the Medicaid program. In most states, children are no longer eligible for Medicaid once they turn 19.

Where should I go for more information and help with the redetermination process?

The following resources can provide assistance to you and your family:

- Family-to-Family Health Information Centers (F2Fs) (national)
- Insure Kids Now (national)
- The Health Insurance Marketplace: Find Local Help (national)
- CMS Health Insurance Navigator program (in 29 states)









What options do we have?

- Request that your coverage be reinstated. If you lose Medicaid coverage and you think it was a mistake, you can ask for your coverage to be reinstated. You usually have 90 days from the date postmarked on the letter from your state Medicaid agency to send all the information they need to decide if your coverage should be reinstated.
- **File an appeal.** Everyone has a right to appeal a Medicaid decision. Each state decides how much time a person has to ask for an appeal. If your family misses the deadline to appeal, you might be able to ask for more time with an extension.

Check your state's Medicaid website for information. You can ask for an appeal online, in person, or by mail. Be sure to keep track of the date you ask for the appeal.

If your child has complex medical needs - including children on Medicaid waivers - their health may be in danger with a long appeal process. You can ask for an appeal hearing that happens sooner. This is called an expedited hearing.

The appeals process can be complicated, but you can get help (see information about finding help on the other side of this sheet).

- Reapply for Medicaid. If you have lost coverage, you can reapply for Medicaid at any time. Help is available if you need it (see information about finding help on the other side of this sheet).
- Enroll in a low-cost health insurance plan. You may qualify for a high-quality, low-cost plan through the Health Insurance Marketplace®. Visit www.healthcare.gov to get coverage that begins the first of next month. Your child can stay on your Marketplace coverage until age 26.

Can my child get coverage through the Children's Health Insurance Program (CHIP)?

CHIP provides low-cost health coverage to children in families with incomes too high to qualify for Medicaid and who are otherwise uninsured. Some states combine Medicaid and CHIP into a single program. In other states, CHIP is a separate program. If your child no longer qualifies for Medicaid, make sure to ask your Medicaid agency if CHIP is an alternative. More information on CHIP can be found at Insure Kids Now.

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