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How to get, use, and keep MO HealthNet

Kate King, CHW, CAC
Spectrum Health Care

Agenda

- About MO HealthNet
- MO HealthNet eligibility requirements
- MO HealthNet costs
- How to apply for MO HealthNet
- Your MO HealthNet coverage
- MO HealthNet renewal
- If you lose your coverage

What is MO HealthNet?

- MO HealthNet is Missouri's Medicaid program.
- It is a joint federal and state healthcare program for:
 - Some individuals, families, and children with low incomes
 - Pregnant people
 - Older adults
 - People who are blind or disabled
- A new MO Medicaid Expansion program started in October 2021.

What is the Medicaid Expansion program?

- It allows more people to be able to get MO HealthNet.
- Now, people aged 19 to 64 with higher incomes may be covered.
- This program is also called Adult Expansion Group, or AEG.
- You can apply for MO HealthNet anytime. There is no open enrollment period.

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MO HealthNet eligibility requirements

10/24/2024

Do I qualify for MO HealthNet?

- You may qualify now, even if you didn't qualify before Medicaid expansion
 - You may qualify if you aren't a parent or currently working
- You can get MO HealthNet if:
 - You are aged 19 – 64
 - Your income meets the requirement to qualify
 - The income requirement is based on the Federal Poverty Level. This is an income number chosen by the U.S. government each year. Medicaid expanded to include people who make up to 138% of the Federal Poverty Level. See the income table on the next slide.

Do I meet the income requirement?

- This table shows you the highest income you can have and still qualify for MO HealthNet.
- It also depends on how many people are in your household.
- These numbers change each year.

Your household size	Your household 2024 income (before taxes)
1 person	\$1,732 a month or \$20,784 a year
2 people	\$2,350 a month or \$28,200 a year
3 people	\$2,970 a month or \$36,640 a year
4 people	\$3,588 a month or \$43,056 a year
5 people	\$4,206 a month or \$50,472 a year

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MO HealthNet costs

10/24/2024

How much will a MO HealthNet plan cost?

- If you are covered, you will **not** have to pay:
 - Any premiums, co-payments, co-insurance, or deductibles for most health care services, such as:
 - Seeing your doctor
 - Getting lab work or x-rays done
 - Going to the hospital
 - Prescriptions

Health care services covered by MO HealthNet

- Primary care
- Inpatient and outpatient hospital services
- Emergency care
- Preventive and wellness services
- Family planning
- Prescription drugs
- Behavioral health care
- Lab work and x-rays
- Eye exams
- Dental care
- Medical devices and therapies
- Rides to healthcare visits (non-emergency medical transportation, also called NEMT)

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How to apply for MO HealthNet

10/24/2024

11

What do I need when I apply?

You will need:

1. Your legal name and date of birth
2. Your Social Security number (or proof that you've applied for one)
3. A mailing address
 - If you don't have one, use a friend, family member, or community organization's address
4. Proof of your income
 - Use your most recent paystubs
 - If you're self-employed, use last year's tax return

Where do I apply?

You can apply:

- **Online** at mydss.mo.gov/healthcare/apply
- By **calling** the Family Support Division (FSD) at 855-373-9994
- By **mail** or **fax**:
 - Download, print & complete the application from mydss.mo.gov/healthcare/apply
 - Then mail to
 - Family Support Division, P.O. Box 2700
Jefferson City, MO 65102
 - Or fax to 573-526-9400
- **In person** at an FSD Resource Center
 - You can find one near you at dss.mo.gov/dss_map

What if I need help applying?

You can:

- Get free help from a Certified Application Counselor (CAC) at Spectrum Health Care
 - Call **573-242-5636**
- Get free help from a Cover Missouri assister
 - Find an assister near you at covermissouri.org/find-local-help

How long does it take to hear back?

- By federal law, most MO HealthNet applications should be reviewed within 45 days. It may take between 60-100 days.
- How to make it quicker:
 1. Apply online at mydss.mo.gov/healthcare/apply
 2. Make sure your application is complete. It can take longer if anything is missing.
 3. Only apply once. Submitting multiple applications will slow down the process
- After your application is processed, the MO Dept of Social Services (MDSS) will **mail a letter** to the address on your application.

What if I get a letter asking for more information?

- Follow the instructions in the letter.
- You will need to submit the requested information within the time frame specified in the letter.
- You can submit documents either:
 - **Online** at mydssupload.mo.gov/UploadPortal
 - Or **in person** at a FSD Resource Center
 - Visit dss.mo.gov/dss_map to find an office near you

If you are approved:

- You will receive in the mail notification from the MO Department of Social Services that includes:
 - Your MO HealthNet ID card
 - Information about your coverage plan, the start date of your benefits, and how to use your MO HealthNet ID card
- Follow the instructions in this letter to start your coverage.

If you are denied:

- You will get a letter saying you are not eligible for MO HealthNet because you:
 - Are over the income limit
 - Or don't meet other requirements
- Call the Missouri Legal Aid office in your area (see next slide)
 - They can help you appeal MDSS's decision for free.
 - There is a deadline for the appeal process, so contact them as soon as possible.

Missouri Legal Aid offices

- For Western Missouri:
 - lawmo.org
 - 816-474-6750 or 1-866-897-0947
- For Eastern Missouri:
 - lsem.org
 - 314-534-4200 or 1-800-444-0514
- For Mid-Missouri:
 - mmls.org
 - 573-442-0116 or 1-800-735-2966
- For Southern Missouri:
 - sosm.org
 - 417-881-1397 or 1-800-444-4863



Can I check the status of my application?

- You can check online:
 1. Go to mydss.mo.gov
 2. Click “Check your status”
 3. Enter your information
 4. If it says, “No information available,” your application hasn’t been approved or processed yet.
 5. If it says “Active coverage” with a start date, you’re approved!
- Or by phone:
 - Call the MO Family Support Division (FSD) at (855) 373-4636

What if I'm approved but didn't get a letter?

- If you didn't get a notification letter from the MO Department of Social Services, or if you lost it or your MO HealthNet ID card:
 - Call the Family Support Division helpline at **855-373-4636**.
- Ask the helpline to check if they have the right mailing address. You may not have gotten a packet because the address was wrong.

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Your MO HealthNet coverage

10/24/2024

22

Your health plan

- Once you're approved, you'll be assigned to 1 of 3 managed care plans from either:
 - Healthy Blue
 - United Healthcare, or
 - Home State
- Your plan will mail you a welcome packet that includes your plan's ID card.
- If you don't get a welcome packet in the mail, or if you lost it:
 - **Call 800-348-6627** (the MO HealthNet Managed Care Enrollment Helpline)
 - Ask the helpline to check if they have the right mailing address. You may not have gotten a packet because the address was wrong.

What is included in my plan?

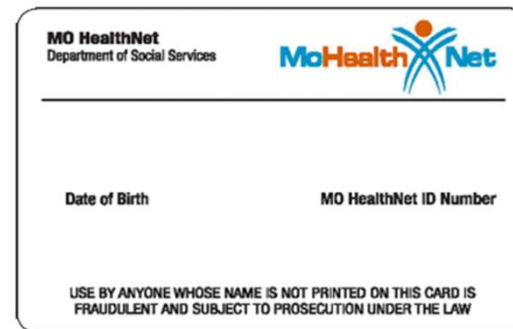
- You have coverage for:
 - Prescription drugs
 - Doctor visits
 - Specialists
 - Hospital care
 - Mental health treatment
 - And more

Your ID cards

- You will have 2 ID cards:
 - A MO HealthNet ID card
 - A card from your assigned health plan
- Your MO HealthNet ID number is also called your “DCN”.
- Make sure all the information on your cards are correct!

10/24/2024

MO HealthNet card:



MO HealthNet
Department of Social Services

MoHealthNet

Date of Birth _____ MO HealthNet ID Number _____

USE BY ANYONE WHOSE NAME IS NOT PRINTED ON THIS CARD IS
FRAUDULENT AND SUBJECT TO PROSECUTION UNDER THE LAW

Health plan cards:

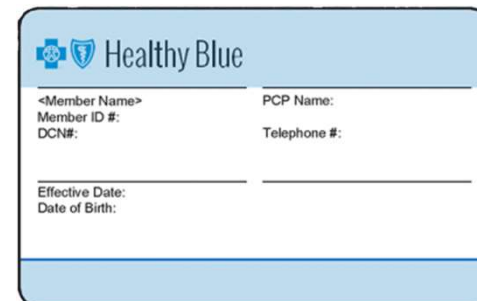


home state health.

Name: _____
MO HealthNet ID #: _____
PCP Name: _____
PCP Address : _____
PCP Phone #: _____

If you have an emergency, call 911 or go to the nearest emergency room (ER). You do not have to contact Home State for an okay before you get emergency services. If you are not sure whether you need to go to the ER, call your PCP or NurseWise at 1-855-694-4663 (TDD/TTY 1-877-250-6113, Relay 711).

HSHP1504 | Approved: March 25, 2015



Healthy Blue

<Member Name> _____ PCP Name: _____
Member ID #: _____ Member ID #: _____
DCN#: _____ Telephone #: _____

Effective Date: _____
Date of Birth: _____



UnitedHealthcare | Community Plan
Health Plan (80840) 911-86050-02

Member ID: 001600012 Group Number: MOHNET

Member: REISSUE M ENGLISH Payer ID: 86050
DCN #: 99999912
PCP Name: DOUGLAS GETWELL
PCP Phone: (717) 851-6816

S1803 MT ROSE AVE STE B3
YORK, MO 174033051

0501 UnitedHealthcare Community Plan of Missouri
Administered by UnitedHealthcare of the Midwest, Inc.

25

Your Primary Care Provider (PCP)

- Your health plan will assign you a Primary Care Provider (PCP). Their name will be on your health plan's ID card.
- You can change your PCP, but you must tell your health plan who you want to change it to.
- What is a PCP?
 - The doctor or health care provider you see when you need medical care
 - They will get to know you and track your health history.
 - They will refer you to other services when you need them.

Who can be my PCP?

- Your PCP can be:
 - A doctor or nurse practitioner in
 - Family or general practice
 - Pediatrics
 - Internal medicine
 - OBGYN
 - A clinic or federally qualified health center

How can I change my assigned PCP?

- First, find one that's in your health plan:
 - Ask your current doctor or clinic if they accept your health plan.
 - You can also ask your health plan for a list of PCPs near you.
- Then, contact your health plan to notify them that you want to change your assigned PCP to the one you have chosen.

What if I already have a PCP or specialists I like?

- Call or check online to see if they are in your health plan:
 - Home State Health
 - 855-694-4663
 - findaprovider.homestatehealth.com/location
 - Healthy Blue
 - 833-388-1407
 - findcare.anthem.com/search-providers
 - United HealthCare Community Plan
 - 866-292-0359
 - connect.werally.com/plans/uhc

What if my PCP or specialists are not in my health plan?

- You can either:
 - Choose a new provider who is in your current health plan's network, or
 - Change your health plan to one that your provider is in.

How do I change my health plan?

- You can switch plans if your doctors don't accept your plan.
- There are 3 ways to change your health plan:
 - **Online** at memberportal.mymohealthportal.com/security/login
 - **Call** 800-348-6627
 - Monday through Friday from 7 AM to 6 PM
 - **Mail** your signed health plan change form and Health Risk Assessment from your assignment packet in the pre-paid envelope to:

MO HealthNet Division
PO Box 771082
St. Louis, MO 63177-1082

How can I learn more about my health plan?

To learn more, you can:

- Visit My MO Health portal
 - mymohealthportal.com
- Read your plan's "Member Handbook"
 - You can find it at mydss.mo.gov/contact-health-plan

What if I need help with my health plan?

- The Missouri Legal Aid programs have Advocates for Family Health that can help you:
 - Understand your rights and benefits under your health plan.
 - Find out why your health plan refuses to give you medically necessary services, medicines, or equipment.
 - Solve problems a nurse, primary care provider, or your health plan can't help you with.
- See slide 19 for how to contact your area's Missouri Legal Aid program.

What if my situation changes?

- It is important to report the following changes to FSD within **10** days of when they happen:
 - Changes in address, phone number, or email address
 - Changes in your household:
 - Someone is pregnant
 - Someone has a baby
 - Someone moved into or out of the household
 - Changes in income or employment, like losing a job, getting a raise, or getting a new job
 - Or getting health insurance benefits from an employer

How do I report changes to FSD?

- Visit mydss.mo.gov and click on “Report a Change”
- Call FSD at 855-373-4636
- Go to an FSD Resource Center
 - Visit dss.mo.gov/dss_map to find an office near you

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MO HealthNet annual renewal

10/24/2024

36

What is annual renewal?

Each year MO HealthNet will do a review to see if you are still eligible for coverage.

- FSD uses information from state databases to conduct this review.
- If FSD has enough information to confirm your eligibility, you will receive a letter stating that your coverage has been renewed, and there is nothing else you need to do.
- To learn more about annual renewal, visit mydss.mo.gov/renew.

What is annual renewal? continued

If FSD needs more information, you will be mailed an Annual Renewal form that you must fill out, sign and return by the due date.

- There are 4 ways to return this form:
 - Online: FSD Benefit Portal at my.mo.gov/fsdbenefits.
 - Mail your completed renewal form, and any requested documents, to the address shown on your letter.
 - Visit your local FSD Resource Center to complete your renewal form with help from a FSD team member.
 - Call the FSD Info Center at **855-373-4636** and choose option **4**.

What do I need to do for renewal?

1. Keep your contact information up to date

- This way MO HealthNet can contact you to renew your coverage.
- Update your information if you move, change your phone number or email address, or have a change in circumstances.
- To update your contact information, you can:
 - Visit mydss.mo.gov and click on “Report a Change”
 - Call FSD at 855-373-4636
 - Go to an FSD Resource Center
 - Visit dss.mo.gov/dss_map to find an office near you

What do I need to do for renewal?

2. Always open and read mail from MO HealthNet

- They will send you a notice when it is time to renew.
- They may ask you to fill out a renewal form.

3. Fill out and return the renewal form

- If you get a renewal form, fill it out, sign it, and send it back right away.
- Include all the information and documents the form asks for.
- Even if you no longer qualify, your child(ren) may still qualify for MO HealthNet or CHIP. Always fill out and send the form so they can check if anyone in your family qualifies for coverage.

What do I need to do for renewal?

2. Always open and read mail from MO HealthNet

- They will send you a notice when it is time to renew.
- They may ask you to fill out a renewal form.

3. Fill out and return the renewal form

- If you get a renewal form, fill it out, sign it, and send it back right away.
- Include all the information and documents the form asks for.
- Even if you no longer qualify, your child(ren) may still qualify for MO HealthNet or CHIP. Always fill out and send the form so they can check if anyone in your family qualifies for coverage.

What do I need to do for renewal?

4. Watch for follow-up info

- FSD will contact you after they review your information.
- They will tell you if your coverage is renewed or if you no longer qualify and when your coverage will end.

What is an Adverse Action Notice?

- This notice means that FSD determined that you are no longer eligible for MO HealthNet, and your coverage will not be renewed.
- FSD must sent out this notice at least 10 days before your coverage ends.
- You will have **90 days** from the date on the notice to appeal the action and request a hearing with FSD.

Appealing the Adverse Action Notice

- **If you don't appeal:**
 - You may lose coverage or have unpaid medical bills.
- **If you do appeal:**
 - Your coverage will continue while you wait for the results of the hearing.
 - You will not have to pay back health care coverage you get while waiting for the results. This happens even if FSD still decides after the hearing to end your coverage.

What if I need help with an Adverse Action Notice?

- FSD may have made a mistake, Missouri's Legal Aid program can help you check if FSD is correctly ending your coverage.
 - Call the Legal Aid program in your area for this free service.
- The Missouri's Legal Aid program's Advocates for Family Health can help you:
 - Make a grievance or need help filing
 - Appeal a decision by your health plan
 - Request a State Fair Hearing

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If you lose your coverage

10/24/2024

46

What can I do if I lose my coverage?

- You can get healthcare through other options, such as:
 - The Health Insurance Marketplace
 - You can sign up for a Marketplace plan during a “Special Enrollment Period,” even outside of open enrollment (usually November 1 to January 15).
 - An employer-sponsored plan through work
 - If you have a job, ask your employer about their health plan. Employers are required to give you an SEP of at least 60 days if you have lost your MO HealthNet coverage.

How do I get a Marketplace plan?

- To get a Marketplace plan:
 1. Go to healthcare.gov
 2. Start a new application or update your current one
 3. Pick a new plan
- You have up to 60 days before your MO HealthNet coverage ends.
- Get new coverage right away, so you don't have a gap.
 - For example: If your MO HealthNet ends on May 16, sign up for a new plan in April to avoid a gap in coverage.
- If you need help, you can find a trained assister near you at covermissouri.org/find-local-help

Any questions?

Contact me:

Kate King CHW CAC

Program Manager at Spectrum Health Care

kking@spectrumhealthcare.org

573-242-5636 or

573-514-7312

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