

FAQs on Returning to Normal Medicaid Operations

Q: What is the return to Normal Medicaid Operations?

Since March 2020, states/counties were prohibited from terminating Medicaid eligibility unless the Medicaid recipient moved out of state, died or requested to be disenrolled. Continuous coverage exemptions will expire March 31, 2023.

Ohio will resume normal Medicaid eligibility and enrollment operations on April 1. This means that the Montgomery County Family Assistance Division will begin conducting full eligibility redeterminations, including disenrolling individuals who no longer meet eligibility criteria.

Q: When does it start?

Ohio will resume normal Medicaid eligibility and enrollment operations April 1, 2023. That's when the Family Assistance Division will begin conducting full eligibility redeterminations, including disenrolling individuals who no longer meet eligibility criteria. Terminations for individuals who are no longer eligible will begin April 1, 2023, with coverage ending April 30, 2023, at the earliest. The Federal government has provided 14 months for eligibility reviews.

Q: What should I do?

If you don't already have one, you are strongly encouraged to create an Ohio Benefits Self-Service Portal (SSP) account at ssp.benefits.ohio.gov. This is the most convenient way for Medicaid members to complete a renewal or report any changes to your information. Through your SSP account, you can also easily check the status of benefits.

Members with an existing Ohio Benefits Self-Service Portal (SSP) account can report changes online at benefits.ohio.gov. After logging in, you should click the "Access my Benefits" tile, then click "Report a Change to my Case" from the drop down and follow the prompts.

Montgomery County has created [an online guide](#) and has links to [how to videos](#) to help you navigate the SSP.

Q: How do I keep my contact information up to date?

Keep your contact information up to date via the Self Service Portal at ssp.benefits.ohio.gov or by calling the Ohio Medicaid Consumer Hotline **1-844-640-6446**. Help is available Monday through Friday 8 a.m. to 4 p.m. ET or in person at the Job Center at 1111 Edwin C. Moses Blvd., Dayton, OH 45422

Q: What should I be looking for over the next year when my renewal is due?

Customers should check your mail and respond to the renewal letter or requests for information immediately.

Q: What can I do if I am not found to be eligible for Medicaid?

If the adults in your household no longer qualify for Medicaid, your children may still be eligible for coverage under the [Children's Health Insurance Program \(CHIP\)](#).

If you are notified that you no longer qualify for Medicaid, **you may be able to buy low-cost health coverage through the federally facilitated Marketplace at healthcare.gov**. Losing Medicaid or CHIP coverage is a Qualifying Life Event (QLE), which allows you to enroll in a Marketplace plan outside of the Open Enrollment Period.

The [Centers for Medicare and Medicaid Services also announced](#) a Marketplace Special Enrollment Period (SEP) for qualified individuals and their families impacted by this federal change. Marketplace-eligible consumers who submit a new application or update an existing application between March 31, 2023, and July 31, 2024, **and** attest to a last date of Medicaid or CHIP coverage within the same time period, are eligible for an Unwinding SEP. Consumers who are eligible for the Unwinding SEP will have 60 days after they submit their application to select a Marketplace plan with coverage that starts the first day of the month after they select a plan.

If you need help understanding your options, trained, licensed insurance **navigators are available at no cost to you**. Contact Get Covered Ohio for free, unbiased assistance. **Go to getcoveredohio.org or call 1-833-628-4467**. Insurance navigators can help in person, online or over the phone.