

Frequently Asked Questions

What is an annual renewal?

An annual renewal is a process the Family Support Division is federally required to complete that checks to see if a participant is still eligible for MO HealthNet (Missouri Medicaid) each year. Prior to 2020, the Family Support Division would send MO HealthNet participants an annual renewal form in the mail around the same time every year to be completed and sent back.

Why haven't annual renewals been required the last 3 years?

At the beginning of the COVID-19 pandemic in 2020, the federal government declared a public health emergency that put a freeze on ending Medicaid coverage for participants, unless a participant became incarcerated, deceased, or moved out of state. This meant that Missouri was required to continue Medicaid coverage for participants, even if their eligibility changed, so a renewal was not required.

Why are annual renewals restarting in April if the federal public health emergency is still in place?

Recent legislation signed by the federal government set a specific date to resume Medicaid eligibility renewals, despite the ongoing federal public health emergency. This means that Medicaid renewals are no longer tied to the public health emergency and will begin again on April 1, 2023.

Will everyone be required to complete an annual renewal in April?

No. Annual renewals will restart in April, but not everyone will be required to complete their annual renewal the same month. Typically, your annual renewal will be required around the anniversary of when your coverage began. For example, if you were approved for Medicaid in June, your annual renewal may be around that time. For more information about when to expect your annual renewal, check out the **annual renewal timeline**.

I qualify for Adult Expansion coverage. Do I have to complete an annual renewal?

Yes. All MO HealthNet participants are currently required to complete the annual renewal process each year. This process will be new if you just recently qualified for MO HealthNet through Adult Expansion coverage.

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What can I do right now?

The most important thing you can do at this time is make sure the Family Support Division has your current address on file. The Family Support Division will be sending important notices to you by mail, so it is vital we have your correct address. Once you get a notice it will include next steps, if any, you will need to complete and a deadline you will need to complete them by.

If your address has changed recently, you can report this change online, in person at your **local resource center**, or by phone at **855-373-4636**.

What happens if I do not return my form on time?

If you do not return your annual renewal by the date listed on the form, please return it as soon as you remember and call the FSD Information Line at **855-373-4636** or start a chat with us at **mydss.mo.gov** to let us know you have submitted your form so we can update your case file.

What happens if I lose my annual renewal form?

If you lose your annual renewal form that was mailed to you, immediately call the FSD Information Line at **855-373-4636** or start a chat with us at **mydss.mo.gov** to request a new form be mailed to you. As soon as you get that new form in the mail, complete it and return it to us so we can process your information.

How do I complete my annual renewal?

The Family Support Division will first attempt to renew your MO HealthNet coverage using the information available to them. If our team can verify your eligibility for MO HealthNet with this information, you will simply get a letter in the mail notifying you that your renewal is complete and whether or not you are still approved for coverage.

If the Family Support Division does not have enough information to verify your eligibility automatically, you will need to complete an annual renewal form and/or provide additional **verification documents**. This form will be mailed to you, along with a letter with specific instructions and a deadline. You will have the option to return this form in one of the following ways:

- **In-Person:** Return the form to the **local FSD Resource Center**
- **Mail:** Send the completed form and any documents to the address shown on the letter
- **Online:** Upload the form online by visiting: **myDSSupload.mo.gov**
- **By Phone:** Call the FSD Information Center at **855-373-4636**



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NOTE: FSD is currently in the process of launching an online customer portal that will allow Medicaid participants to view their annual renewal month, submit their pre-populated form online, and more. The portal is being released in phases and will have more functions available in each phase roll-out. This state plan will be updated as more information becomes available.

When will I know if I am approved for coverage?

After the Family Support Division gets the information they need (as long as it is fully complete and all of the required documents are there) it will take us approximately 30 days to process your renewal. Once complete, we will send you a letter in the mail with our decision. There are three possible decisions, which include:

- **No change:** We have checked your information and you are still eligible for MO HealthNet coverage. Nothing will change, and there is nothing more you need to do.
- **Change in coverage:** We have checked your information and you are still eligible for MO HealthNet, but we have determined that a different type of coverage is a better fit for you. Your letter will let you know what type of MO HealthNet coverage you now have and will provide instructions if there is anything further you need to do.
- **Adverse Action:** We have checked your information and have determined that you no longer qualify for healthcare coverage through MO HealthNet. If you disagree with this decision you will need to take action by the date listed in your letter.

What happens if I am no longer eligible for MO HealthNet?

If you are no longer eligible to get MO HealthNet coverage and disagree with the decision, you have the right to a hearing. Follow the directions on your adverse action letter to petition for a hearing.

If you no longer meet the eligibility requirements to get healthcare coverage through MO HealthNet, we encourage you to visit healthcare.gov or call the Federal Health Insurance Marketplace call center at **1-800-318-2596** (TTY: 1-855-889-4325) to see what other options may be available to you.

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Will you automatically check to see if I qualify for Adult Expansion coverage?

Yes. The Family Support Division will check to see if you qualify for any type of MO HealthNet coverage, including Adult Expansion. If you now qualify for Adult Expansion Coverage, you will get a letter in the mail notifying you of this change in coverage and what steps, if any, you need to take next.

Will people lose MO HealthNet coverage during the renewal process?

It is important to us that everyone who is eligible still be able to get healthcare coverage through MO HealthNet. With that said, since the Family Support Division has not been required to check eligibility in 3 years, there may be some participants who are no longer eligible and will lose their coverage through the annual renewal process.

Why did my MO HealthNet coverage change after my annual renewal?

If your coverage has changed, this means we have checked your information and you are still eligible for MO HealthNet, but we have determined that a different type of coverage is a better fit for you. Your letter will let you know what type of MO HealthNet coverage you now have and will provide instructions if there is anything further you need to do.

I didn't get an annual renewal notice in April. Does this mean I do not have to do one?

No. Every MO HealthNet participant will get a letter from the Family Support Division at some point between April 2023 and April 2024. Make sure we have your current mailing address on file by reporting a change **online** at **mydss.mo.gov**, visiting your local resource center, or calling us at **855-373-4636**.