

STATE OF IOWA DEPARTMENT OF
Health AND **Human**
SERVICES

Continuous Coverage Unwind Toolkit
IOWA MEDICAID
2023

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Overview: The End of the Continuous Coverage Requirement

What does the end of continuous coverage requirement mean?

On December 29, 2022, the Consolidated Appropriations Act of 2023 was signed and will end the Medicaid program's continuous coverage requirement as of April 1, 2023. This means that beginning April 1, Iowa Medicaid will no longer be required to maintain member's health coverage if they are found to be ineligible after an evaluation of their eligibility status.

From March 2020, through April 1, 2023, Iowa Medicaid was required to maintain continuous health care coverage for members. This meant that if a member's situation changed (e.g., financially) in a way that would normally disqualify them from the program, Iowa Medicaid was required to maintain coverage for the person during the federal public health emergency (PHE).

What does the end of continuous coverage requirements mean for members?

Right now, nearly one-third of Iowans are receiving Medicaid. When the continuous coverage requirement ends on April 1, 2023, Iowa Medicaid members must go through an eligibility renewal process to determine if they are still eligible for Medicaid programs.

It is important that Medicaid members ensure their contact information is up to date, watch for mail from Iowa Medicaid, and respond to requests for information. If members do not respond to renewal letters or requests for information, they run the risk of losing their Medicaid coverage.

What is the difference between the PHE Unwind Plan and the Continuous Coverage Unwind Plan?

The Continuous Coverage Unwind Plan, also referred to as simply the Unwind Plan, marks the end of the continuous coverage requirement **only**. This means starting April 1, members who have kept their Medicaid coverage throughout the PHE regardless of circumstance can once again lose their Medicaid coverage if they are found to be ineligible. However, the other requirements put in place during the PHE, such as telehealth and HCBS flexibilities, will not end until the federal government announces the end of the PHE.

The most recent PHE extension goes into April, but it could be extended beyond April as well. Once the PHE officially ends, Iowa Medicaid will begin unwinding other program flexibilities.

TIMELINE

Phase	Objective	Estimated Begin
Green Phase	Updating member information to have the correct address, phone, and email contacts to reach members with important updates about their health coverage.	Prior to January 1, 2023
Blue Phase	Preparing members and stakeholders for the Iowa Medicaid unwinding period. This includes explaining changes that will occur to resume normal Medicaid operations, timelines for these changes, and how that might impact them.	January 1, 2023 – April 1, 2023
Red Phase	Helping members successfully fulfill their renewal requirements to ensure that their annual Medicaid eligibility renewal is completed accurately. This will help to prevent members from losing their Medicaid eligibility for procedural reasons.	After April 1, 2023: Once the member receives their renewal packet in the mail
Yellow Phase	Specifically for individuals that were disenrolled from Medicaid based on their annual renewal, this phase will focus on providing information, resources, and processes on obtaining alternative health coverage after disenrollment.	After April 1, 2023: If a member receives notice that they are no longer eligible for Medicaid.

***Note:** Phases Blue, Red, and Yellow all occur during Iowa’s full 12-month unwinding period but are different for each member based on their scheduled renewal month.

How to Use This Toolkit

This toolkit was created for the Iowa Medicaid audience as a guide to the Continuous Coverage Unwind Plan. The toolkit has important information to help the Medicaid audience navigate Iowa Medicaid's return-to-normal operations. Additionally, the toolkit has resources for Medicaid stakeholders and partners to assist members with the return-to-normal operations. Stakeholders will find this information valuable as it will help ensure their constituents do not have a gap in healthcare coverage.

See below for a list of relevant materials provided in this toolkit. All materials are subject to change as the Unwind Plan evolves.

Go Green information for members: This section guides members through how to sign up for electronic information and notifications from Iowa Medicaid, rather than having physical forms sent to them. You can also sign up for Unwind Plan email notifications on our [website](#).

Web Articles: These short articles focus on the overall Continuous Coverage Unwind Plan and are available to post on online platforms such as e-newsletters and websites, and to print and send to constituents and patients.

Newsletter Posts: Short posts to include in your organization's newsletter or to send out to constituents via other digital means.

Social Media Topics: Topics and social media posts to include on you or your organization's social media platforms.

Print-out flyers: Printable flyers to post in your business location or a bulletin board, distribute or use as a handout when referencing the Unwind Plan. Find the JPG, PNG and PDF files on our [website](#).

Important links: Important links to online resources including Iowa Medicaid social media, the Unwind Plan webpage, public notices and informational letters (ILs), e-newsletter sign-up and contact information.

Contacts: Important contacts to know while you, your family or your clients or constituents navigate the Unwind Plan.

UNWIND EMAIL NOTIFICATION SIGN UP

Members, Providers, Stakeholders and Partners

To ensure Iowa Medicaid members, providers, stakeholders and partners stay up to date with resources posted on the unwind webpages and get critical information about unwind updates quickly, Iowa Medicaid has created a unwind email sign up list that will send these important updates straight to the person's email inbox.

If you are interested in receiving these notifications, please sign up [here](#).

PRINT OUT FLYERS

Download and print Iowa Medicaid's unwind flyers or post them on your webpages or social media. Download them on the HHS website.

Web Articles

OVERVIEW

This section contains short unwind updates to share on your website. These articles primarily focus on the changing landscape of the continuous coverage unwind plan and how it could affect Medicaid members.

Note: Please do not release these articles/letters until the release date mentioned above each letter.

GREEN PHASE

Prior to January 1, 2023

**There are no formal articles that need to be shared during the Green Phase of the unwind. Prior to the end of the continuous coverage requirement, messaging should be simple and easy to understand. See the newsletter posts and key messaging sections for language that you can use during the Green Phase.

BLUE PHASE

Date of Release: After January 1, 2023

Important changes coming for Iowa Medicaid members

On December 29, 2022, the Consolidated Appropriations Act of 2023 was signed into law. The law ends the Medicaid program's continuous coverage requirement as of April 1, 2023. This means that beginning April 1, Iowa Medicaid will no longer be required to maintain member's health coverage if they are found to be ineligible after an evaluation of their eligibility status.

From March 2020, through April 1, 2023, the federal government required Iowa Medicaid to maintain continuous health care coverage for members. This meant that if a member's situation changed (e.g., financially) in a way that would normally disqualify them from the program, Iowa Medicaid was required to maintain coverage for the person during the federal public health emergency (PHE).

Iowa Medicaid can complete some renewals without contacting the member by accessing electronic databases. However, many renewals will require members to respond to mail from Medicaid, including renewal forms or requests for information.

RED PHASE

Date of Release: April 1, 2023

Iowa Medicaid Members – Be on the Look Out for Renewal Information

With the end of this continuous coverage requirement, all Medicaid members are required to go through an eligibility determination renewal to see if they still qualify for Medicaid services.

Members need to stay diligent and be on the lookout for information requests and renewal communications in the mail from the Department of Health and Human Services (Iowa HHS) and/or Iowa Medicaid. Any failure to respond to information from HHS could result in loss of health care coverage.

For more information on the end of the continuous coverage requirement, visit our [website](#), sign up for [email notifications](#) and monthly newsletters, and follow Iowa Medicaid on [Facebook](#) and [Twitter](#).

YELLOW PHASE

Date of Release: After member redetermination

Members Discontinued from Medicaid Health Coverage are Offered Resources to Find New Healthcare Coverage

Iowa Medicaid estimates that during the federal Public Health Emergency, enrollment has grown by nearly 200,000 due to the continuous coverage requirement. The following resources can help those members who no longer qualify for Medicaid or Hawki to secure other healthcare coverage:

- **Contact a navigator agency.** Navigators provide in-person insurance enrollment assistance to individuals, families and small businesses and their employees that would like help applying for health insurance through the Healthcare Marketplace. You can find navigator agencies by searching your state name and “navigator” online.
- **SHIIP (Senior Health Insurance Information Program):** This is a free, objective, and confidential service offered through the state of Iowa to help people sort through confusing information about Medicare and health insurance. Their trained, certified volunteer counselors assist thousands of Iowans annually, helping them save millions of dollars.
- Local SHIIP volunteer counselors can answer your questions and give you one-on-one help. For an appointment with a counselor, call your local SHIIP sponsor website.
[Find a SHIIP counselor near you](#)
- **Search Marketplace Coverage:** You can obtain local, marketplace-certified help by visiting the following website: [Get help applying and more | HealthCare.gov](#).

Newsletter Posts

GREEN PHASE

Medicaid Members Encouraged to Update their Contact Information with Iowa Medicaid and their MCO

On December 29, 2022, President Biden signed the Consolidated Appropriations Act of 2023, ending the Medicaid program's continuous coverage requirement as of April 1, 2023. This means that beginning April 1, Iowa Medicaid will no longer be required to maintain member's health coverage if they are found to be ineligible after an evaluation of their eligibility status.

Iowa Medicaid is actively working on tools and guidance for members, providers and stakeholders concerning the end of the continuous coverage requirement. Follow us on Facebook and Twitter and check your mail - both physical and digital - for updates and where to find the most recent information and guidance.

When the federal PHE continuous coverage requirement ends, many programs and premiums will start returning to normal Medicaid processes. Don't be left behind concerning your healthcare!

To update your information with Iowa Medicaid, please call 1-877-347-5678.

BLUE PHASE

Iowa Medicaid's Continuous Coverage Requirement is Ending and What it Means for Members

The continuous health coverage for Iowa Medicaid members established during the federal Public Health Emergency will end on April 1, 2023. This means most members who are enrolled in Iowa Medicaid will undergo a full redetermination to see if they are still eligible for Medicaid. It is important for members to check their mail regularly and respond to requests for information to make sure they don't lose coverage unnecessarily.

To learn more about the Unwind Plan, visit <http://hhs.iowa.gov/ime/unwind>.

If you have questions about when your eligibility renewal will happen, you can call 1-855-889-7985.

If you need to report a change or update your address, please call 1-877-347-5678.

RED PHASE

Don't Forget to Send in Your Medicaid Renewal!

Now that the continuous coverage requirement has ended, the federal government is requiring that all Medicaid members have a renewal to redetermine their eligibility. Renewals to redetermine Medicaid eligibility for members will occur over the next 12 months.

Members, be on the lookout for physical mailings from Iowa Medicaid/Iowa HHS requesting information or notices about renewing your Medicaid coverage. Don't delay in responding to our requests for information as it could lead to a lapse in your healthcare coverage. Check your mailbox, sign up for our email notifications [here](#), make a member portal account [here](#) and update your member information with Iowa Medicaid and your MCO if you haven't already.

YELLOW PHASE

No Longer Eligible for Medicaid? Here are the Resources Available to You.

With the end of the continuous coverage requirement, Iowa Medicaid is returning to normal eligibility operations. This includes resuming discontinuances of coverage for members who are found ineligible after completing their renewal. If you have completed your Medicaid renewal and you were informed that you are no longer eligible for Medicaid or Hawki coverage, there are other healthcare resources available for you and your family.

To help those members who no longer qualify for Medicaid or Hawki coverage after the end of the continuous coverage requirement, the following resources can help you obtain other types of healthcare:

- **Contact a Navigator Agency**
Navigators provide in-person insurance enrollment assistance to individuals, families and small businesses and their employees that would like help applying for health insurance through the Healthcare Marketplace. You can find navigator agencies by searching your state name and "navigator" online.
- **SHIIP (Senior Health Insurance Information Program)**
This is a free, objective, and confidential service offered through the state of Iowa to help people sort through confusing information about Medicare and health insurance. Local SHIIP volunteer counselors can answer your questions and give you one-on-one help. For an appointment with a counselor call your local SHIIP sponsor site. [Find a SHIIP counselor near you.](#)
- **Search Marketplace Coverage**
You can get local, Marketplace-certified help by visiting the following website: [Get help applying and more | HealthCare.gov.](#)

Social Media Topics

Below are key messages for your organization’s social media platforms, to keep members, providers, stakeholders and partners informed of what is happening during the duration of the continuous coverage unwind.

Green Phase	
Update your contact information.	
Post 1	<p>We need your address updates! Update your contact information with your MCO to ensure you don’t miss anything concerning your health care.</p> <p>Most members receiving Medicaid services are assigned to a managed care plan. Your Managed Care Organization (MCO) is responsible for ensuring access to Medicaid services through their provider networks. Currently, @IowaTotalCare and @Amerigroup are Iowa Medicaid’s two working MCOs. It is important that your MCO is notified of your current address, phone number and email address so you do not miss out on important information regarding your health care coverage.</p> <p>If you are not assigned to an MCO, you are a part of our fee-for-service population. Please call Member Services to update your information.</p>
Post 2	<p>Go digital with your MCO for easier access to your healthcare. Your MCO is moving towards making correspondence simpler for you. Learn more at:</p> <ul style="list-style-type: none"> • Iowa Total Care • Amerigroup
Post 3	<p>Follow your MCO on social media. Did you know that many important updates from your MCO can be accessed quickly through social platforms like Facebook and Twitter? If you ask us, that’s worth a follow!</p>
Post 4	<p>Check your mail. @IowaHHS mails renewal forms and requests for information letters when it is time to renew your Medicaid or Hawki case. Your MCO also mails reminder letters to members when it is time to renew. Watch your mailbox for mail from HHS, Iowa Total Care or Amerigroup to not miss out on this important information.</p>
Post 5	<p>Respond to requests for information. If you get a message telling you it’s time to renew, to update your contact information, or any other call to action, be sure to respond. Iowa HHS needs to hear from you to make sure you do not lose your Medicaid or Hawki coverage.</p>

Reporting changes in contact information to Iowa Medicaid.	
Post 6	<p>Any time your information changes, let the Iowa Department of Health and Human Services (HHS) know. This includes any changes your household has, but especially updating your mailing address and phone number.</p> <ul style="list-style-type: none"> You can report your household changes by calling 877-347-5678 or emailing IMCustomerSC@dhs.state.ia.us. Assistance is available Monday through Friday, 7 a.m. to 6 p.m.
Post 7	<p>Follow Iowa Medicaid on social media. Many important updates about the Medicaid program can be found on their social media pages.</p>
Post 8	<p>Check your mail. Medicaid often mails letters to members when it is time to renew or when Medicaid needs information from you to continue your healthcare coverage. Watch your mailbox for mail from the Department of Health and Human Services or Iowa Medicaid to not miss out on this important information.</p>
Post 9	<p>Respond to requests for information in a timely manner. If you get a message telling you it's time to renew, to update your contact information, provide additional information, or any other call to action, be sure to respond. The Iowa Department of Health and Human Services needs to hear from you to make sure you do not lose your Medicaid coverage.</p>
Blue Phase	
Medicaid's continuous coverage is ending. Here's what you need to know and how to prepare.	
Post 1	<p>Keep an eye out for mail from Iowa HHS. Beginning April 1, 2023, Iowa Medicaid must complete a review of eligibility for members. This eligibility review will take place over the next 12-months and will not happen at the same time for all members. When it is time for your eligibility review, a renewal form may be sent to you in the mail. Keep an eye out for Medicaid communication via mailings, social media and the webpage for updates and note the deadlines to send in renewal forms.</p>
Post 2	<p>Apply for a waiver program, if eligible. If you believe you're eligible for a Medicaid waiver, fill out the appropriate forms and send them in to Iowa Medicaid for review.</p>
Post 3	<p>Start your research. If you believe you may be found ineligible for Iowa Medicaid after the end of your redetermination, begin researching other affordable healthcare options in the healthcare marketplace and note the open enrollment dates.</p>
Post 4	<p>Check your mail and respond to requests for information. Any information requested from HHS, Iowa Medicaid or your MCO should be responded to promptly to avoid any healthcare loss or delays.</p>
Red Phase	
It's time to renew. Who needs to renew and what you need to know.	
Post 1	<p>Renew your Medicaid health insurance now. Most current Medicaid members need to fill out the renewal form mailed to you, even if you think that you may be ineligible.</p>
Post 2	<p>Need help with your Medicaid/Hawki renewal? Contact Member Services at 800-338-8366. Agents can help you walk through your renewal and direct you to the correct resources depending on when your renewal is due.</p>
Post 3	<p>Check your mail and Medicaid notifications. If you are found ineligible for Iowa Medicaid, research other affordable healthcare options in the healthcare marketplace and note the open enrollment dates.</p>

Yellow Phase

If you are found ineligible for Iowa Medicaid, here's what you need to transition to another healthcare plan.

Post 1	<p>Have you recently lost your Medicaid or Hawki coverage and need help finding other available healthcare options?</p> <ul style="list-style-type: none">• SHIIP (Senior Health Insurance Information Program) This is a free, objective, and confidential service offered through the state of Iowa to help people sort through confusing information about Medicare and health insurance. Their trained, certified volunteer counselors assist thousands of Iowans annually, helping them save millions of dollars.• Local SHIIP volunteer counselors can answer your questions and give you one-on-one help. For an appointment with a counselor call your local SHIIP sponsor site. Find a SHIIP counselor near you• Help with Marketplace Coverage You can get local, Marketplace-certified help by visiting the following website: Get help applying and more HealthCare.gov
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Resource Links

Use the below links as resources to you, your families, your clients and your constituents.

Resource	Description
Unwind Plan Homepage	The main unwind webpage with a high-level overview of the end of the continuous coverage requirement and several member resources.
Unwind Updates	A page that contains recent unwind updates, important releases from CMS and other notable updates.
Unwind Resource Library	A resource page with links to unwind tools, guidance, flyers, FAQs, necessary services and more.
Unwind Contact	A contact form for unwind-related questions not answered by the FAQs.
<ul style="list-style-type: none"> • About Iowa Medicaid • Medicaid Application (Paper) • Waiver Application* (See note) 	<ul style="list-style-type: none"> • Medicaid Application: A downloadable application for Medicaid services you can print out, complete and send into your local HHS office. • *Waiver Application: The HHS waiver application is within the Medicaid application, beginning in Appendix A of the application.
Other healthcare resources <ul style="list-style-type: none"> • SHIIP • Marketplace Directory 	<ul style="list-style-type: none"> • SHIIP: A Medicare resource. • Marketplace Directory: An online marketplace to look for available healthcare options.
Unwind Dashboard	A live dashboard on the HHS website that visually shows data throughout the unwind process, including medical assistance enrollments, medical assistance applications, medical assistance renewals and the unwinding workload.
Public Notices	Notices to the public on important events and announcements.
Informational Letters	Informational letters for providers on Medicaid programs, policies and procedures.
Iowa Medicaid e-Newsletters & Sign-Up	Iowa Medicaid e-newsletters are sent out monthly and cover topics and relay information for all Medicaid audiences, including members, providers, stakeholders and managed care plans (MCPs).
Sign-Up for Unwind Notifications	Sign-up for high priority releases about the unwind and notices when new resources are published to the unwind webpages.
Monthly Town Halls	Sign-up, find resources and join Iowa Medicaid's monthly virtual town halls for providers and members.
Iowa Medicaid Social Media <ul style="list-style-type: none"> • Facebook • Twitter 	Follow Iowa Medicaid on social media for current news, events and information.
HealthCare Marketplace	Find other affordable health insurance plans if you are discontinued from Medicaid.

Questions?

If you have questions regarding the Unwind Plan or the contents in this toolkit, please contact:

MEMBER SERVICES

Member Services can assist Medicaid members with their questions about their healthcare during the unwind. They can also assist with helping apply for Medicaid services.

Phone: 1-800-338-8366 (toll free) or 515-256-4606 (Des Moines)

Email: IMEmemberservices@dhs.state.ia.us

HAWKI MEMBER SERVICES

Hawki Member Services can help the guardians of Hawki members with their questions about their child's healthcare during the unwind. They can also assist with helping apply for Hawki services.

Phone: 1-800-257-8563

Email: hawki@dhs.state.ia.us

PROVIDER SERVICES

Provider Services can assist Medicaid providers of all types with their questions the unwind and how it impacts their members and themselves. Provider Services can also help with a provider applying for Medicaid licensure.

Phone: 1-800-338-7909 (toll free) or 515-256-4609 (Des Moines)

Email: imeproviderenrollment@dhs.state.ia.us

HHS CONTACT CENTER

The HHS contact center is available for those who offer HHS services beyond healthcare. This includes, but is not limited to, food programs, cash assistance, mental health services and rental assistance.

Phone: 1-855-889-7985

INCOME MAINTENANCE CUSTOMER SERVICE CENTER (IMCSC)

Medicaid members may call the IMCSC to report a change in information (address, phone, email, etc.) for their Medicaid case.

Phone: 1-877-347-5678

Email: IMCustomerSC@dhs.state.ia.us

COMMUNICATIONS

If you are a member of the media, please contact the [Iowa HHS Public Information Officer](#).

Click **here** if you are a member of the public with a general question about the Unwind Plan.

Follow Us on Social Media!



IOWA MEDICAID FACEBOOK: @IAMEDICAID



IOWA MEDICAID TWITTER: @IAMEDICAID





Iowa Medicaid

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