

Legal rights for Medicaid and CHIP participants

How Missouri assisters can help participants during annual renewals

On April 1, 2023, the Family Support Division (FSD) resumed annual renewals of eligibility for all MO HealthNet (Medicaid) participants, including those in Medicaid Managed Care health plans and the Children's Health Insurance Program (CHIP).

You can help make participants aware that they have certain rights, especially if their annual renewal results in an adverse (unfavorable) action from FSD.

What legal rights should Medicaid and CHIP participants know about?

3 of the most important rights during annual renewals are:

- Right to receive notice if FSD reduces or terminates coverage
- Right to appeal an adverse action
- Right to know the reason for an adverse action

What are adverse actions during annual renewals?

FSD may take these **adverse actions** during annual renewals:

- Reducing coverage
- Terminating (ending) coverage

How do participants know if their coverage is being reduced or terminated?

If a participant's annual renewal results in reducing or terminating coverage, FSD will send them an Adverse Action Notice in the mail:

- FSD will mail the notice at least 10 days before taking action to reduce or terminate coverage.
- Participants will have 90 days from the date on the notice to appeal the action and request a hearing with FSD. The notice will have instructions on how to appeal, including to request a "State Fair Hearing" using the phone number or mailing address listed on the Adverse Action Notice.

How can I help participants know their rights?

If a participant gets an Adverse Action Notice from FSD about their Medicaid coverage, **do not assume** FSD is right or that the participant should just re-apply for Medicaid! Instead:

- **Help them:**
 - Review their Adverse Action Notice for instructions and the deadline to appeal (let FSD know they disagree with the action)
 - Understand the reason for the action and that they can choose to appeal (some notices will not include a specific reason for the action)
 - Help them submit any missing information that could allow them to sustain coverage. In some cases where the only reason for the adverse action being sent out is missing information (annual renewal form, pay stubs, citizenship status, etc.) assisters can help the participant fix the issue without filing an appeal.

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- **Let them know that:**
 - If they don't appeal, they may lose coverage or have unpaid medical bills.
 - If they appeal, their coverage will continue while waiting for (or "pending") the results of the hearing - they will not have to pay back coverage they receive while the hearing is pending, even if the hearing upholds FSD's action to reduce or terminate their coverage.

- **Call the Legal Aid in your area to ask for free help:**
 - someone may be able to review the issue and possibly help with an appeal.

How can Legal Aid help?

Attorneys and legal advocates can help participants with these issues:

- Check if FSD is correctly reducing or terminating coverage or approved the correct amount or type of coverage.
- Find out why the MO HealthNet Division or a MO HealthNet Managed Care Organization refuses to provide medically necessary services, medication, or equipment.
- Help when FSD accuses a participant of fraud.

Contact information for Legal Aid Programs in Missouri

- Legal Aid of Western Missouri: 816-474-6750 or 1-866-897-0947
- Legal Services of Eastern Missouri: 314-534-4200 or 1-800-444-0514
- Mid-Missouri Legal Services: 573-442-0116 or 1-800-735-2966
- Legal Services of Southern Missouri: 417-881-1397 or 1-800-444-4683

Legal Aid Programs in Missouri



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