1. How do the coming changes to benefits affect individuals and families?

The changes a person or family might experience depend on the programs in which they participate. Each program has its own eligibility requirements. And each person or family has their own unique circumstances that can make a difference in their eligibility.

ODHS and OHA have three goals as benefits begin to change:

- Ensuring all people and families receive all the benefits they are eligible for without interruption. Many people will continue to qualify for their current benefits.
- Providing those who may see a reduction or loss of benefits clear direction and connection to other resources where possible.
- Give those who assist people receiving benefits clear information about how they can support people experiencing benefit changes.
Individuals and families will be notified if their benefits are changing and informed about what to do to keep their benefits.

If you are an OHP member:

During the federal COVID-19 Public Health Emergency (PHE), most OHP members were able to keep their OHP regardless of changes. Beginning April 1, 2023, we will start reviewing the eligibility of all OHP members. We call this “Renewing Your OHP.”

To keep your OHP, please respond to us if we ask you for more information. Not everyone will be asked for more information. You may lose your OHP if you no longer qualify, but if you have Medicare, you may qualify for MSP benefits that help with those Medicare costs. If your OHP will end, you will get a notice in the mail at least 60 days before your OHP expires. Read more about renewing your OHP.

Please note that notice letters to encourage members to update their contact information were mailed to OHP members between October and November 2022.

- View sample OHP letter

If you did not receive a letter in mail, it means that we don’t have your latest contact information. To keep your OHP, you may need to provide your most up-to-date information. If your contact information has changed or is changing, be sure to update the agency. Visit this webpage or see below to learn more about ways to update your contact information.

If you turned 65 during the pandemic, you may need to transition from OHP to Medicare:

If this change applies to you, you will see changes in coverage and out-of-pocket costs.

You may need to pay a penalty if you did not enroll in Medicare when first eligible, by turning 65, and may have a waiting period for coverage. Ensuring that there is no interruption in coverage will protect people from penalties as a result of this gap. Please enroll as soon as you are eligible.

For more information on how to sign up for Medicare, click here.

Visit the Senior Health Insurance Benefit Assistance (SHIBA) program if you have questions or need help related to Medicare.
If you are a Medicare Savings Program (MSP) member:

Medicare Savings Program members will also be reviewed for eligibility beginning April 1. Please respond to us when we ask you for more information. If you don't respond, your benefits may close, even if you are still eligible.

- View sample MSP letter

If you receive services and supports for people with disabilities and older adults:

Medicaid pays the long-term care costs for eligible individuals. Services and supports for people with disabilities and older adults are provided based on the individual’s needs and choice. Support can be provided in a person’s home or in a care setting.

- Anyone who no longer meets financial eligibility for services and supports for people with disabilities and older adults could lose coverage as well as the payment for other supports they receive. The other supports may include their housing if they are living in a licensed care setting. You will receive a separate notice if any of these services are ending. This notice will include next steps and resources.
- There is no equivalent benefit, state Basic Health Program, or other payer source available for services and supports for people with disabilities and older adults.
- People who remain financially eligible for services and supports will keep their medical coverage as long as they are eligible based on their assessed need for services and supports for people with disabilities and older adults.

If you receive SNAP food benefits:

SNAP recipients will continue getting their regular SNAP benefits that are issued between the 1st and 9th day of each month.

During the federal COVID-19 Public Health Emergency, people have received extra food benefits. The following benefits will end or phase out:

- SNAP Emergency Allotments: People have received SNAP Emergency Allotments every month since April 2020. SNAP recipients will stop receiving SNAP Emergency Allotments after February 2023. Starting March 1, 2023, people will return to receiving their regular monthly SNAP benefit amounts between the 1st and 9th of each month. People can get more information online.
• **Pandemic EBT and Summer PEBT:** These food benefits have been issued periodically for children whose access to adequate and quality food may have been impacted by COVID-19. Oregon will issue retroactive Summer PEBT benefits for 2022 for the last time in mid-March 2023. People can get more information online at [PEBT.Oregon.Gov](http://PEBT.Oregon.Gov).

During the COVID-19 PHE, some SNAP rules were changed. These rules will change again when the COVID-19 PHE ends:

• **Able-bodied Adults Without Dependents (ABAWD) work requirements:** Work requirements will resume for SNAP recipients who meet the criteria for ABAWD status starting July 1, 2023. Some areas of Oregon with higher unemployment rates than the national rate will be exempt from restarting the work requirements. Others will make use of limited number of discretionary exemptions. The following areas will be resuming the work requirements: Clackamas, Deschutes, Jackson, Lane, Linn, Marion, Multnomah and Washington.

• **SNAP temporary exemptions for students of higher education:** Two temporary exemptions have allowed some students to be eligible for SNAP: having an expected family contribution of zero and being eligible for work study. These two exemptions will phase out on the following schedule:
  - The temporary exemptions will be applied to new cases until June 10, 2023.
  - They will be applied to case renewals until the end of June.
  - Ongoing cases remain covered by the temporary exemptions until they are due for renewal.
  - Students are encouraged to look into the many ways they can be eligible for SNAP as regular exemptions will continue to apply. You can find more information here.

2. **What should I do now to prepare?**

The most important things you can do now to prepare are to:

• Keep your contact information up to date
• Check your mail and respond to requests

**Updating your contact information**

Please let us know right away when your address, email, phone or mobile phone number, income, or household information changes so you can get important messages
about your benefits. You can also sign up for electronic notifications to make it even easier to receive information from us.

There are many ways you can update your contact information:

**Online at [benefits.oregon.gov](http://benefits.oregon.gov)**
- Create an account or log into your existing ONE account
- Available in English or Spanish

**By connecting with an OHP-Certified Community Partner:**
- If you are an OHP or MSP member, you may also ask an OHP-certified community partner in your area to update your contact information. Find one at [OregonHealthCare.gov/GetHelp](http://OregonHealthCare.gov/GetHelp). This service is free.
- Read more about reporting changes to OHP

**By contacting your Coordinated Care Organizations:**
- If you are enrolled in a Coordinated Care Organization (CCO), you can update your information through your CCO. Visit bit.ly/ccoplans to find CCO phone numbers.

**By phone**
- Customer Service Center
  - 1-800-699-9075 (TTY 711)
  - Monday through Friday, 7 a.m. to 6 p.m., Pacific time
  - Interpreters are available. You can also get an interpreter in your preferred language before talking with staff. Find a toll-free number [here](http://www.oregon.gov/dhs/offices/pages/one-services.aspx).

**In person**
- Any Aging and People with Disabilities or Self-Sufficiency Programs office anywhere in Oregon, and some Area Agency on Aging offices, which are frequently called Senior and Disability Services offices:
  - Find locations and phone numbers at [www.oregon.gov/dhs/offices/pages/one-services.aspx](http://www.oregon.gov/dhs/offices/pages/one-services.aspx)
  - Please call before going to an office.
  - Interpreters are available.

### 3. What can I do to keep my benefits?

You may get a notice in the mail that tells you what actions to take to keep your benefits. Respond to requests right away. Not all people receiving benefits will receive notices.
Some people may get fewer benefits or will no longer receive benefits. If that happens, we will share information about other resources that may help. Some examples are below.

**OHP and MSP**

You will have up to 90 days to complete your renewal form for OHP and MSP, if one is sent to you. If you no longer qualify for benefits, you will receive a 60-day notice before your benefits end.

If you no longer qualify for OHP and/or MSP, we will share information about other options for medical coverage. Our goal is to connect you to other health coverage options. You may be able to get health coverage with financial assistance through the Oregon Health Insurance Marketplace. People who no longer qualify for OHP benefits will qualify for a special enrollment period through the Marketplace. Information about these options will be mailed to individuals who are no longer eligible for OHP.

If you believe you received a closure notice in error, please call ODHS at 1-800-699-9075. If you have questions about other coverage options, please call the Marketplace Transition Help Center at 1-833-699-6850 (toll-free). You may also find free local health coverage help at OregonHealthCare.gov/GetHelp.

You can connect with an MSP counselor through Oregon’s [Senior Health Insurance Benefits Assistance (SHIBA) program](https://OregonHealthCare.gov/GetHelp).

**Services and supports for people with disabilities and older adults**

If you are receiving services and supports and are no longer eligible, there may be community resources to help you.

- Talk to your case manager for additional assistance.
- Contact the [Aging and Disabilities Resource Connection](https://ODHS.State.OR.US/Aging-Disabilities-Resource-Connection) at 1-855-ORE-ARDC (637-2372)
- Connect with a Medicare counselor through Oregon’s [Senior Health Insurance Benefits Assistance (SHIBA) program](https://OregonHealthCare.gov/GetHelp)
- Email odds.fieldliaison@odhsoha.oregon.gov
- Ask your [Community Developmental Disabilities Program](https://ODHS.State.OR.US/Community-Developmental-Disabilities-Program) about intellectual and developmental disabilities services.
SNAP food benefits

If you have a reduction in food benefits, there may be community resources to help you. Visit needfood.oregon.gov to find food resources in your community.

4. What is the Public Health Emergency?

In early 2020, the United States declared a Public Health Emergency (PHE) because of the COVID-19 pandemic.

The federal COVID-19 Public Health Emergency brought regulatory flexibilities and additional funding for temporary benefits and services for people in Oregon.

The flexibilities and programs included continuous coverage for OHP members, Medicare Savings program recipients, and people receiving long-term services and supports, even if their income or needs changed. It also brought more food benefits and fewer eligibility limits for people enrolled in SNAP.

5. When will the COVID-19 Emergency end?

Oregon is preparing for the ending of the federal COVID-19 Emergency, which is set to expire on May 11, 2023.


6. How can I get more information?

For more information, visit Oregon.gov/covidphe.