

Questions and answers about renewing OHP and other Medicaid benefits



Renewals are happening for Oregon Health Plan (OHP) and other Medicaid benefits. Take action to protect your medical benefits.

1. Update your address so we can reach you with important information. You can do that on your own or get free help online, by phone or in person.
2. Then, check your mail often for letters from the state of Oregon. When they come, do what they ask right away.

If you have a question that is not answered here, **you can get free help in many languages:**

- Find an office or community partner near you. [KeepCovered.Oregon.gov](https://www.KeepCovered.Oregon.gov).
- Call us weekdays from 7 a.m. to 6 p.m. 800-699-9075. All relay calls accepted. Find help in your language at [benefits.oregon.gov](https://www.benefits.oregon.gov). It is better to call earlier in the day.



Questions about what you need to do now

1. Why do I need to renew my OHP or other Medicaid benefits if I haven't had to in the past three years?

- The “Public Health Emergency” rules put into place during the COVID-19 pandemic are ending. Now, the state of Oregon must make sure everyone is still eligible for OHP and other Medicaid benefits.

2. What is the most important thing I can do to keep my benefits?

- The most important thing you can do is update your contact information as soon as possible.
 - See the box on page 1 for ways to get free help in many languages.
 - You can also update your information online. Go to benefits.oregon.gov. Create or log in to your online ONE account.
- Then, check your mail often for letters from the state of Oregon. When they come, do what they ask right away. If you need help, see the box on page 1.

3. Who needs to take action to keep their benefits?

If you get any of the support listed below, you need to update your contact information and watch for letters from the state:

- Oregon Health Plan (OHP)
- Other Medicaid such as:
 - Medicare Savings Programs
 - Long-term services and support for people with disabilities and older adults. This can include help with daily activities at home or in a facility.

4. When will I get my letters?

- Letters are being mailed now through mid-2024. Not everyone will be renewed at the same time, so check your mail often for letters from the state.
- Do you have an online ONE account? There you can see your estimated renewal date. We will put a digital copy of your letters in the message center after we mail them to you. You can also sign up to get text or email alerts when your letters are mailed. Go to benefits.oregon.gov to create or log in to your online ONE account.
- You can also visit or call an office or community partner, or call the ONE customer service center and ask them to see when your letters will be mailed. See the box on page 1.

5. How many letters will I get?

- Some people will get only one letter that will say whether their benefits will continue. It will say whether you need to reply to the letter, or not.
- Some people may get two letters around the same time. One letter will let you know you have been renewed and that you need to send more information. The other letter will say what information to send, and how to send it.
- If you need to reply or send information, you will have 90 days. During that time, we will keep sending reminder letters once a month.

6. What will the letters say?

You will get one or more letters and a case summary, which explains your benefits. Read them carefully, and contact us if you need help to understand—see the box on page 1 for ways to get help. Your letters might say things like:

- **You're automatically renewed for OHP or other Medicaid benefits.** Review the information to make sure everything is correct. Be sure to reply if there are any changes.
- **You need to provide more information to see if you're still eligible.** You may be asked to send information or have an interview. You'll have up to 90 days to reply. The letters will explain what you need to do.
- **Your benefits are changing.** You are eligible for a different medical program or no longer qualify for OHP or other Medicaid. You will receive at least 60 days advance notice of when any benefits will end. Your letters will tell you what to do next. If your situation has changed and you think you still should be eligible, contact a worker before your benefits end.

7. Will every person in my family get letters and a case summary?

- Most households will get one letter and case summary for the family. In some cases, people will receive letters for different household members at different times.
- It is important for each person in your household to update their contact information.

8. What happens if I don't respond to the letters?

- Even if you are still eligible for OHP or other Medicaid, you could lose your coverage if you don't respond to the letters.
- If you didn't answer the letters and find out you lost your benefits, you can apply again. If you are still eligible, we can reopen your benefits within 90 days.

9. What if I plan to move or change my mailing address soon?

- Make sure you update your contact information as soon as you move or change your mailing address. You can do that at benefits.oregon.gov. Create or log in to your online ONE account.
- See the box on page 1 for ways to get free help, in many languages, to update your address.

10. I don't have a permanent mailing address. How can I get my letters?

- You can use any address where you can receive mail. This could be with a friend, family member or a trusted organization.
- You may be able to get a free P.O. Box. Go to any U.S. Post Office and let them know you are houseless. Information here: faq.usps.com/s/article/Is-there-mail-service-for-the-homeless.

Questions about what to do if your benefits change

11. What if I or a family member no longer qualify for OHP or other Medicaid benefits?

- **You may be eligible for Medicare.** Call the Social Security Administration (SSA) at 800-772-1213 to enroll by phone or make an appointment at a local office. You can also enroll in Medicare online at ssa.gov/medicare/sign-up. Or you can go to OregonHealthcare.gov/GetHelp to find an insurance agent or a helper at the Senior Health Insurance Benefits Assistance Program (SHIBA), which can be reached at 800-722-4134.
- **If you are not eligible for Medicare, check to see if your employer offers an affordable plan.** Be sure to talk with your boss or human resources department before your OHP ends. You'll get a special enrollment period when you lose OHP.
- **If you do not have Medicare or an employer plan, you may be able to buy a health plan through the Oregon Health Insurance Marketplace.** This can cost as little as \$1 a month. Plans cover things like prescription drugs, doctor visits, urgent care, hospital stays and more. People who lose OHP can sign up for Marketplace coverage as soon as they have an OHP closure date. People can enroll before their OHP ends to avoid a gap in coverage, but have until July 31, 2024 to enroll.
 - To learn more about the Marketplace, visit OregonHealthCare.gov or call 833-699-6850 (toll-free, all relay calls accepted).
 - You can also visit a community partner or insurance agent for free help with the Marketplace, in person or on the phone. To find one near you, visit OregonHealthCare.gov/GetHelp.

12. What are some reasons I could lose my OHP or other Medicaid?

- Your income has gone up. If you earn more than the maximum income for the program, you no longer qualify for OHP or other Medicaid.
- You've changed your tax filing status.
- You now have Medicare. You may still be eligible for OHP or other Medicaid benefits.

13. What if I go to the hospital or doctor and find out I lost my OHP or other Medicaid benefits?

- You might have lost your benefits because you didn't respond to your letters. Look at your letters to see what date they say your OHP will end. If that date was less than 90 days ago, you can still respond and re-start your benefits. If you don't have your letters, get help using the box on page 1. You can also reapply at any time and ask for help paying any recent medical bills.
- If you lost your OHP because you no longer qualify, you may be able to get a new plan through the Oregon Health Insurance Marketplace. See question 11 to learn more.
- If you have Medicare and lose OHP or a Medicare Savings Program, you can talk to an insurance agent or Senior Health Insurance Benefits Assistance (SHIBA) counselor to understand your Medicare options. Find one at OregonHealthcare.gov/GetHelp.

14. What if I think a phone call or text message asking for information is a scam? How can I be sure it's really OHP or an official caller?

- The Oregon Health Authority, Oregon Department of Human Services, and Coordinated Care Organizations may text and call members to remind them to update their information or renew on time.
- We will never call asking you for money to enroll or re-enroll. Never share banking or credit card information with anyone claiming to be from Oregon Health Authority, Oregon Department of Human Services, Oregon Health Plan, or Medicaid.
- If you get a phone call or text message you think is a scam, hang up and do not respond.

Questions about OHP and Medicare

15. What if I recently started Medicare?

- People who were on OHP and then started Medicare during the pandemic stayed on OHP. We call this “full dual” benefits because you have Medicare and OHP.
- Everyone needs to renew. Many people will need to have an interview with a worker to learn what kind of benefits they may qualify for. You may get help paying your Medicare Part B premiums, secondary coverage, or continued full dual coverage, including dental and nonemergency transportation.
- If you need help with daily activities at home or in a facility, ask about long term care services and supports.
- If you lose OHP benefits, you can talk to an insurance agent or Senior Health Insurance Benefits Assistance (SHIBA) counselor about your Medicare options. Find one at OregonHealthcare.gov/GetHelp, or call SHIBA at 800-722-4134.

16. What if I turned 65 but did not enroll in Medicare?

- If you turned 65 during the pandemic, but did not enroll in Medicare at that time, enroll right away. See the first answer to question 12 to learn how.
- It's important to sign up for Medicare coverage during your initial enrollment period. This lasts for seven months, starting three months before you turn 65. You can also sign up within 6 months of your OHP ending. If you don't sign up, you may have to pay an extra amount, called a late-enrollment penalty if you decide to sign up later.
- If you have other health coverage, (like from your job), or you qualify for a Medicare Savings Program, you may not have to pay a penalty. Please check with Medicare to be sure. Learn more at medicare.gov/basics/costs/medicare-costs/avoid-penalties.

Questions about OHP and long-term care services

17. Does this apply to me if I receive long-term care?

- Yes. If you receive Medicaid long-term care services, you will need to renew your medical benefits.
- Medicaid long-term care includes services that help people with physical, mental health, and intellectual or developmental disabilities. The services help people take care of daily health and personal care needs they can't do on their own.
- Services can be provided in a person's home or community. They can also be provided in a care setting like adult foster care, assisted living and residential facilities, nursing facilities, and memory care communities.

18. What will I need to do to renew my medical benefits if I have long-term care?

- Keep your contact information up to date. Your authorized representatives can help you.
- Watch for your renewal letter in the mail. Reach out to your case manager if you have questions or need help understanding your letter.

19. What might happen to my long-term care services after renewal?

- After your renewal, one of these things might happen:
 - If you still qualify for OHP, your OHP will continue, but you may have changes to your long-term care services.
 - If you no longer qualify for OHP, your OHP medical benefits and long-term care services will end.
- If your benefits are going down or ending, you can ask for an appeal if you do not agree or think the state made a mistake.
- If you live in a long-term care facility or adult foster home, or have in-home caregivers, talk to your caseworker about ways to keep the services you need.



KeepCovered.Oregon.gov

For individuals with disabilities or individuals who speak a language other than English, OHA can provide information in alternate formats such as translations, large print or braille. Contact 503-945-5488 (all relay calls accepted) or feedback@odhsoha.oregon.gov.