

The ins and outs of unwinding Medicaid and CHIP coverage: Important information to help your clients stay covered

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What is unwinding?

Unwinding refers to the required process that states are undergoing to determine eligibility renewals for all Medicaid and CHIP enrollees. Prior to April 2023, there was a 3-year pause in Medicaid disenrollments tied to the COVID-19 public health emergency (PHE). Ten months into the 12 to 14 month unwinding process, states have completed eligibility redeterminations for half of enrollees, and more than 16 million people (over twice the population of Arizona) have already lost coverage. This includes children and adults who remain eligible but lost coverage because of administrative obstacles like missed mailings, paperwork, or procedural issues.

Why is this important?

Occupational therapy practitioners work with people who depend on Medicaid and CHIP for their insurance coverage in many settings, including schools, skilled nursing facilities, and clients' homes. Millions of individuals losing their health care coverage significantly impacts their ability to maintain their physical and behavioral health. Loss of coverage, including the stoppage of occupational therapy services, prevents individuals from accessing meaningful and functional habilitative and rehabilitative services. Health management, a critical domain that occupational therapy practitioners address, refers to activities related to managing and maintaining health and wellness

routines; this includes supporting clients in advocating for themselves within the health care system and to insurance providers.

What can occupational therapy practitioners do?

There are numerous ways occupational therapy practitioners can assist and encourage their clients through the unwinding process.

1. Encourage clients to make sure their contact information is up to date and accurate with their state Medicaid and/or CHIP office and to respond promptly to communications from the state about their health insurance (for example: responding and returning the renewal form when it arrives to keep their coverage)
 - Remind parents that their child may still be eligible for Medicaid or CHIP even if the parent is no longer eligible for Medicaid.
2. If a client has been disenrolled from Medicaid, let them know about other health care coverage options that are available including:
 - Employer-sponsored coverage
 - Coverage through the ACA Marketplace at [HealthCare.gov](https://www.healthcare.gov)
 - While the annual open enrollment period has closed, there is still the [Special Enrollment Period \(SEP\)](#) available for individuals who have lost Medicaid or CHIP coverage. Many people transitioning from Medicaid to the Marketplace will be eligible for \$0 or low-premium plans.
 - Coverage through Medicare
 - If your client qualifies for Medicare, there is a [Special Enrollment Period \(SEP\)](#) starting the day the state notifies them that their Medicaid coverage is ending and continues for 6 months after the Medicaid coverage ends.
 - [Re-apply](#) for Medicaid or CHIP to find out if you still qualify
 - Individuals can apply any time with no limit to the number of times they can apply for coverage.
3. [LocalHelp.HealthCare.gov](https://www.localhelp.healthcare.gov) is a resource to refer patients to find enrollment assistance near them and assist in accessing other health care coverage options.

Note: If a person has lost coverage due to procedural or paperwork issues, they may still be within the 90-day reconsideration period to restore their coverage. After an individual is disenrolled, they have at least 90 days to submit missing documentation to determine their eligibility. An additional new application is not necessary.

Additional ways occupational therapy practitioners can help minimize coverage loss

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1. Advocate for and offer multilingual flyers, postcards, and fact sheets be placed in one's clinical office or workplace setting to distribute these educational materials and resources to clients.
2. Warn clients about Medicaid unwinding scams. Medicaid will not ask or demand a client for money or personal information (such as bank account number or credit card information) through the renewal or enrollment process.

Where can I find additional resources?

The U.S Department of Health and Human Services (HHS) has released a new Medicaid/CHIP resource hub to help assist people maintain their coverage.

The Centers for Medicare and Medicaid Services (CMS) has released this toolkit specifically for health care clinicians and providers to assist them in navigating Medicaid and CHIP coverage loss with their clients.