



National WIC Association

What do WIC Staff Need to Know about Medicaid “Unwinding”?

How is the Medicaid program going to change?

In response to the COVID pandemic, since early 2020 a Medicaid “continuous coverage” requirement has prevented states from disenrolling anyone from Medicaid, even if an enrollee had a change in their income or family size that ordinarily would have made them ineligible for Medicaid. This policy has kept millions of people covered during the pandemic, ensuring they have access to health care services, including COVID testing, treatment, and vaccines.

This provision ends on March 31, 2023 and states must initiate Medicaid eligibility reviews of all their enrollees. States can start reviews in February, March, or April and have 12 months to complete them. They can begin terminating coverage for people they determine are no longer eligible starting April 1. States must check electronic data sources before asking enrollees for information or documents to verify their eligibility, but some people may receive communication about an upcoming renewal that will require them to take action to keep coverage.

How could this affect WIC applicants or participants?

Millions of people are at risk of losing Medicaid. Some people will lose Medicaid because they are no longer eligible (for example, because their income went up or their household size went down). Other people will lose Medicaid even though they may still be eligible.

HHS [estimates](#) that 72% of children and 64% of Latino enrollees who lose Medicaid coverage will be disenrolled *despite remaining eligible* as a result of procedural glitches in the renewal process. But this outcome is not inevitable.

States can take steps to reduce disenrollment of eligible people, and WIC staff can help them remain enrolled in WIC and Medicaid. Suggested steps are described below and your Medicaid counterparts can suggest other ways you can help.

What should people enrolled in Medicaid do to stay covered?

The most important step that Medicaid enrollees should take *immediately* is to make sure the state [Medicaid agency](#) has their current mailing address and phone number so that they receive important notices and renewal forms. Enrollees can [update their contact information](#) by calling the state Medicaid agency or visiting the agency’s website.

States are currently mailing important notices and will begin mailing renewal forms in the coming months. If people receive a renewal form, they should respond by providing the requested information or get in touch with someone who can help.

How can WIC staff help people who lose their Medicaid coverage during this process?

WIC staff may be the first to deliver news of loss of Medicaid coverage to families. Some families may have lost Medicaid for procedural reasons even though they are still eligible. WIC staff can play a role in supporting families who lose coverage by taking these steps:

- **Refer to Medicaid.** Use your usual Medicaid referral process to reconnect WIC participants with Medicaid. Providing basic information about how to regain health insurance could help families avoid or minimize gaps in coverage.
- **Encourage families to act quickly.** Acting quickly can get Medicaid reinstated because people who lose Medicaid for procedural reasons have 90 days to contact the Medicaid agency and submit their renewal paperwork. If they're still eligible for Medicaid, the state is required to restart their coverage. People who miss the 90-day window must submit a new application, which is more time-consuming.
- **Find help.** The Medicaid renewal process can be complicated, and letters from the Medicaid agency are often difficult to understand, so people may need help completing the renewal form and submitting the correct documents. Free, unbiased help is available in multiple languages in every state, from [Navigators and other enrollment assisters](#), and many can provide help over the phone or via videoconferencing.

How can WIC staff keep families connected to WIC?

WIC participants remain eligible for WIC even if they lose Medicaid coverage and children may remain eligible for Medicaid even if parents lose coverage as their income increases. You can help prevent families from losing WIC benefits when they lose Medicaid coverage by:

- Training staff so they understand that if a WIC participant loses Medicaid coverage, WIC is not required to redetermine eligibility before the next certification.
- Reminding participants that they remain eligible for WIC for the rest of their certification period and might be able to recertify for WIC based on income or receiving SNAP or TANF assistance.
- Including in outreach messages that being enrolled in Medicaid is not a requirement to be eligible for WIC and that losing Medicaid coverage does not result in losing WIC benefits.

What are key messages to share with WIC participants?

- Contact the state [Medicaid agency](#) today and update your address and phone number.
- Watch for letters in the mail, emails, calls, or text messages from the state Medicaid agency and respond by the due date.
- You can get free help with Medicaid renewals from [enrollment assisters](#) in your community.
- If you are not eligible for Medicaid anymore, you might qualify right away for free or low-cost health insurance through the marketplace and [enrollment assisters](#) can help you find a plan on [HealthCare.gov or your state's health insurance marketplace](#).