Healthy Michigan Plan

The Healthy Michigan Plan, an expansion and modification of the Medicaid program, will provide comprehensive coverage to Michigan’s low-income, uninsured residents beginning in April.

Q&A

ELIGIBILITY

Who is Eligible?

Individuals between the ages of 19 and 64, not currently eligible for Medicaid or Medicare, who:

- are citizens or lawfully admitted to the U.S., and
- have incomes less than 133% of the federal poverty level (up to $15,521 for an individual or $31,721 for a family of four).

COVERAGE

When Will Coverage Begin?

April 1, 2014.

What Services are Covered?

The comprehensive services required by the Affordable Care Act, including doctor visits, prescriptions, hospital services — plus additional key services such as dental, vision, hearing, and enhanced substance use disorder services — will be covered. Most people will select and be enrolled in the managed care plan of their choice.

COSTS

What Does it Cost?

Everyone enrolled in the program will be responsible for copays, after the first six months, for certain services such as doctor visits ($2), prescriptions ($1 or $3), and dental services ($3). Copay amounts will be the same as the current Medicaid program. There will be no copay requirements for preventive services or emergency services. Copays can be waived for services that allow enrollees to better manage chronic diseases or prevent complications.

(Note: Calculation of the monthly copay amount starting in the 7th month will be based on the prior 6 months usage.)

Individuals between 100% ($11,670 for an individual, $23,850 for a family of four) and 133% of the federal poverty level will be required to make an income-based contribution to a MI Health Account. This amount will be up to 2% of annual family income, and must be contributed on a monthly basis beginning the 7th month of enrollment. Contributions will not be required during the first six months of enrollment. Contributions can be made by the enrollee, by an employer, charitable organization, family member, or other entity on the enrollee’s behalf.

Both the copay amounts and the 2% contributions can be reduced if “healthy behaviors,” yet to be defined, are maintained or attained. Together they cannot exceed 5% of family income.
PAYMENTS

What Happens When Required Payments Are Not Made?

Consequences have not yet been defined, but the plan approved by the federal government specifies that no enrollee will be terminated from the program for failure to pay copays or contributions into the MI Health Account.

How will Payments be Made?

Required copays and contributions will be paid to the health plan selected by the individual. Copays will not be made at the time a service is provided; they will be paid monthly based on the prior six month’s service usage.

APPLICATION/ENROLLMENT

When Will Enrollment Begin?

Beginning April 1, new applications will be accepted for enrollment effective April 2014. All applications will be screened for Medicaid eligibility before Healthy Michigan Plan eligibility is approved.

Healthy Michigan Plan enrollment is open year-round.

Those participating in the current Adult Benefits Waiver program are currently being transitioned from that program to the Healthy Michigan Plan.

Those with incomes between 100% and 133% of the federal poverty level who purchased coverage through the Marketplace will also be transitioned from their Marketplace plans to the Healthy Michigan Plan.

The Department hopes to retrieve those Medicaid applications denied on or after Oct. 1, 2013 and reprocess them to determine Healthy Michigan Plan eligibility.

What Is the Enrollment Process?

A streamlined application and eligibility process, using the new tax-related income methodology and no asset test, will be used. Applications will be available by phone, online or in person.

Application will be available by:

1.855.789.5610

www.michigan.gov/mibridges

At a local Department of Human Services office. Go to:
www.michigan.gov/dhs

MORE INFORMATION AND UPDATES:

Can be found on the Healthy Michigan Plan website. Go to www.michigan.gov/mdch/ then click on Healthy Michigan plan.

In addition, updates are available through text messaging by texting InfoMI to 69866.