

To: AmeriHealth Caritas Pennsylvania (PA)/AmeriHealth Caritas Pennsylvania (PA) Community HealthChoices (CHC) Providers

Date: June 13, 2023

Re: New NaviNet tools available to view Medical Assistance Eligibility Redetermination dates

As you know, the Pennsylvania Department of Human Services (DHS) was able to keep Medical Assistance (MA) coverage open for most people during the COVID-19 Public Health Emergency (PHE) even if they were no longer eligible for MA. DHS is now in the process of making sure that everyone who is receiving MA is still eligible by reviewing each person's information.

When your patients who are on MA receive their renewal paperwork from PA DHS, they must complete and submit their information. If they do not, they will lose their MA coverage.

Once they do complete and submit their renewal paperwork, PA DHS will determine eligibility, which results in one of two scenarios:

1. If they remain eligible, they will continue to receive health care coverage through AmeriHealth Caritas PA/AmeriHealth Caritas PA CHC. There is nothing they need to do to continue coverage with us.
2. If they are found to NOT be eligible for MA, they will no longer have coverage through AmeriHealth Caritas PA/AmeriHealth Caritas PA CHC. We can help them find other possible options, if needed.

How you can help

Start the conversation with your MA patients and stress the urgency of timely submission of their renewal paperwork by using any of the tools listed below:

We have launched two new tools in the NaviNet provider portal that will allow providers to view upcoming MA Eligibility Redetermination dates.

- **Member/Participant Annual Eligibility Redetermination Popup Alert**

In the Eligibility and Benefits Screen under the Patient Alert Details popup, there will be a new "Redetermination Report" link that, when clicked, will display the Members/Participants' upcoming eligibility redetermination date. The new pop-up alert will be very similar to the existing Care Gap and PCP History alerts and will be available to all provider types.

- **Member/Participant Annual Eligibility Redetermination Report**

In the Administrative Report Inquiry section, a new report will be available for PCPs under the report list dropdown that provides a full list of all Members/Participants on your roster who have upcoming eligibility redetermination dates (within the next 90 days). The report will be available for PCPs to download in both PDF and Excel formats.

- **Quick Tip Checklists**

Tear-off lists are available for you to give to your patients, which tells them what they need to do, as well as where they can go if they need help or have questions. If you need these, please let your Account Executive know.

Thank you for all you do for your patients, our Members/Participants, to get care and stay well. If you have any questions regarding this notice, please contact your Provider Account Executive or Provider Services at **1-800-521-6007**.