

CHANGES TO THE HEALTHY MICHIGAN PLAN 2020

WHAT ARE THE NEW CHANGES?

Change 1: Beginning in **2020**, individuals and families must meet a new work requirement, or prove they are exempt from it, to continue receiving coverage from the Healthy Michigan Plan.

Change 2: Beginning in **2020**, some individuals and families will have to pay a monthly fee (premium) that is 5% of their income and they will have to complete a questionnaire about their health or show they have engaged in healthy behavior.

WHAT IS A WORK REQUIREMENT?

- A work requirement requires you to let your Medicaid program know if you are working at least 80 hours a month or exempt from this requirement.
- Beginning in **2020**, individuals and families covered under the Healthy Michigan Plan must report hours **every month** whether they are working at least **80 hours a month** or if they do not need to meet this requirement. You will have to self report **no documentation needs to be provided**.
- If you do not meet monthly requirements for three months or more, your Medicaid coverage will be suspended for at least a month until you can meet the requirement.

WHAT COUNTS AS WORK?

Employment, including self-employment

Job training and search activities

Vocational training

Educational training

Unpaid work (ex. internship)

Tribal employment program

Substance abuse treatment

Community service (up to 3 months in a year)

EXEMPTIONS:

Age 63 and older

Persons receiving unemployment checks

Disabled, medically frail persons

Caregivers to the disabled

Caregivers to children under 6 years

Fulltime students & pregnant women

Foster care youth under 21

Recently incarcerated individuals

UNDERSTANDING PREMIUMS & HEALTHY BEHAVIOR

- Premiums and healthy behavior only apply to individuals and families who have been enrolled in the Healthy Michigan Plan for **4 years or more since April 1, 2014**. However, the change will take place beginning **January 1, 2020**.
- The premium that you will need to pay varies on how long you have been enrolled in the Healthy Michigan Plan and how much money you make in a month.

If you have been enrolled for 48 months or more and are between **100-138% FPL***:

- Will have to pay a premium of **5%** of income AND complete a health questionnaire OR healthy behavior
- Does not have to pay a copay
- Individuals who fail to pay will be disenrolled until they pay the missed premium amount

If you have been enrolled for less than 48 months and are between **100-138% FPL***:

- Will have to pay a premium of **2%** of income and a copay
- Premium and copay can be reduced if you engage in healthy behavior
- Coverage or services will not be denied for failure to pay

If you have been enrolled for 48 months / less and are at the **100% FPL* or below**:

- Will only have to pay copays and no premiums
- Copay can be reduced if you engage in healthy behavior
- Coverage or services will not be denied for failure to pay

* See chart below for 2019 annual income poverty guidelines

Household Size	FPL Annual	FPL Annual	FPL Annual
	100%	133%	138%
1	\$12,490	\$16,612	\$17,236
2	\$16,910	\$22,490	\$23,336
3	\$21,330	\$28,369	\$29,435
4	\$25,750	\$34,248	\$35,535
5	\$30,170	\$40,126	\$41,635
6	\$34,590	\$46,005	\$47,734
7	\$39,010	\$51,883	\$53,834
8	\$43,430	\$57,762	\$59,933

Add \$4,320 for each person over 8

WHO IS EXEMPT?

- American Indians/ Alaskan Natives exempt from **premiums ONLY**
- Pregnant women are exempt from premiums AND from demonstrating a healthy behavior
- Medically frail individuals are exempt from premiums AND from demonstrating a healthy behavior

WHAT COUNTS AS A HEALTHY BEHAVIOR?

- Preventative care check ups
- Cancer screenings
- HIV screenings
- Hepatitis C screenings
- Osteoporosis screening
- Tuberculosis screening
- Screening for sexually transmitted infections (STIs)
- Getting vaccinated

