Many kids will move from Medicaid to CHIP, which requires monthly premiums

How the end of the Public Health Emergency (PHE) may affect Missouri Medicaid participants

Many Missouri children will move from no-cost Medicaid coverage to Children’s Health Insurance Program (CHIP) coverage once the Family Support Division (FSD) completes their annual renewal and redetermination. The CHIP program requires the participant to pay a monthly premium to keep their kids’ coverage active.

The CHIP premium amount depends on families’ income, with higher income households paying more per month.

When do CHIP premium payments start?

1. If the participant’s children are already enrolled in CHIP and remain eligible for CHIP after the annual renewal, they will not be required to make premium payments until May 2024 to keep their children’s coverage active.
   • If the participant’s children are already on CHIP and they have activated automatic monthly withdrawals, those will still take place through May 2024 unless the participant asks the MO HealthNet Division to stop the automatic withdrawals.

2. If, after renewal, the participant’s children move from no-cost Medicaid to CHIP, they will not be required to make any premium payments until May 2024. Their children’s coverage will still be active.

3. If the participant is applying for Medicaid for the first time and their children are enrolled in CHIP, they will have to make the first monthly premium payment in order to start the coverage for their children. After that first month, the participant will not have to make additional payments until May 2024 for their children’s coverage to remain active.

   NOTE: FSD plans to send notices to participants 30 days prior to May 2024 when payments will be required again.

What is the process to start CHIP coverage?

1. Households who have Medicaid will go through an annual renewal sometime between April 2023 and April 2024, usually one year after coverage started.

2. FSD will send a notice to any household with kids transitioning to CHIP coverage. The notice says the participant must make a premium payment for their kids to continue their coverage.
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- Whether a household must pay a premium and the monthly premium amount is based on the gross income and family size. The monthly premium is the total amount owed for all children in the household. It is not a “per-child” amount.
- If the participant’s child moves to CHIP after renewal, it likely means their household’s gross income increased in the past couple years.
- If the participant disagrees with this decision, they can request a hearing to contest the state’s determination. If their kids are new to Medicaid, their coverage will end if they do not request a hearing or pay the first premium. If their kids already had Medicaid when they moved to CHIP, the participant will not have to pay a premium until May 2024 (though they should still request a hearing now if they disagree with the decision).

3. The participant will have **90 days** to submit the first premium payment by mail:
   - If their child is new to Medicaid and they do not submit the first premium payment, their child’s coverage will end. However, they can reapply for coverage right away with no waiting period.
   - After the first payment, they can either continue to mail payments to FSD, or apply to have the payments automatically withdrawn from their bank account each month. At this time, they cannot make payments online or by phone.

4. CHIP coverage for lower income kids (also known as the “reduced premium group” or CHIP73 and CHIP74) will start on the date FSD receives the first premium payment. Coverage for kids in the “full premium group”(also known as CHIP75) will start on the 30th day after approval or the date FSD receives the first premium payment, whichever is later.

5. Once the participant’s kids are enrolled in CHIP, they must make timely payment of the monthly premium to keep coverage (this requirement will begin again after May 2024). If FSD does not receive a monthly payment:
   - Kids in the reduced premium group will have coverage stopped until FSD gets the premium payment.
   - Kids in the full premium group will have coverage stopped and their case will close. These kids will need to reapply for coverage and may be subject to a 90 day penalty period for coverage for non-payment.

Learn more about Medicaid annual renewals
To learn more about annual renewals, visit: [https://mydss.mo.gov/renew](https://mydss.mo.gov/renew)

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