Public Health Emergency FAQ

What is the PHE, and why is it important for my benefits?
In response to the COVID-19 pandemic, the federal government declared a public health emergency (PHE) and passed a law that allowed you to automatically keep your Medicaid coverage since March 2020.

When will automatic coverage for Medicaid end?
The timing is unknown, but HHSC may soon be directed to end Medicaid coverage for recipients who are not eligible but continued to be covered due to the PHE. HHSC will review your information to determine if your coverage will continue.

If you don’t respond to renewal or information requests from HHSC, you may lose benefits when automatic coverage ends. If you receive a notice from HHSC that says you still have benefits but are no longer eligible, you may lose benefits when automatic coverage ends.

Please complete and submit the renewal packet that is sent to you. The best way to complete your renewal is online at YourTexasBenefits.com.

You can also submit your information by mail or fax, or by calling 2-1-1 and selecting option 2 after selecting a language.

What should I do now to ensure my Medicaid coverage continues if I am eligible?
You should respond to any request HHSC sends you. When you get a notice that your renewal is due, follow the instructions to complete and return the information. If you don’t do this, you may lose your Medicaid coverage.

Please complete and submit the renewal packet that is sent to you. The best way to complete your renewal is online at YourTexasBenefits.com.
You can also submit your information by mail or fax, or by calling 2-1-1 and selecting option 2 after selecting a language.

Create a Your Texas Benefits online account or download the Your Texas Benefits mobile app to view your account information, update your contact information and respond to requests from HHSC. Visit YourTexasBenefits.com to get started. You can also sign up for electronic notices to stay informed about your case.

You must continue to report all changes and return all requested information, including renewal forms. You can report a change by going online to YourTexasBenefits.com, through the mobile app, or by calling 2-1-1 and selecting option 2 after selecting a language.

**Why is it important for me to renew my coverage now?**

If you are eligible, completing your renewal now will help make sure you don’t lose your coverage later or have a gap in coverage. If you renew your coverage now, you will not need to renew your benefits again until your certification period ends.

**How do I know if I need to renew my Medicaid coverage?**

Check if it is time for you to renew by logging in to your account on YourTexasBenefits.com or the mobile app, or by calling 2-1-1 and selecting option 2 after selecting a language.

**What happens after I turn in my renewal?**

HHSC will review your renewal and may ask for missing information or information not available from other sources.

If you remain eligible, you will receive a notice from HHSC that says your Medicaid eligibility is renewed and will continue until it is time to renew again.

If we find you are not eligible or if you do not return your renewal, HHSC will continue to send you renewal packets every six months until continuous coverage ends or until you are determined eligible again. When continuous coverage ends, HHSC will review your eligibility again. If you are ineligible, your coverage will end.
Please complete and submit the renewal packet that is sent to you. **The best way to complete your renewal is online at YourTexasBenefits.com.**

You can also submit your information by mail or fax, or by calling 2-1-1 and selecting option 2 after selecting a language.

**If I am determined ineligible for Medicaid, do I have to apply for other benefits?**

During the Medicaid renewal process, HHSC will evaluate your eligibility for other HHS programs, such as CHIP. You will receive a notice if you are moved to a different type of assistance.

**What is the best way to ensure that I stay up to date on my benefits?**

Create a Your Texas Benefits online account. You can view your account information, update your contact information, submit a renewal and respond to requests from HHSC. You can also sign up for electronic notices to stay informed about your case. Visit YourTexasBenefits.com to get started.

**I submitted a renewal, and I received a notice saying I’m not eligible for coverage after the PHE. I think I am eligible, what can I do?**

You may appeal any case decision that is incorrect by coming into a local office or by calling 2-1-1 and selecting option 2 after selecting a language.

If you aren’t able to resolve your issue through the appeals process or if you have a complaint about an HHS program, service or benefit that has not been resolved to your satisfaction, you can send a question or file a complaint with the Office of the Ombudsman by doing one of the following:

- **Call:** 877-787-8999 (8 a.m. to 5 p.m., Central Time, Monday through Friday)
- **Go online:** hhs.texas.gov/ombudsman
- **Fax:** 888-780-8099 (toll-free)
- **Mail:** Texas Health and Human Services Commission, Office of the Ombudsman, MC H-700, P.O. Box 13247, Austin, Texas 78711-3247
I get SNAP benefits. Will my SNAP benefits change when the PHE ends?

Beginning in April 2020, SNAP recipients began receiving the maximum benefit amount for their income size. This was called an emergency allotment. This could continue each month until the PHE ends. SNAP recipients will receive a notice the month before the emergency allotment will end.

I get TANF benefits. Will my TANF benefits change when the PHE ends?

No. If you are currently receiving TANF, your benefits will not change because of the end of continuous coverage.

Is my child’s CHIP coverage impacted by the end of the PHE?

No. If your child is eligible for CHIP, your coverage will not change because of the end of continuous coverage.