

NJ FAMILYCARE/MEDICAID MEMBERS FREQUENTLY ASKED QUESTIONS



State of New Jersey
Phil Murphy, Governor
Sheila Oliver, Lt. Governor



Department of Human Services
Sarah Adelman, Commissioner

NJFAMILYCARE

Planning for the Unwinding

Since March of 2020, NJ FamilyCare/Medicaid has followed special rules related to the federal COVID-19 Public Health Emergency (PHE). These rules have allowed most NJ FamilyCare/Medicaid members to keep their health coverage, even if they no longer qualified – for example, if their income was too high. However, once the federal government determines that the PHE is over, NJ FamilyCare will have to follow normal federal rules.

The PHE is expected to end soon. When it does, NJ FamilyCare will begin “unwinding.” This means that all members enrolled in an NJ FamilyCare program will be reviewed to see if they still qualify for coverage. As part of this review, many members will receive mail from the State of New Jersey or their County Board of Social Services. Members will have to provide or confirm additional information so NJ FamilyCare/Medicaid can decide whether they still qualify for healthcare coverage. Members who do not respond to NJ FamilyCare/Medicaid mail will lose their coverage.

What is unwinding?

“Unwinding” is the process where New Jersey will restart yearly eligibility reviews for everyone enrolled in NJ FamilyCare/Medicaid. This will happen after the PHE ends.

What happens during unwinding?

During the unwinding, NJ FamilyCare/Medicaid will send renewal packets for members to complete and return. Then NJ FamilyCare/Medicaid will decide if members still qualify for coverage. You can learn more about who can qualify [here](#). Members who still qualify will keep their NJ FamilyCare/Medicaid coverage.

When will NJ FamilyCare/Medicaid begin to unwind from the PHE?

The start date of unwinding hasn’t been announced yet. The federal government has promised to give states at least 60 days’ notice before the end of the PHE.

What can members do to prepare for the end of the PHE?

- **Call** NJ FamilyCare/Medicaid at 1-800-701-0710 (TTY: 711) to update their contact information. This is especially important if they have moved in the last three years.
- **Watch** for mail from the State of New Jersey or your county, and make sure to **reply** on time to avoid a gap in coverage.

What happens if members no longer qualify for NJ FamilyCare/Medicaid after the PHE ends?

- Members should take time to make sure the renewal process goes smoothly by responding to requests for information and reporting changes in their household like pregnancy, address, income, and so on. Those members determined to be eligible will continue to receive NJ FamilyCare/Medicaid benefits.
- If a member no longer qualifies for coverage through NJ FamilyCare/Medicaid, they may be referred to [GetCoveredNJ](#), where they can get help paying for healthcare coverage. GetCoveredNJ is the state's official health insurance marketplace where individuals and families can easily shop for and buy affordable healthcare coverage.



Members - Frequently Asked Questions



- If a member has Medicare, they may qualify for help with premiums, co-pays, and deductibles through New Jersey's Medicare Savings Programs. Learn more about program eligibility and benefits by calling 1-609-792-9745 (TTY: 711).

