

Medical Insurance and Community Services Administration (MICSA) MEDICAID ALERT

July 3, 2012

Mandatory Enrollment Into Managed Long Term Care

The New York State Department of Health announced it has verbal approval from the federal government to allow the initial mailing of mandatory Managed MLTC enrollment packages to dual eligible consumers aged 21 and over receiving fee- for- service personal care. At the end of this week, these mailings will begin in lower Manhattan. Mandatory enrollment packages will be sent to additional clients in Manhattan the following week. Mandatory packets will only be sent to clients who have at least 120 days of prospective home care authorization and 120 days prospective Medicaid eligibility upon the mailing. Clients receiving the packet will have sixty days to select a MLTC plan or be auto assigned to a plan. Consumers may choose a partially capitated MLTC, PACE, or Medicaid Advantage Plus (MAP) plan but will only be auto-assigned to partially capitated plans.

Mandatory enrollment will be phased-in by borough in the order listed: Manhattan, Bronx, Brooklyn, Queens and Staten Island. Consumers required to enroll in a MLTC plan will receive an announcement notice (telling them mandatory is coming) and then will receive a letter telling them they have 60 days to choose a plan (mailing will include a brochure describing MLTC and a list of plans (partial, PACE and MAP). (Manhattan consumers meeting the criteria above received an announcement letter in June.) Consumers will receive significant follow-up by phone and mail encouraging them to choose a plan by New York Medicaid Choice, New York State's enrollment broker. New York Medicaid Choice has established a new phone number for the MLTC initiative: 888-401-MLTC (6582).

To ensure continuity of care in the mandatory process, Managed Long Term Care Plans have been required to contract with New York City's home care vendors to help ensure that people transitioning from HRA's fee-for-service personal care program will be able to retain their current home care worker.

For HRA personal care clients transitioning as part of the mandatory enrollment process, the MLTC plan will continue existing authorized services until they conduct their own client assessment. Plans are required to conduct an assessment within 30 days of enrollment.

Please be advised that Traumatic Brain Injury and Nursing Home transition and diversion clients may inadvertently receive enrollment packages. These clients are exempt from mandatory enrollment. If you become aware of such clients receiving a mandatory package, please let them know they can contact NY Medicaid Choice and ask for an exemption from enrollment based on their participation in one of these waiver programs.

Until formal written approval is received by New York State from the federal government, new applications for fee- for- service personal care will continue to be accepted. NYSDOH will notify stakeholders when that approval is received. Additionally, NYSDOH has filed an amendment to its 1915 (c) waiver to allow it to mandatorily enroll Long Term Home Health Care (LTHHC) (Lombardi) clients into Managed Long Term Care. Until that waiver amendment is approved, consumers will continue to be able to enroll into Long Term Home Health Care programs.

Consumer Directed (CDPAP) clients are not included in the initial mandatory roll-out. CD-PAP will be included in managed care, both mainstream and managed long term care effective September 1, 2012. At that time, CD-PAP consumers will begin to be included in the mandatory roll-out.