

June 10, 2024

Updated as of 6/10/2024

**Mainstream Medicaid Managed Care Plan for
Undocumented Non-Citizens Aged 65 and Older**

This Alert is to inform Client representatives, Community Based Organizations, Hospitals, Homecare Agencies, Advocates, and agencies assisting consumers with their Medicaid cases, of a New York State expansion of health insurance coverage for undocumented non-citizens who are aged 65 or older.

Effective, January 1, 2024, Chapter 56 of the Laws of 2022 amended New York State Social Law 366 to provide undocumented non-citizens aged 65 and older, who are otherwise eligible except for their immigration status, health insurance coverage through a Mainstream Medicaid Managed Care Plan. This new expanded coverage will **only** be provided through NY State of Health. This new coverage offers more comprehensive benefits, including preventive and primary care. This coverage does not apply to HIV Special Needs Plans (SNPs), Health and Recovery Plans (HARPs) or Managed Long Term Care (MLTC) plans. This coverage is provided using **State funds only**.

Previously, those aged 65 or older only qualified for Medicaid coverage for the treatment of emergency medical conditions. **This change will allow these consumers to access all services covered by a Mainstream Medicaid Managed Care Plan.** Any benefits which were carved out of the Mainstream Medicaid Managed Care Plan benefit package after January 1, 2023, will be made available to this population on a fee-for-service basis. Pharmacy benefits were carved out of the Mainstream Medicaid Managed Care Plan in April 2023; therefore, consumers who are eligible for this new coverage will access pharmacy benefits through NYRx, using their NYS Benefit Identification Card, formerly known as the Common Benefit Identification Card (CBIC).

Transportation to emergency services will continue to be covered. However, non-emergency transportation services are not available as it was carved out of the Mainstream Medicaid Managed Care Plan benefit package prior to January 1, 2023. Other groups of non-citizens continue to qualify for Medicaid for the treatment of an emergency medical condition coverage, sometimes referred to as "Emergency Medicaid," but do not qualify for this new expanded coverage. These non-citizens are temporary non-immigrants, such as tourists, who are not New York State residents.

New Applications

Most applicants for the new expanded coverage will have their initial eligibility determined by LDSS/HRA using SSI-R budgeting based on age. However, there may be a small number of consumers who are a parent or caretaker relative. As a parent or caretaker relative of a dependent child who is under age 18, or 18 and a full-time student, can apply for the new expanded coverage through New York State of Health (NYSOH) because they are in a Modified Adjusted Gross Income (MAGI) category of parent/caretaker relative. A parent or caretaker relative is a parent or relative of a dependent child by blood, adoption, or marriage with whom the child is living and who assumes primary responsibility for the child's care and who is:

- the child's parent, grandparent, sibling, stepparent, stepsibling, parent's sibling, first cousin, child of a sibling; **or**
- the spouse of such parent or relative even after the marriage is terminated by death or divorce.

The few parent or caretaker relative consumers who apply through NY State of Health (NYSOH) will have MAGI budgeting rules and category code used to complete their initial eligibility determination. Consumers who apply with HRA will have SSI-R budgeting rules and methodologies and category codes. The cases approved within Medicaid HRA will get treatment of emergency medical condition coverage, commonly known as "Emergency Medicaid coverage". Once the cases are transitioned to New York State, cases will be updated and enrollment into the plan will take place.

Current Emergency Medicaid Enrollees

Consumers aged 65 and older who are currently enrolled in Medicaid for the treatment of an emergency medical condition, sometimes referred to as "Emergency Medicaid," will be systematically identified to facilitate enrollment into the new health plan coverage. Those with an active case in the New York State Welfare Management System (WMS) will be transitioned to NY State of Health (NYSOH) to obtain this coverage.

NY State of Health (NYSOH) recently mailed current "Emergency Medicaid" enrollees information detailing the new insurance with instructions to choose a Mainstream Medicaid Managed Care Plan. After the consumer has chosen a plan, NYSOH will mail a second notice with the start date of their chosen plan. These consumers will also receive material from their chosen Mainstream Medicaid Managed Care Plan. Those that do not respond to the plan mailing will be auto assigned into a Mainstream Medicaid Managed Care Plan, as current procedure, the undocumented 65 and older enrollees, will have 90 days to switch plans.

Consumers aged 65 and older who are not parents or caretakers, and do not already have “Emergency Medicaid”, must apply through HRA. They cannot apply for this new coverage through NY State of Health (NYSOH).

Long Term Care Services in a Nursing Home

Consumers who are eligible for the new health coverage are also entitled to nursing home benefits, available within the Mainstream Medicaid Managed Care Plan, if determined financially eligible under existing eligibility rules used to determine Medicaid coverage of long-term nursing home care (permanent placement). This includes application of the 60-month transfer of assets look-back period or the application of a transfer of assets penalty period, as applicable.

Eligibility determinations for nursing home coverage cannot be accomplished systemically in NY State of Health (NYSOH) at this time. Therefore, DOH staff will perform this function. DOH has established a new **fax number, 518-408-9792**, for all applications and documentation, including the Supplemental A, that are normally provided to HRA by nursing home providers on behalf of consumers who are seeking nursing home benefits. This fax number is **only** for the submission of applications for individuals who are aged 65 or older and undocumented who are seeking nursing home benefits and for hospitals with patients in alternate level of care. Please utilize the fax number to submit the entire package. Please be sure to fax information for one consumer at a time.

The DOH e-mail address, MCfor65plusundoc@health.ny.gov, should only be utilized for general inquires related to eligibility for undocumented non-citizens aged 65 and older. Any documents received by HRA pertaining to requests for Medicaid coverage of nursing home care for these consumers must be forwarded to NYS DOH. This includes documents, such as the LDSS-3559 “RESIDENTIAL HEALTH CARE FACILITY REPORT OF MEDICAID RECIPIENT ADMISSION/DISCHARGE/READMISSION/CHANGE IN STATUS” as well as any information provided by the consumer to the district required to determine financial eligibility.

DOH is not instructing nursing home providers to change their process for providing documentation related to applications for nursing home coverage to districts. However, if the nursing home provider is an EDITS+ submitter, the application and any accompanying documentation must be forwarded manually via fax to the DOH and not to put through and EDITS+ submission. DOH staff will use these documents to determine eligibility and issue related notices for long-term nursing home coverage. Any documents received by DOH staff will also be uploaded to the consumer’s NY State of Health (NYSOH) account to create a complete eligibility record. Information on fair hearings for nursing home coverage issues for this population will be forthcoming.

PLEASE SHARE THIS ALERT WITH ALL APPROPRIATE STAFF
