

DSS-4357EL

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GENERAL INFORMATION SYSTEM

11/15/00

DIVISION: Office of Medicaid Management

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GIS 00 MA/029

TO: All Local District Commissioners, Medicaid Directors

FROM: Betty Rice, Director
Division of Consumer & Local District Relations

SUBJECT: Facilitated Enrollment for Transitioning Children

EFFECTIVE DATE: Immediately

CONTACT PERSON: Local District Liaison at (518) 474-9130 or
New York City (212) 268-6855

The purpose of this GIS is to alert districts to some recent developments in the process by which Medicaid-eligible children currently in receipt of CHPlus will be transferred from CHPlus to Medicaid. The Department's facilitated enrollment initiative was created to make this transition as seamless as possible. However, there is concern that families may not be taking the steps necessary to successfully transfer their children to Medicaid. The following three changes should improve this outcome:

1. Children's Health Insurance in New York State will now be marketed under the name Child Health Plus. All children can receive Child Health Plus. Children's Medicaid will be called Child Health Plus A and the existing Child Health Plus Program will be called Child Health Plus B. We understand the magnitude of the tasks which this change will necessitate. Over time, the Department will revise applications, notices, and other materials to reflect this change. We expect that changes to local equivalent materials will also evolve over time, and we will be working with you toward this end.
2. We are exploring opportunities to make the Medicaid application process more flexible for children transferring from Child Health Plus. We will provide further details as options become available.
3. The Department will begin providing the names of Child Health Plus enrollees who may be required to transfer to Medicaid to entities with the capacity to assist them, with the goal that outreach to these families can prevent a loss of coverage. The Department will obtain lists of enrollees from the health plans and give them to these entities according to the geographic location of the children.

These actions are an attempt to maximize insurance coverage and to minimize disruptions in care. More information is forthcoming.