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GENERAL INFORMATION SYSTEM
DIVISION: Office of Medicaid Management

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GIS 02 MA/013

TO: All Local District Commissioners

FROM: Kathryn Kuhmerker, Deputy Commissioner, Office of Medicaid Management

SUBJECT: Family Health Plus Program

EFFECTIVE DATE: Immediately

CONTACT PERSON: Local District Liaison: Upstate (518)474-8216
NYC (212)268-6855

On February 7, 2002, INF 02 OMM/INF-01 was issued to provide guidance for determining eligibility for Family Health Plus when an applicant was in receipt of other health insurance. Since the release of this INF, the Department, after review of the FHPlus legislation and in consultation with the New York State Insurance Department, is rescinding portions of this INF in regard to persons paying privately for health insurance. Specifically:

1. Individuals possessing private, non-employer based insurance or COBRA will not be denied at the time of application for Family Health Plus if the applicant plans to terminate the current insurance.
2. Applicants must provide proof of the date of termination from the insurance company.
3. Local districts must align the opening of FHPlus coverage with the first day of the month following the month of private insurance termination, whenever possible. This will prevent the individual from having a gap in insurance coverage.

All other guidelines provided in the INF 02 OMM/INF-01 remain unchanged. This INF will be reissued with these changes at a later date.