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DIVISION: Office of Health Insurance Programs

GIS 09 MA/006

TO: Local District Commissioners, Medicaid Directors

FROM: Judith Arnold, Director, Division of Coverage and Enrollment

SUBJECT: End-of-Month Coverage on Family Health Plus Case Closings

EFFECTIVE DATE: February 17, 2009 in New York City; March 16, 2009 Upstate

CONTACT PERSON: Local District Liaison

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The purpose of this General Information System (GIS) message is to inform local departments of social services (LDSS) of a systems change necessitated by the carve-out of the pharmacy benefit from the Family Health Plus (FHPlus) benefit package.

Social Services Law 369-ee(1)(d) requires that the period of eligibility for FHPlus begins on the first day of the month of enrollment in a health plan and ends on the last day of the month in which an individual ceases to be eligible. Since October 1, 2008, FHPlus recipients have been required to use their CBIC card to access pharmacy benefits. Therefore, when discontinuing eligibility for a FHPlus recipient, coverage must continue to the end of the month in which the tenth day of the ten-day notification (T + 10 upstate, T + 14 in New York City) occurs. Failure to do so will prevent payment of the FHPlus pharmacy benefit after the date of the discontinuance.

To automate end-of-month coverage, when transaction types 07, Closing, and 08, Recertification/Closing are used, WMS has been modified to close FHPlus cases at the end of the month in which ten-day notification occurs, for most closing reason codes. Likewise, when transaction type 05, Change, is used to delete an individual who is no longer FHPlus-eligible, WMS will generate endof-month coverage.

Reminder: If you are deleting an individual who is no longer FHPlus-eligible at Renewal, you must delete using an 05 transaction first, then renew the remaining eligible household members using an 06, Recertification, This will ensure that the deleted individual receives the transaction. correct amount of coverage.

Upstate, only the following reason codes will NOT generate FHPlus coverage to the end of the month: C53, E60, E62, E63, E79, E85, E90, E95, U66, U77, U78, These are the same codes that will bypass a Continuous Save V17, and V31. Date (CSD) when closing or deleting a child. In New York City, the reason codes that will not extend FHPlus coverage until the end of the month are: EF1, EF2, EF3, E60, E62, E63, E66, E72, E79, E90, E95, F17, F20, F63, F64, F92, F93, F66, F99, G39, G60, G88, G95, G98, M68, M97, M98, M99, N66, 576, and 939.

This information is included in the January 23, 2009 WMS/CNS Coordinator.