New York

Medicaid Choice

New York State's Medicaid managed care enrollment program

1-888-401-6582

Ask • Choose • Enroll

P.O. Box 5009, New York, NY 10274-5009

<Date>

- <Barcode> <Letter Code>
- <Name>
- <Address>
- <City>, <State>, <Zip>

Notice of Managed Long Term Care Medicaid Plan Disenrollment

Dear [Consumer Name]:

[CIN]

New York State changed how nursing home benefits will be covered for people in Managed Long Term Care (MLTC) Medicaid Plans. MLTC Medicaid plans will only cover three (3) months of long term nursing home care. Because you have been in a long term nursing home stay for more than three months, you will be disenrolled from [Old Health Plan] on [Plan Disenrollment Effective Date] (the "effective date" of your disenrollment).

You still qualify for Medicaid coverage of your nursing home care and you may remain in your nursing home. Your local social services district has determined that you are financially eligible for such care and services. After [Plan Disenrollment Effective Date], your nursing home care will be paid by regular fee-for-service Medicaid. If you have been paying some of your monthly income toward the cost of your nursing home care, you must continue to pay the income directly to the nursing home where you are residing.

Will I receive all the same benefits?

Yes. This change only affects who is responsible for paying your nursing home services and you will still have access to all the same benefits—in the same amount, duration and scope—that were available to you before the disenrollment from MLTC.

Who determined that I am in a long-term nursing home stay?

A decision that a nursing home stay will be long-term was a decision made between you, your doctor, and your nursing home. It means that based on an assessment of your medical needs, you are not expected to return home or to another community setting.

Can I return home or to another community setting?

Yes. Being in a long-term nursing home stay does not prevent you from returning to the community if it is safe for you to do so.

If you want to return to the community, you can ask for an assessment to determine whether your needs can be met safely in the community. You can schedule an assessment with your plan by calling New York Medicaid Choice at 1-888-401-6582 (TTY: 1-888-329-1541). New York Medicaid Choice will work with you and your plan to arrange an assessment.

If you ask for an assessment before the effective date of your disenrollment, which is [Plan Disenrollment Effective Date], you will remain enrolled in your plan until your assessment is complete and you are notified of your MLTC Medicaid plan's decision.

What do I do if I have a pending request or appeal to reinstate or increase my home care? If you call New York Medicaid Choice at 1-888-401-6582 (TTY: 1-888-329-1541) and tell them you are waiting for a decision from your plan or a fair hearing decision about home care services, and we confirm this with your plan, you will remain enrolled in your plan until you receive a decision and any appeal is completed.

You can also request a fair hearing to appeal this notice. If you request a fair hearing with aid to continue before [Plan Disenrollment Effective Date] you will remain enrolled in your plan until the hearing is decided.

What happens if I do not request a new assessment before I am disenrolled? If you do not ask for an assessment or a fair hearing with aid to continue before [Plan Disenrollment Effective Date], you will be disenrolled from [Old Health Plan]. You will continue to receive your nursing home care through regular Medicaid. Being disenrolled from your plan does not prevent you from returning to the community in the future if it is safe for you to do so.

If you are able to safely leave the nursing home and return to the community within six months of the date of your disenrollment you will be presumed eligible for enrollment into an MLTC Medicaid Plan. To re-enroll in an MLTC Medicaid Plan, contact New York Medicaid Choice. To request an assessment after this time, talk to the social worker at your nursing home or contact the Open Doors program about returning to the community. The Open Doors program provides support for people to return to their homes after a nursing home stay. To find out more about the Open Doors program, call 844-545-7108.

Questions?

If you have questions about this letter, you can call [Old Health Plan] at [Medical Plan Phone].

You can also call us, **New York Medicaid Choice**, if you need help. You can call us at **1-888-401-6582** (TTY: 1-888-329-1541). You can call Monday - Friday, from 8:30 a.m. – 8:00 p.m. and Saturday, from 10:00 a.m. – 6:00 p.m. Our counselors can help in all languages.

You can also call ICAN, the Independent Consumer Advocacy Network

The Independent Consumer Advocacy Network (ICAN) is the ombudsman program for health plan members. ICAN can answer your questions and give you free, independent advice about your coverage, complaint, and appeal options. To learn more about ICAN, go to www.icannys.org, or call 1-844-614-8800 between the hours of 8am to 6pm. TTY: 711. All services are free.

Thank you,

New York Medicaid Choice.

(FH#299 A)

This action has been taken in accordance with Public Health Law Section 4403-f. If you would like to talk to someone about this decision, you may have a conference to review these actions. If you believe this decision is wrong, you may ask for a State fair hearing. Please read the back of this notice to find out how to arrange a conference and/or a fair hearing.