

Populations Excluded from Medicaid Managed Care Enrollment

7/1/15

EXCLUDED POPULATIONS	DEFINITION
Resident of State-operated psychiatric facilities	Individuals in receipt of inpatient services at State-operated psychiatric facilities
Residents of state certified or voluntary operated treatment facilities for children	Medical facilities certified by OMH which provide for long term psychiatric care for persons 21 years of age and younger
Medicaid eligible infants living with incarcerated mothers in state or local correctional facilities	Infants living in correctional facilities (Taconic Hills and Bedford Hills) with their mothers. Usually lasts up to age 1
Individuals who are expected to be MA eligible for less than 6 months (except for pregnant women)	Medicaid case is closing within 6 months. This does not include cases that are scheduled to renew in 6 months
Blind or disabled children living separate from their parents for 30 days or more	Children under age 18, Certified Blind or disabled, living in a medical facility/separate residence from parents for 30 days or more
Permanent residents, under age 21, of residential health care facilities (RHCF) and temporary residents of RHCFs at the time of enrollment	Individuals, under age 21, that are permanently placed in a RHCF are excluded and individuals that are temporarily placed in a RHCF at the time of enrollment are excluded
Adolescents admitted to Residential Rehabilitation Services for Youth (RRSY)	The RRSY program serves chemically dependent individuals under age 21
Individuals receiving hospice services at time of enrollment	Individuals receiving hospice at time of enrollment are excluded. Current enrollees who begin to receive hospice remain enrolled
Individuals with access to comprehensive private health insurance	Comprehensive insurance covers most medical services; Major Medical, Inpatient, ER, Physician, DME, Clinic, Substance Abuse, Mental Health.
Persons in receipt of Medicaid/Medicare	Medicare recipients are excluded from MMC but can enroll in Medicaid Advantage or MLTC
Foster care children placed by voluntary agencies or in the care and custody of the Office of Children and Family Services	Local Districts that utilize FC voluntary agencies to place children in the community or facilities
Spend-down medically needy	Individual who have to spend some of their own money for medical needs on a monthly basis to receive Medicaid
Individuals under 65 years of age, who have been determined eligible by the Medicaid Cancer Treatment Program: Breast, Cervical, Colorectal, Prostate Cancer	Medicaid eligibility through District 99
Individuals receiving family planning services only	Individuals who are not fully eligible for Medicaid but are eligible to receive family planning services through the Family Planning Benefit Program
Individuals receiving assistance through an Assisted Living Program (ALP)	ALPs are jointly licensed as adult care facilities and licensed home care services agencies (LHCSA) and provide room, board, personal care services and medication case management.
District 97, Fiscal responsibility of State OMH	Medicaid eligibility through District Code 97
District 98, Fiscal responsibility of State OPWDD	Medicaid eligibility through District Code 98