



STATE OF NEW YORK DEPARTMENT OF HEALTH

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Commissioner

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Executive Deputy Commissioner

ADMINISTRATIVE DIRECTIVE

TRANSMITTAL: 10 OHIP/ADM-7

TO: Commissioners of
Social Services

DIVISION: Office of Health
Insurance Programs

DATE: July 27, 2010

SUBJECT: Elimination of the State, County, Municipal and School-District
Employee Exclusion for the Family Health Plus and Family Health
Plus Premium Assistance Programs

SUGGESTED DISTRIBUTION:	Local District Commissioners Medicaid Directors Public Assistance Staff Staff Development Coordinators Legal Staff Fair Hearing Staff Facilitated Enrollers Audit Staff
CONTACT PERSON:	Local District Liaison Upstate: (518)474-8887 NYC: (212)417-4500
ATTACHMENTS:	None

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
08 OHIP/ADM-1 05 OMM/ADM-4			SSL 369-ee (2)(a)(iii)		GIS 03 MA/020

I. PURPOSE

The purpose of this Office of Health Insurance Programs Administrative Directive (OHIP/ADM) is to inform local departments of social services (LDSS) that otherwise eligible employees of the State, county, municipal governments, as well as public school-districts may enroll in Family Health Plus (FHPlus) or the Family Health Plus Premium Assistance Program (FHP-PAP).

II. BACKGROUND

Chapter 58 of the Laws of 2005 provided that FHPlus was not available to federal, State, county, municipal or school-district employees.

Section 68 of Part C of Chapter 58 of the Laws of 2009 amended Social Services Law (SSL) Section 369-ee(2)(a)(iii) to remove the exclusion of public employees. However, prior to implementation, federal approval by the Centers for Medicare and Medicaid Services was required.

Federal approval was obtained on January 25, 2010, to allow State, county, municipal and school-district employees to enroll in the FHPlus program or FHP-PAP. This approval does not apply to federal employees, who are still prohibited from enrolling in FHPlus or FHP-PAP.

III. PROGRAM IMPLICATIONS

State, county, municipal and school-district employees and their family members who are enrolled in or have access to employer-sponsored health coverage, may apply for benefits under FHPlus and FHP-PAP. Districts will be required to accept such applications filed on or after September 1, 2010.

A. Exception to Federal Government Exclusion

Temporary or part-time public employees who are ineligible for employer-sponsored coverage have been allowed to enroll in FHPlus, if otherwise eligible. This policy continues to apply to federal employees. Temporary or part-time federal employees applying for FHPlus must provide a statement from the employer documenting that he/she is not eligible for coverage under the employer's plan.

B. Changes to the Access NY Health Care Application (DOH-4220)

Questions relating to employer-sponsored health insurance for public agency employees have been removed from the Access NY Health Care application (DOH-4220), revised in February 2010. Questions that were removed asked, "Is the parent/step-parent of any child applying a public employee who can get family coverage through a state health benefits plan?", and, "If yes,

does the public agency where that person works pay all or part of the cost of this health plan?". Local department of social services examiners should look at Section C of the revised application, "Household Income", under the box designated for "Earnings from Work", "Type of Income/Employer Name", to determine if the applicant or family member is a federal employee. Local department of social services examiners may also look at pay stubs to determine if the applicant or family member is a federal employee.

C. Intent to Terminate Employer Coverage

Due to the implementation of the FHP-PAP, the general rule that an individual with current employer-based insurance cannot be eligible for FHPlus coverage, even if he/she indicates the intention to drop the insurance, no longer applies. However, when the individual is responsible for 100% of the cost of the coverage, and the coverage does not meet the FHP-PAP benefit and cost effective criteria, the otherwise eligible individual may be allowed to terminate coverage to enroll in FHPlus.

IV. REQUIRED ACTION

Districts must not deny applications filed on or after September 1, 2010, for FHPlus or FHP-PAP based solely on the applicant's employment status with the State, county, municipality or public school-district.

Before enrolling persons otherwise eligible for FHPlus, the district must first determine if the applicant's employer-sponsored insurance meets all criteria for enrollment in the FHP-PAP. The district must obtain information on the cost and benefits of the employer-sponsored insurance, and determine if the coverage is both qualified and cost effective following procedures described in 08 OHIP/ADM-01.

V. SYSTEM IMPLICATIONS

A. Upstate

Upstate Client Notice System (CNS) notices which contain "Public Employee" messages will be revised to remove reference to State, municipal, county and school-district employees. Message selection notation will be revised to "FH+ Federal Employee" and the generated language will read, "A person who is eligible for health care coverage through a federal benefit plan is not eligible for Family Health Plus. Therefore, you are not eligible for Family Health Plus."

Client Notice System changes will be made with the October 2010 migration. Until that time, local department of social services examiners should not use these messages to deny or discontinue FHPlus for an applicant/recipient (A/R) based solely on the A/R's employment status with a State, county, municipal or school-district employer. They can be used to deny a federal employee. Upstate, these reason codes are:

1. Acceptance Reason Codes

S20/AA, S20/AC, S20/AE, S20/AG, S20/AF, S57, S59, S61, S66, S67, S80

2. Discontinuance Reason Codes

U08, U09, U03, U06, U07, U16, U57, U58, V39, X48, U28, U33

3. Denial Reason Codes

U35, U34, U49, U60, U62, U64, U74

4. Undercare Reason Codes


V79, V76, V77, V78, U30, V93, V95, S07, X80

B. New York City

Client Notice System notices containing reference to federal, State, municipal, county or school-district employees can only be used to discontinue federal employees for FHPlus. Changes will be made to New York City CNS messages in a future migration.

VI. EFFECTIVE DATE

The provisions of this ADM are effective for applications filed on or after September 1, 2010.



Donna Frescatore, Deputy Commissioner
Office of Health Insurance Programs