



**Department of Human Resources
311 West Saratoga Street
Baltimore MD 21201**

FIA INFORMATION MEMO

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**TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
FAMILY INVESTMENT SUPERVISORS AND CASE MANAGERS**

**FROM: CHARLES E. HENRY, EXECUTIVE DIRECTOR
JOSEPH E. DAVIS, EXECUTIVE DIRECTOR, DHMH/OOE**

**RE: CHANGE TO AUTOMATIC RE-ENROLLMENT FOR HEALTHCHOICE
RECIPIENTS**

PROGRAM AFFECTED: MEDICAL ASSISTANCE

ORIGINATING OFFICE: OFFICE OF POLICY, RESEARCH AND SYSTEMS

Automatic Re-enrollment Change to HealthChoice Regulations:

Effective June 1, 2001, The Department of Health and Mental Hygiene (DHMH) adopted a new policy to comply with House Bill 1227-Medicaid Managed Care Organizations (MCO) Continuity of Care. The bill allows an enrollee **120 days**, instead of **90 days** to return to the MCO of record after losing and regaining eligibility. COMAR 10.09.06 will be amended after the first of the year.

Examples:

Old Regulations:

1.) Recipient's eligibility ended 1/31/01, the customer reapplied on 3/23/01 and was certified on 4/22/01 with an effective date of 3/1/01. The recipient would be automatically reassigned into the MCO he/she was in before eligibility was lost as the date eligibility went on line in MMIS-II was within 90 days of the disenrollment from the MCO. Enrollment in the MCO is effective 10 days from when the eligibility goes on-line in MMIS-II; this date appears on MMIS Screen 1 as the "last transaction date". In this example, enrollment in the MCO begins 5/02/01, 10 days from 4/22/01.

2.) Recipient's eligibility ended 12/31/00, the customer reapplied on 4/21/01 and was certified on 5/12/01 with an effective date of 4/1/01. The time between the disenrollment from the MCO and the date the eligibility went on line in MMIS-II exceeded 90 days, therefore, the recipient would not be automatically re-enrolled in the prior MCO, but would select a MCO through standard HealthChoice enrollment

procedures. The Enrollment Broker mails an enrollment packet to the recipient to choose an MCO with instructions to call the Enrollment Broker with his choice. The recipient will be enrolled in the MCO of choice 10 days in the future from the call to the Enrollment Broker, or if the recipient does not choose a MCO by the 28th day, MMIS-II automatically assigns the recipient to a MCO 10 days in the future from the assignment date.

New Regulations

1.) Recipient's eligibility ended 3/31/01, the customer reapplied on 6/23/01 and was certified on 7/20/01 with an effective date of 6/1/01. The recipient would be automatically reassigned into the MCO he/she was in before eligibility was lost as the date eligibility went on line was within 120 days of disenrollment from the MCO. Enrollment in the MCO is 7/30/01, 10 days from the last transaction date in MMIS-II.

2.) Recipient's eligibility ended 2/28/01, the customer reapplied on 7/24/01 and was certified on 8/13/01 with an effective date of 7/1/01. The time between the disenrollment from the MCO and the date the eligibility went on line in MMIS-II exceeded 120 days; therefore, the recipient would not be automatically re-enrolled in the prior MCO, but would select a MCO through standard HealthChoice enrollment procedures.

cc: FIA Management Staff
Constituent Services
Help Desk
CTF