

## Medicaid Managed Care and Medicare/Medicaid Dual Enrollees Behavioral Health Provider Reference

Prior to the COVID-19 Federal Public Health Emergency (PHE), Mainstream Medicaid Managed Care (Mainstream) and Health and Recovery Plan (HARP) enrollees were disenrolled to Medicaid Fee-for-Service (FFS) when they became Medicare eligible.

During the COVID-19 Federal PHE, states were required to continuously maintain enrollment at the same level of benefits for Medicaid enrollees unless a member requested to be disenrolled, moved out of State, or was deceased. As a result, HARP and Mainstream enrollees were allowed to remain in Medicaid managed care after becoming eligible for Medicare, which was not previously an option.

The New York State Department of Health (NYSDOH) is in the process of returning to pre-PHE rules for individuals dually eligible for Medicaid and Medicare (“duals”) in managed care. This means that duals will be disenrolled from managed care to FFS unless they are enrolled in a plan that supports dually eligible enrollees.

### Dually Eligible Fully Integrated Managed Care Plan types

**MLTC:** Managed Long Term Care (MLTC) Plans are for individuals in need of [Community Based Long Term Services and Supports \(CBLTSS\)](#). Additional information about MLTC Plan types is available here: [Managed Long Term Care Pamphlet](#)

- **MAP:** Medicaid Advantage Plus (MAP) is a fully integrated MLTC Medicaid/Medicare Plan. Enrollees are eligible for [Community Oriented Recovery and Empowerment](#) (CORE) services if they have the Recipient Restriction Exception (RR/E) H9 exception code - **check this in ePACES**, under *Medicaid Exceptions*.
- **PACE:** Program of All Inclusive Care for the Elderly (PACE) is a fully integrated MLTC Medicaid/Medicare Plan for individuals aged 55+. Enrollees receive all physical, long-term care and behavioral health services exclusively through a centralized PACE team of professionals.

**IB-Dual:** The Integrated Benefit for Dually Eligible Enrollees Program (IB-Dual) allows duals to remain in Mainstream Managed Care or Health and Recovery Plans. Additional information about IB-Dual is available here: [Dual Eligible New Yorkers](#)

- Through Default Enrollment, individuals enrolled in a Medicaid managed care plan (Mainstream or HARP) with an IB-Dual option are automatically (“default”) enrolled in the Medicare Dual Eligible Special Needs Plan (D-SNP) aligned with their Medicaid managed care plan, if available in their county, when they become newly Medicare eligible.
- Not all Medicaid managed care plans have an aligned Medicare D-SNP or are approved for the Medicare D-SNP default enrollment process.
- Individuals who are not eligible for default enrollment and want to maintain Medicaid managed care enrollment can choose to enroll in an IB-Dual. **See scenarios below.**
- Before making enrollment changes, individuals should check with their current providers to ensure they accept the new Plan. **Check which Plans have their provider(s) in their coverage network on [NYS Provider & Health Plan Look-Up](#).**

## Duals and Medicaid Managed Care Disenrollment

- Medicaid managed care enrollees who are Medicare eligible and not enrolled in a dually eligible plan will be disenrolled to Medicaid FFS.
- They will continue to be covered by comprehensive health care through Medicaid FFS.
- They will **no longer** have access to services which are only available in Medicaid managed care such as [Behavioral Health Home and Community Based Services](#) (BH HCBS) and [Community Oriented Recovery and Empowerment](#) (CORE).
- HIV Special Need Plans do not have an IB-Dual option, enrollees will be disenrolled to Medicaid FFS or enrolled into MLTC once they become Medicare eligible.
- **Reminder:** When an individual has both Medicaid and Medicare coverage, Medicare is the primary payor.

## HARP IB-Duals

Below is a chart of approved HARP IB-Duals as of 1/1/2025. **For a complete list of IB-Duals, up to date changes, and to ensure coverage in the individual's county, refer to: [Dual Eligible New Yorkers \(ny.gov\)](https://www.ny.gov/dual-eligible-new-yorkers).** Select the "+" symbol next to "IB-Dual" and scroll to Plan chart.

Approved HARP IB-Duals as of 1/1/2025 - <a href="https://www.ny.gov/dual-eligible-new-yorkers">Dual Eligible New Yorkers (ny.gov)</a>					
Medicaid HARP	Approved to default enroll members into IB-Dual	Medicare Advantage D-SNP	Medicare website	Medicare Contract (H) Number	Medicare Plan Benefit Package (PBP) Number
Anthem Blue Cross Blue Shield HP (Empire HealthPlus) (833) 713-1080	No	Anthem HealthPlus Full Dual Advantage	<a href="#">Dual Special Needs Plans (D-SNP)   Anthem</a>	Year 2025: H8432	Year 2025: 042
Emblem Health Enhanced Care Plus (Health Insurance Plan of Greater New York) (800) 447-8255	Yes in 2025	EmblemHealth VIP Dual Enhanced	<a href="#">VIP Dual Enhanced (HMO D-SNP) - Bronx, Kings, Queens, and New York 2025   EmblemHealth</a>	H5991	Year 2025: 013
Excellus (Blue Option Plus) (800) 650-4359	Yes	Univera Medicare Dual/ Medicare Blue Dual	<a href="#">Additional Medicare Options   Excellus BlueCross BlueShield (excellusbcbbs.com)</a>	H7524	001/003
Fidelis HealthierLife (888) 343-3547	Yes	Wellcare Fidelis Dual Access	<a href="#">Wellcare By Fidelis Care</a>	H5599	001
HealthFirst Personal Wellness Plan (646) 812-4630	Yes	HealthFirst Life Improvement Plan	<a href="#">NY Life Improvement Plan (HMO D-SNP)   Healthfirst</a>	H3359	Year 2025: 021
MetroPlus Enhanced (800) 303-9626	Yes	MetroPlus Advantage Plan	<a href="#">Medicare Advantage Plan - MetroPlusHealth</a>	H0423	001
Molina Healthcare Plus (800) 223-7242	Yes	Senior Whole Health of New York, Inc	<a href="#">Senior Whole Health of New York   Medicare (molinahealthcare.com)</a>	H5992	009
MVP Harmonious Health Care Plan (844) 946-8002	Yes	MVP Dual Access Complete	<a href="#">MVP DualAccess (HMO D-SNP) Plans   MVP Health Care</a>	H3305	034
UnitedHealthcare Community Plan-Wellness4Me (866) 362-3368	Yes	UHC Dual Complete NY	<a href="#">Dual Eligible Special Needs Plans   UnitedHealthcare Community Plan (uhc.com)</a>	H3387	014

## Dual Enrollee Scenarios

	Dual Scenario	Maintain Medicaid Managed Care Enrollment	Action Steps and Where to Find Help
1.	Individual is enrolled in a HARP or Mainstream Plan and will become Medicare eligible – Newly Dual Eligible	If they are enrolled in a Medicaid Managed Care HARP or Mainstream Plan that participates in the IB-Dual program and has an active default status, they will be automatically enrolled in their Plan's aligned Medicare D-SNP.	No action required where the individual is default enrolled into aligned Medicare D-SNP (IB-Dual program).
2.	Individual is enrolled in a HARP or Mainstream Plan with an IB-Dual option, but their Medicare enrollment is not with the aligned Medicare D-SNP	<p>The individual must be enrolled in the same Plan for both their Medicaid and Medicare</p> <p>The individual can enroll in the IB-Dual Medicare D-SNP that is aligned with their current HARP/ Mainstream</p> <p><b>Or</b></p> <p>Enroll in the HARP/ Mainstream aligned with their Medicare D-SNP</p>	<p>For assistance and more information:</p> <ul style="list-style-type: none"> <li>○ Contact <a href="#">Counseling and Advocacy - Medicare Rights Center</a> 1-800-333-4114</li> <li>○ Contact <a href="#">Health Insurance Information, Counseling, and Assistance   Office for the Aging (ny.gov)</a> (HIICAP) 1-800-701-0501</li> </ul> <p>To update Medicare enrollment:</p> <ul style="list-style-type: none"> <li>○ The enrollee can call the Medicare D-SNP they want to join for assistance</li> <li>○ They can call Medicare directly 1-800-633-4227</li> </ul> <p>To update Medicaid Managed Care enrollment:</p> <ul style="list-style-type: none"> <li>○ Contact <a href="#">New York Medicaid Choice</a> (NYMC) or <a href="#">New York State Of Health</a> (NYSOH) to request HARP enrollment into the IB-Dual aligned with their Medicare D-SNP</li> </ul>
3.	Individual is enrolled in a HARP or Mainstream Plan that does not have an IB-Dual option, and their Medicare Plan is IB-Dual aligned with a different Medicaid Plan	The individual needs to enroll in the HARP/ Mainstream that is IB-Dual aligned with their current Medicare D-SNP	Contact <a href="#">NYMC</a> or <a href="#">NYSOH</a> to request HARP/ Mainstream enrollment into the IB-Dual option aligned with their Medicare D-SNP
4.	Individual is enrolled in a HARP or Mainstream Plan and receiving CBLTSS	<p>If the Individual's Plan has a MAP plan and they are in need of CBLTSS for more than 120 days and otherwise meet criteria, they will be default enrolled into the MAP.</p> <p>If they do not meet criteria for a MAP, they will need to enroll in a MLTC.</p>	<ul style="list-style-type: none"> <li>○ Check available MAP Plans in their area here: <a href="#">Managed Long-Term Care Plan Directory</a></li> <li>○ Contact the MAP they wish to join for enrollment assistance.</li> <li>○ If they do not have an MAP approved for default enrollment in the needed county, and need ongoing access to CBLTSS, they should contact <a href="#">NYMC</a> for assistance.</li> <li>○ For information about MLTC Plans: <a href="#">Managed Long Term Care Pamphlet</a></li> </ul>
5.	Individual has been disenrolled to Medicaid FFS.	For individuals without CBLTSS, they may be able to join IB-Dual if they are in the aligned DSNP.	<ul style="list-style-type: none"> <li>○ Assist the individual in verifying Medicaid and Medicare enrollment.</li> <li>○ For more information about their Medicare, connect the individual to <a href="#">Medicare Rights Center</a></li> </ul>

	<p>Individuals can contact their plan to see if they offer this pathway.</p> <p>For individuals with ongoing CBLTSS needs, they cannot enroll into IB-Dual and may need to go to MLTC.</p>	<p><a href="#">or Health Insurance Information, Counseling and Assistance</a> (HIICAP).</p> <ul style="list-style-type: none"> <li>○ Connect the individual to services covered outside of managed care. <ul style="list-style-type: none"> <li>• <a href="#">Health Home Care Coordination</a> for individuals in need of support to coordinate mental and physical health concerns. <a href="#">Find a Health Home</a></li> <li>• Consider <a href="#">Personalized Recovery Oriented Services (PROS)</a> and/or <a href="#">ACCES-VR</a> (employment supports) for individuals previously engaged in BH HCBS or CORE.</li> <li>• Refer to <a href="#">Mental Health Outpatient Treatment and Rehabilitative Services (MHOTRS)</a> for mental health counseling, medication treatment and peer support services.</li> <li>• <a href="#">Certified Community Behavioral Health Clinics (CCBHCs)</a> where available, provide an array of support services, such as counseling, peer support, and case management. Visit the <a href="#">CCBHC SAMSHA webpage</a>.</li> <li>• Consider contacting <a href="#">Office for Aging</a> for those meeting age criteria.</li> <li>• <a href="#">NY Connects</a> is a resource for locating Long term supports and services in the community</li> </ul> </li> </ul>
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## References and Resources

### Resources for Verifying Enrollment

- **Check Medicaid enrollment:** Refer to [eMedNY Homepage](#); [ePACES-Eligibility Response.pdf](#) ([emedny.org](#))
- **Check Plan code:** [INFORMATION FOR ALL PROVIDERS MANAGED CARE INFORMATION](#) ([emedny.org](#))
- **Check for Medicare D-SNP enrollment:** Refer to the **Third Party Insurance** section and confirm Carrier Code matches the H contract number found in the [IB Dual chart](#)

**ePACES eligibility sections-pay particular attention to areas highlighted**

<b>Medicaid Managed Care:</b>
Plan Name: ABCD
Address:
Phone:
Plan Codes: XX

<b>Medicaid Exceptions:</b>	
Exception Codes	Provider
A1	
A2	
H1	
H9	

<b>Medicare Information:</b>
Other Payer Name: Medicare ABCD
Medicare identifier: XX

<b>Third Party Insurance:</b>
Other Payer Name: Medicare ABCD
Carrier Code: H1234
Other payer Address:
Phone Number:
Policy Number:
Group Number: H1234

## Resources for Assistance

### NY Medicaid Member Resources

- New York's Independent Consumer Advocacy Network (ICAN): 1-844-614-8800 | [ican@cssny.org](mailto:ican@cssny.org)
- Community Health Access to Addiction & Mental Health Care Project (CHAMP): 1-888-614-5400 | [Ombuds@oasas.ny.gov](mailto:Ombuds@oasas.ny.gov)

### Medicaid Enrollment

- [New York State of Health](#) (NYSOH): 1-855-355-5777
- [New York Medicaid Choice](#) (NYMC): 1-800-505-5678/ HARP 1-855-789-4277

### Medicare Resources

- Medicare Hotline: 1-800-633-4227
- [Medicare Rights Center](#): 1-800-333-4114
- [Health Insurance Information, Counseling, and Assistance | Office for the Aging \(ny.gov\)](#) (HIICAP): 1-800-701-0501

### OMH/DOH Assistance

- New York State Office of Mental Health (OMH) managed care mailbox: [OMH-Managed-Care@omh.ny.gov](mailto:OMH-Managed-Care@omh.ny.gov)
- New York State Department of Health (DOH) managed care system mailbox: [mcsys@health.ny.gov](mailto:mcsys@health.ny.gov)