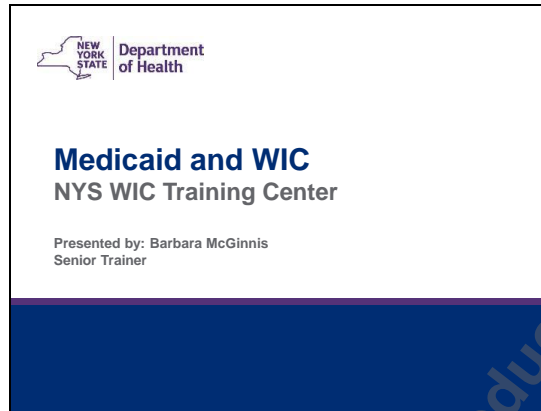


Slide 1



Audio

- Good morning everyone and welcome to today's webinar.
- The topic of the day is regarding the Medicaid program


Source

Graphics

2

### Important Notice

- This GotoWebinar/GotoMeeting service includes a feature that allows audio, and any documents and other materials exchanged or viewed during the session to be recorded
- By joining this session, you automatically consent to such recordings
- Please note that any such recordings may be subject to discovery in the event of litigation

NEW YORK STATE  
Department of Health

#### Audio

- Before we get started with the topic, there are some housekeeping items we need to cover.
- This slide is basically telling you that this training is being recorded and by attending, you agree to the recording.

#### Source

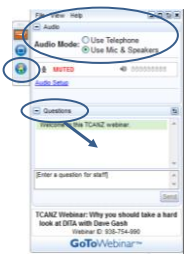
#### Graphics

3

### Logistics

- Typed questions
- Poll Questions
- Raise hand
- Audio
- Tech Difficulties

— 1-888-259-8414



The screenshot shows a GoToWebinar interface. At the top, there are options for 'Audio Mode' with 'Use Telephone' and 'Use Mic & Speakers' selected. Below this, a 'MUTED' status is shown. A 'Questions' section is visible, containing a text input field labeled 'Enter a question for staff' and a 'Send' button. A blue arrow points from the 'Questions' header to the input field. The bottom of the screenshot shows a 'GoToWebinar' logo and a New York State Department of Health logo.

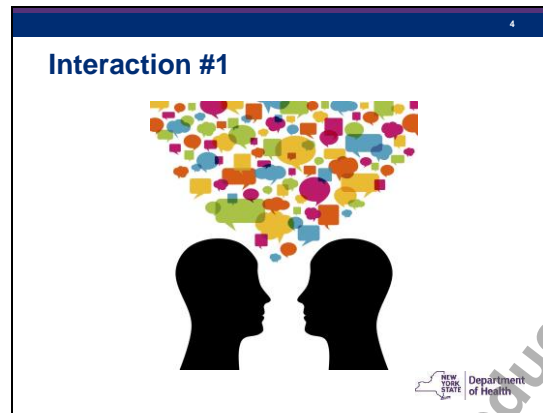
#### Audio

- Some logistic information
- Kelley will introduce Barbara and Michelle at this point then turn it over to Barb to start the presentation.

#### Source

#### Graphics

Slide 4



Poll #1



Audio

- Thinking about your knowledge of Medicaid and eligibility for Medicaid, what would you assess as your level of knowledge?
- Very Little
- Moderate
- Advanced

5

### Training Goal

- To provide WIC staff with a better understanding of the Medicaid program and how it confers eligibility to the WIC Program



#### Audio

- The goal of today's training is to provide WIC staff with a better understanding of the Medicaid program and how and when it can confer eligibility to the WIC Program.

#### Source


#### Graphics

6

### Learning Objectives

As a result of this webinar, WIC staff will be able to:

- Understand Medicaid as an adjunct program for WIC applicants/participants
- Identify which Medicaid Eligibility Verification System (MEVS) responses are acceptable to confer eligibility for the WIC Program
- Provide individuals with information on how they can apply for Medicaid and where to apply
- Identify other state-sponsored health insurance programs available to NYS residents

 NEW YORK STATE Department of Health

#### Audio

As a result of today's webinar, the audience will be able to:

- Have a better understanding of Medicaid as an adjunct program for WIC applicants/participants
- Identify which Medicaid Eligibility Verification System responses are acceptable to confer eligibility for the WIC Program
- Provide individuals with information on how they can apply for and where to apply
- Identify some other state-sponsored health insurance programs available to NYS residents



#### Source

#### Graphics

7

### Interaction #2

- What is the area regarding Medicaid that you feel is confusing or you need more information on?



Chat-in or unmute lines

Audio

What is the area regarding Medicaid that you feel is confusing or you need more information on?



Source

Graphics

8

### Medicaid

- A government-sponsored health insurance program provided to low-income individuals and families who have no medical insurance or inadequate coverage




Property of NYS DOH / May Not be Reproduced or Copied

9

**Medicaid, cont'd.**

- Subject to federal guidelines and program requirements
- States administer Medicaid programs and have flexibility to determine covered populations, covered services, health care delivery models, and methods for paying physicians and hospitals.

 NEW YORK STATE Department of Health

Audio

- Subject to federal standards, meaning the Federal government sets some of the rules of who is eligible and what coverage must be provided.
- States however then administer Medicaid programs and have flexibility to determine covered populations, covered services, health care delivery models, and methods for paying physicians and hospitals.


Source

Graphics

10

**Medicaid, cont'd.**

- A means-tested program, therefore, an individual must meet financial and non-financial requirements to be eligible
- There are varying financial levels and program requirements
- Each financial level is dependent upon the individual's specific circumstances (ex. age, pregnant, disabled)

 NEW YORK STATE Department of Health

Audio

- A means-tested program, therefore, an individual must meet financial requirements to be eligible
- There are varying financial levels and each level is dependent upon the individual's specific circumstances (ex. age, pregnant, disabled)
- No monthly premiums or deductibles, however; certain individuals may have minimal co-pays


Source

Graphics

11

**Medicaid, cont'd.**

- No monthly premiums or deductibles
- Certain individuals may have minimal co-pays for medical services and prescriptions



NEW YORK STATE Department of Health

Audio

- No monthly premiums or deductibles
- Certain individuals may have minimal co-pays for medical services and prescriptions

Source

Graphics

12

**Medicaid, cont'd.**

- Once determined eligible for Medicaid, an individual will receive their coverage through either:
  - Fee-for-Service Medicaid; or
  - Will be enrolled in a Medicaid Managed Care plan
    - Must go to Fee-for-Service or Medicaid Managed Care participating providers for their services to be covered

 NEW YORK STATE Department of Health

Audio

- Once determined eligible for Medicaid, an individual will receive their coverage through either:
  - Fee-For-Service Medicaid; or
  - Will be enrolled in a Medicaid Managed Care plan
    - Must go to Fee-for-Service or Medicaid Managed Care participating providers for their services to be covered


Source

Graphics

13

### Modified Adjusted Gross Income Individuals

- These individuals are considered the Modified Adjusted Gross Income (MAGI) population:
  - Pregnant women;
  - Infants under age 1;
  - Children ages 1 – 18;
  - Parents and caretaker relatives of a child under age 19; and
  - Any other adult, ages 19 – 64, without Medicare

 NEW YORK STATE Department of Health

#### Audio

These individuals are considered the Modified Adjusted Gross Income (MAGI) population:

- Pregnant women;
- Infants under age 1;
- Children ages 1 – 18;
- Parents and caretaker relatives of a child under age 19; and
- Any other adult, ages 19 – 64, without Medicare

#### Source

#### Graphics

14

**Modified Adjusted Gross Income  
Individuals, cont'd.**

- MAGI group will receive their Fee-for-Service and Medicaid Managed Care coverage through NY State of Health



Audio

- Individuals who are part of the Modified Adjusted Gross Income (MAGI) group will receive their FFS and MMC coverage through NY State of Health

Source



Graphics

Stock photo ID:925672792

15

### Applying for Medicaid

- Most MAGI individuals apply for Medicaid at NY State of Health
- Individuals applying on NY State of Health can apply on their own or they can receive applications assistance



Audio

- Most MAGI individuals apply for Medicaid at NY State of Health
- Individuals applying on NY State of Health can apply on their own or they can receive applications assistance


Source

Graphics

16

### Applying for Medicaid, cont'd.

- How to apply at NY State of Health:
  - Online at [www.nystateofhealth.ny.gov](http://www.nystateofhealth.ny.gov); or
  - By calling 1-855-355-5777;
  - Meeting with an In-Person Assistor/Navigator or Certified Application Counselor;
    - More information is available at:  
<https://nystateofhealth.ny.gov/agent/assistsors>
  - Certain Managed Care Organizations



#### Audio



How to apply at NY State of Health:

- Online at [www.nystateofhealth.ny.gov](http://www.nystateofhealth.ny.gov); or
- By calling 1-855-355-5777;
- Meeting with an In-Person Assistor, Navigator or Certified Application Counselor;
- Certain Managed Care Organizations

17

### Applying for Medicaid, cont'd.

- Certain individuals continue to apply for Medicaid at:
  - Human Resources Administration (HRA); or
    - NYC applications
  - Their local Department of Social Services (LDSS)
    - Outside of NYC



#### Audio

- Certain individuals continue to apply for Medicaid at:
  - Human Resources Administration (HRA); or  
NYC applications
  - Their local Department of Social Services (LDSS)  
Outside of NYC

#### Source

#### Graphics



Poll Question #2:

Audio

Most WIC Staff believe that the eligibility for Medicaid and WIC are the same.

Strongly Agree

Agree

Neutral

Disagree

Strongly Disagree

19

### Non-MAGI Individuals

- Individuals who are considered non-MAGI must apply for Medicaid at the LDSS/HRA including those:
  - Who are certified blind or certified disabled;
  - Over age 65, not a parent or caretaker relative of a child under 19



#### Audio

Certain individuals who are considered non-MAGI must apply for Medicaid at the LDSS/HRA including those:

- Who are certified blind or certified disabled;
- Over age 65, not a parent or caretaker relative of a child under 19


#### Source

#### Graphics

20

**Non-MAGI Individuals, cont'd.**

- Individuals who are considered non-MAGI must apply for Medicaid at the LDSS/HRA including, cont'd.:
  - Individuals applying for non-MAGI Medicaid program including:
    - Presumptive Eligibility for Pregnant Women;
    - Excess Income program;
    - The Medicaid Buy-In program for Working People with Disabilities (MBI-WPD); or
    - Waiver programs.

 NEW YORK STATE Department of Health

Audio

Individuals applying for non-MAGI Medicaid program including:

- Presumptive Eligibility for Pregnant Women;
- Excess Income program;
- The Medicaid Buy-In program for Working People with Disabilities (MBI-WPD); or
- Waiver programs.

Source

Graphics

21

### LDSS/HRA Applications

- Non-MAGI individuals or individuals applying for a non-MAGI program must complete and submit an Access NY Health Care application and submit it to LDSS/HRA
  - The Access NY application can be found at:  
[www.health.ny.gov/forms/doh-4220.pdf](http://www.health.ny.gov/forms/doh-4220.pdf)
  - HRA/LDSS locations can be found at:  
[www.health.ny.gov/health\\_care/medicaid/ldss.htm](http://www.health.ny.gov/health_care/medicaid/ldss.htm)



#### Audio

Non-MAGI individuals or individuals applying for a non-MAGI program must complete and submit an Access NY Health Care application and submit it to LDSS/HRA

- The Access NY application can be found at: [www.health.ny.gov/forms/doh-4220.pdf](http://www.health.ny.gov/forms/doh-4220.pdf)
- HRA/LDSS locations can be found at: [www.health.ny.gov/health\\_care/medicaid/ldss.htm](http://www.health.ny.gov/health_care/medicaid/ldss.htm)



#### Source

#### Graphics

22

### Automatically Medicaid Eligible

- Certain individuals are automatically eligible for Medicaid including:
  - Infants born to a mother receiving Medicaid;
  - Foster care children; and
  - Supplemental Security Income (SSI) benefit recipients



#### Audio

Some individuals don't even have to apply because they are automatically eligible for Medicaid. These individuals include:

- Infants born to a mother receiving Medicaid. Foster care children - Any child under the care and custody of the local department of social services commissioner and is in foster care. And individuals who are eligible for Supplemental Security Income (SSI) benefits, are automatically eligible for Medicaid.


#### Source

#### Graphics

23

### Continuous Coverage

- Continuous coverage is a guarantee of Medicaid eligibility regardless of a change in household income
- Once an individual is determined eligible for Medicaid, their coverage will be guaranteed for a specific timeframe depending on their individual circumstances



#### Audio

- Continuous coverage is a guarantee of Medicaid eligibility regardless of a change in household income
- Once an individual is determined eligible for Medicaid, their coverage will be guaranteed for a specific timeframe depending on their individual circumstances
- So it's very possible you have a WIC participant who has a significant amount of income, and they could still be Medicaid eligible.


#### Source

#### Graphics

24

### Continuous Coverage, cont'd.

- Continuous coverage is provided to:
  - Infants born to a mother receiving Medicaid
    - Guaranteed until the end of the month in which the child turns one
  - Individuals under age 26 who were in foster care at age 18 (no income limit)
    - Guaranteed Medicaid until the end of the month in which the individual turns 26

 NEW YORK STATE Department of Health

#### Audio

Continuous coverage is provided to:

- Infants born to a mother receiving Medicaid
  - Will be guaranteed until the end of the month in which the child turns one
- Individuals under age 26 who were in foster care at age 18
  - Guaranteed Medicaid until the end of the month in which the individual turns 26

#### Source

#### Graphics

25

### Continuous Coverage, cont'd.

- Continuous coverage is provided to, cont'd.:
  - MAGI individuals
    - Guaranteed Medicaid coverage for one year from the initial determination or redetermination of eligibility
    - Pregnant women are guaranteed two additional months after the pregnancy has ended



#### Audio

Continuous coverage is provided to, cont'd.:

- MAGI individuals
  - Guaranteed Medicaid coverage for one year from the initial determination or redetermination of eligibility
  - Pregnant women are guaranteed two additional months after the pregnancy has ended

#### Source

#### Graphics

26

### Interaction #4

- What is one myth that you think our WIC participants believe in regards to Medicaid?



Chat-in or unmute lines


Audio

What is one myth that you think our WIC participants believe in regards to Medicaid?

27

### Managed Care

- A health care delivery system organized to manage cost, utilization, and quality of care
- Provides the delivery of Medicaid benefits through a contract with NYS DOH

 NEW YORK STATE Department of Health

#### Audio

- Managed Care is a health care delivery system organized to manage cost, utilization, and quality of care
- Provides the delivery of Medicaid health benefits through a contracted arrangement between NYS DOH and Managed care organizations



#### Source

#### Graphics

28

### Managed Care, cont'd.

- Most individuals who are eligible for Medicaid will be required to enroll in a Managed Care plan unless determined to be exempt or excluded
  - Certain services are carved out of Managed Care plans
    - Ex. Family planning services
  - Fee-for-Service Medicaid will provide any carved out services



#### Audio

Most individuals who are eligible for Medicaid will be required to enroll in a Managed Care plan unless determined to be exempt or excluded

- Certain services are carved out of Managed Care plans
- For example, Family planning services
- Fee-for-Service Medicaid will provide any carved out services


#### Source

#### Graphics

29

**Managed Care, cont'd.**

- All Medicaid eligible participants receive a Common Benefit Identification Card (CBIC)
- Managed Care participants will receive a separate Managed Care card
  - Both cards include the individual's Client Identification Number (CIN)
- Must receive services from providers who participate with the appropriate program
  - Fee-for-Service or Managed Care

 NEW YORK STATE Department of Health

Audio

- Medicaid eligible participants receive a Common Benefit Identification card (CBIC)
- Managed Care participants will receive a separate Managed Care card
  - Both cards include a Client Identification Number (CIN)
- Must receive services from providers who participate with the appropriate program
  - Fee-for-Service or Managed Care


Source

Graphics

30

### Presumptive Eligibility for Pregnant Women

- Provides immediate Medicaid coverage to the pregnant woman, pending a full eligibility determination by HRA/LDSS
- Must have income at or below 223% of the Federal Poverty Level (FPL) based on the household size



The slide features a blue header with the number '30' in the top right corner. Below the header, the title 'Presumptive Eligibility for Pregnant Women' is displayed in bold. Two bullet points follow, detailing the program's benefits and income requirements. At the bottom, there is a small illustration of a house and the New York State Department of Health logo.

#### Audio

- The Presumptive Eligibility for Pregnant Women program is a way of providing immediate Medicaid coverage pending a full eligibility determination
- Must have income at or below 223% of the Federal Poverty Level based on the household size


#### Source

#### Graphics

31

**Presumptive Eligibility for Pregnant Women, cont'd.**

- The pregnant woman attests to information during a screening process with a trained and approved presumptive eligibility provider
- Providers must have a Memorandum of Understanding (MOU) on file with NYS DOH

 NEW YORK STATE Department of Health

Audio

- The pregnant woman attests to information during a screening process with a trained and approved presumptive eligibility provider
- Providers must have a Memorandum of Understanding (MOU) on file with NYS Department of Health



Source

Graphics

32

### Presumptive Eligibility for Pregnant Women, cont'd.

- If the pregnant woman is screened eligible, the screening form and any supporting documentation is sent to the LDSS
- The PE program is administered and coverage is authorized at the LDSS/HRA



#### Audio

If the pregnant woman is screened eligible, the screening form and any supporting documentation is sent to the LDSS

The PE program is administered and coverage is authorized at the LDSS/HRA


#### Source

#### Graphics

33

### **Presumptive Eligibility for Pregnant Women, cont'd.**

- Confers eligibility to the WIC program
- If a pregnant woman presents a presumptive eligibility (PE) letter on the date of certification, eligibility is conferred for the duration of the certification period
  - However, it is her responsibility to notify WIC if her Medicaid does not go through

 NEW YORK STATE Department of Health

#### Audio

- Confers eligibility to the WIC program
- If a pregnant woman presents a presumptive eligibility letter on the date of certification, eligibility is conferred for the duration of the certification period
  - However, it is her responsibility to notify WIC if her Medicaid does not go through

#### Source

Adapted from the WIC Income training.

#### Graphics

34

### Special Rules for Medicaid and Pregnant Women/Minors

- Pregnant women should apply for Medicaid either through a PE provider or directly at NY State of Health before delivery
- Not required, until 60-days post-partum, to provide:
  - Proof of citizenship/immigration status;
  - Proof of their Social Security Number (SSN); or

 NEW YORK STATE Department of Health

#### Audio

- Pregnant women should apply for Medicaid either through a PE provider or directly at NY State of Health before delivery
- Not required, until 60-days post-partum, to provide:
  - Proof of citizenship/immigration status;
  - Proof of their Social Security Number (SSN); or

#### Source:

[https://www.health.ny.gov/health\\_care/medicaid/publications/docs/gis/08ma031.pdf](https://www.health.ny.gov/health_care/medicaid/publications/docs/gis/08ma031.pdf)

#### Graphics

35

**Special Rules for Medicaid and Pregnant Women/Minors, cont'd.**

- No income requirements for pregnant minors under age 21
  - Even if living with parents or married and living with a spouse



 Department of Health

Audio

No income requirements for pregnant women under age 21

- Even if living with parents or married and living with a spouse


Source

Graphics

36

### Medicaid and the Newborn

- Pregnant women should apply for Medicaid either through a PE provider or directly at NY State of Health before delivery
- Must notify NY State of Health or the LDSS/HRA of the infant's birth immediately after delivery
  - Permanent card for the newborn will be issued within 10 days of the notification

 NEW YORK STATE Department of Health

#### Audio

- Pregnant women should apply for Medicaid either through a PE provider or directly at NY State of Health before delivery
- Must notify NY State of Health or the LDSS/HRA of the infant's birth immediately after delivery
  - Permanent card for the newborn will be issued within 10 days of the notification



#### Source

#### Graphics

37

### Medicaid and the Newborn, cont'd.

- WIC staff may use the mother's CIN, for the first 30 days after the birth of the child, to confer eligibility to WIC for the newborn
- Must have the child's own Medicaid card and CIN number at their next WIC recertification appointment



#### Audio

- WIC staff may use the mother's CIN, for the first 30 days after the birth of the child, to confer eligibility to WIC for the newborn
- Must have the child's own Medicaid card and CIN number at their next WIC recertification appointment



#### Source

#### Graphics

38

### Interaction #5

- What are some of the key differences between Medicaid eligibility and WIC eligibility?



Chat-in or unmute lines

Audio

What are some of the key differences between Medicaid eligibility and WIC eligibility?

Source

Graphics

39

**When Medicaid Confers Eligibility to WIC**

Categories	Medicaid	Presumptive Eligibility
Pregnant Woman	Economic Unit	Economic Unit
Infant (under 12 mo's.)	Economic Unit	N/A
Child (1 – under 5)	Individual Only	N/A
Post-partum and Breastfeeding Women	Individual Only	N/A
Non-WIC Economic Unit Member	N/A	N/A

NEW YORK STATE Department of Health

#### Audio

- Explain which programs can confer eligibility and to a WIC participant or an economic unit

#### Source

WIC Program Manual Section 1130 – Income Eligibility and the corresponding Income Eligibility Policy Supplement 1130

#### Graphics

40

### Family Planning Benefit Program

- Commonly referred to as FPBP
- Cannot confer eligibility to the WIC program
- FPBP is a government-sponsored health insurance program with coverage limited to preventing and/or reduce unintended pregnancies



NEW YORK STATE  
Department of Health

#### Audio

- Next we will discuss a program called the Family Planning Benefit Program
- Commonly referred to as FPBP
- Cannot confer eligibility to the WIC program
- FPBP is a government-sponsored health insurance program with coverage limited to preventing and/or reduce unintended pregnancies

#### Source

#### Graphics

41

### Family Planning Benefit Program cont'd

- The intent of the program is to increase access to confidential family planning services
- Provided to both males and females



NEW YORK STATE Department of Health

Audio

- The intent of the program is to increase access to confidential family planning services
- Provided to both males and females


Source

Graphics

42

**Family Planning Benefit Program,  
cont'd.**

- Benefits include:
  - Most FDA approved birth control methods, devices, and supplies;
  - Emergency contraception services and follow-up care;
  - Male and female sterilization;
  - Preconception counseling, preventive screening and family planning options before pregnancy; and
  - Transportation to family planning visits

 NEW YORK STATE Department of Health

Audio

- Some of the services provided by the Family planning program are listed here.

Source

[https://www.health.ny.gov/health\\_care/medicaid/program/longterm/familyplanbenprog.htm](https://www.health.ny.gov/health_care/medicaid/program/longterm/familyplanbenprog.htm)

Graphics

43

### Family Planning Benefit Program, cont'd.

- Individuals can apply for the FPBP through Qualified Providers who have entered into an MOU with NYS DOH
- Applications are administered by NY Health Options
- List of locations can be found at:
  - [https://www.health.ny.gov/community/pregnancy/family\\_planning/program\\_sites.htm](https://www.health.ny.gov/community/pregnancy/family_planning/program_sites.htm)

 Department of Health

#### Audio

- An individual can apply for the FPBP through a qualified provider in their area
- All new Applications are administered by NY Health Options
- A list of locations is available at the web address listed

#### Source


[https://www.health.ny.gov/community/pregnancy/family\\_planning/program\\_sites.htm](https://www.health.ny.gov/community/pregnancy/family_planning/program_sites.htm)

#### Graphics

44

### Family Planning Extension Program

- Commonly referred to as FPEP
- Cannot confer eligibility to the WIC program
- FPEP provides 24 months of family planning coverage (without transportation)
- Provided to post-partum women who received Medicaid while they were pregnant and are no longer eligible



#### Audio

- Commonly referred to as FPEP
- Cannot confer eligibility to the WIC program
- The FP Extension Program provides 24 months of family planning services to women who lose their Medicaid eligibility after they are no longer pregnant.
- Individuals can access their family planning services with their CBIC from any Medicaid enrolled family planning provider

#### Source

#### Graphics

45

**Family Planning Extension Program,  
cont'd.**

- No citizenship/immigration status or income requirement
- Individuals access their family planning services via their CBIC from any Medicaid enrolled family planning provider

 NEW YORK STATE Department of Health

Audio

- No citizenship/immigration status or income requirement
- Individuals access their family planning services via their CBIC from any Medicaid enrolled family planning provider


Source

Graphics

46

### Excess Income Program

- Allows certain individuals to receive Medicaid coverage even if their income is over the appropriate Medicaid level
- Who can participate:
  - Pregnant women;
  - Parents/caretakers of a child under 21;
  - Children under 21;
  - Individuals over age 65, certified blind or certified disabled.

 NEW YORK STATE Department of Health

#### Audio

Next is a program called “Excess Income”

- Allows certain individuals to receive help with their medical bills even if their income is over the Medicaid level
- Individuals who can participate with the Excess Income program include:
  - Pregnant women;
  - Parents/caretakers of a child under 21;
  - Children under 21;
  - Individuals over age 65, certified blind or certified disabled.

#### Source


[https://www.health.ny.gov/health\\_care/medicaid/excess\\_income.htm](https://www.health.ny.gov/health_care/medicaid/excess_income.htm)

#### Graphics

47

### Excess Income Program, cont'd.

- The amount of income over the Medicaid level is called excess income
  - Similar to a deductible
  - Sometimes referred to as “spend down”
- Administered at the LDSS/HRA

 Department of Health

Audio

- The amount of income over the Medicaid level is called excess income
  - Similar to a deductible
  - Sometimes referred to as “spend down”
- Administered at the LDSS/HRA



Source

Graphics

48

### Excess Income Program, cont'd.

- May meet the excess amount to the LDSS/HRA by:
  - Providing medical bill(s); and/or
  - Paying in the excess amount (check, cash or money order)



#### Audio

- If an individual is eligible for Medicaid except for having excess income, they can meet the excess by
  - providing medical bill(s) or
  - paying the excess amount to the LDSS/HRA.
- Once the excess is met, coverage will be authorized and Medicaid will then pay any additional medical bills beyond the excess amount.


#### Source

#### Graphics

49

### Excess Income Program, cont'd.

- Depending on how many months of their excess they meet determines the type of coverage provided:
  - Outpatient coverage
    - Must meet 1 – 5 months of the monthly excess amount
  - Outpatient and Inpatient coverage
    - Must meet 6 consecutive months of the monthly excess amount

 NEW YORK STATE Department of Health

#### Audio


- Depending on how many months of their excess they meet determines the type of coverage provided:
  - Outpatient coverage
    - Must meet 1 – 5 months of the monthly excess amount
  - Outpatient and Inpatient coverage
    - Must meet 6 consecutive months of the monthly excess amount

#### Source


#### Graphics

50

### Excess Income Program, cont'd.



- Individual must receive services from an approved Medicaid provider in order for services to be paid
- Will not be enrolled in a Medicaid Managed Care plan

 Department of Health

#### Audio

- Individual must receive services from an approved Medicaid provider in order for services to be paid
- Will not be enrolled in a Medicaid Managed Care plan

#### Source


#### Graphics

Stock photo ID:138036349

51

### Essential Plan

- Comprehensive health insurance for adults (ages 19-64) within specific income guidelines who are ineligible for Medicaid and do not have access to affordable employer coverage
- Cannot confer eligibility to WIC

 NEW YORK STATE Department of Health

#### Audio

The next program available in is Essential Plan.

- Essential Plan is comprehensive health insurance for adults (ages 19-64) within specific income guidelines who are ineligible for Medicaid and do not have access to affordable employer coverage
- Cannot confer eligibility to WIC

#### Source


<https://info.nystateofhealth.ny.gov/essentialplan>

#### Graphics

52

### Essential Plan cont'd

- Once qualified, applicant can choose an insurance plan that offers Essential Plan
- Essential Plan enrollees will have a unique card
- Free for some and others with slightly higher income will pay a monthly premium of \$20 per person
- No deductible
- Includes free preventive health care



#### Audio

- Once qualified, applicant can choose an insurance plan that offers Essential Plan
- Essential Plan enrollees will have a unique card
- Free for some and others with slightly higher income will pay a monthly premium of \$20 per person
- No deductible
- Includes free preventive health care


#### Source

<https://info.nystateofhealth.ny.gov/essentialplan>

53

**Essential Plan, cont'd.**

- Depending on the amount of countable income, the individual may or may not have out-of-pocket cost sharing expenses (co-pays)
- More information is available at:  
<https://info.nystateofhealth.ny.gov/essentialplan>

 NEW YORK STATE Department of Health

Audio

- Depending on the amount of countable income, the individual may or may not have cost sharing expenses
- More information is available at:  
<https://info.nystateofhealth.ny.gov/essentialplan>


Source

Graphics

54

### Essential Plan Applications

- Applications are provided through NY State of Health:
  - Online at <https://nystateofhealth.ny.gov>
  - Calling 1-855-355-5777; or
  - Meet with an In-Person Assistor
    - Locations information is available at:  
[info.nystateofhealth.ny.gov/ipanavigatorsitelocations](https://info.nystateofhealth.ny.gov/ipanavigatorsitelocations)



#### Audio

Applications for Essential Plan are provided through NY State of Health:

- Online at <https://nystateofhealth.ny.gov>;
- Calling 1-855-355-5777; or
- Meet with an In-Person Assistor
  - Locations information is available at:  
[info.nystateofhealth.ny.gov/ipanavigatorsitelocations](https://info.nystateofhealth.ny.gov/ipanavigatorsitelocations)

#### Source

#### Graphics

55

### Interaction #6

- How would you describe Medicaid to a participant when making a referral?



Chat-in or unmute lines

Audio

How would you describe Medicaid to a participant when making a referral?


Source

Graphics

56

### Child Health Plus (CHP)

- Comprehensive health care coverage for children under age 19 who have no other insurance coverage and are not eligible for Medicaid due to household income or immigration status
- Cannot confer eligibility to WIC



NEW YORK STATE  
Department of Health

Audio

- And the last health insurance program is Child Health Plus
- Comprehensive health care coverage for children under age 19 who are not eligible for Medicaid due to household income or immigration status


Source

Graphics

57

**Child Health Plus, cont'd.**

- No monthly premium for families with income less than 1.6 times the federal poverty level
- Families with slightly higher income pay a premium of \$9 to \$60/month per child
  - Monthly premium amount based on household income and capped at three children

 NEW YORK STATE Department of Health

Audio

- No monthly premium for families with income less than 1.6 times the federal poverty level
- Families with somewhat higher income must pay a premium ranging from \$9 to \$60 per month, per child, depending on income and family size
  - For larger families, the monthly fee is capped at three children

Source

Graphics

58

**Child Health Plus, cont'd.**

- No co-payments or deductibles regardless of income level
- Must receive services from a participating CHP provider
- CHP enrollees must enroll in a Managed Care plan



Audio

- No co-payments or deductibles regardless of income level
- Must receive services from a participating CHP provider
- CHP enrollees must enroll in a Managed Care plan

Source

Graphics

59

### CHP Applications

- Applications for CHP are provided at NY State of Health:
  - Online at <https://nystateofhealth.ny.gov>
  - Calling 1-855-355-5777; or
  - Meet with an In-Person Assistor
    - Locations information is available at:  
[info.nystateofhealth.ny.gov/ipanavigatorsitelocations](https://info.nystateofhealth.ny.gov/ipanavigatorsitelocations)



#### Audio

- Applications for CHP are provided at NY State of Health:
  - Online at <https://nystateofhealth.ny.gov>;
  - Calling 1-855-355-5777; or
  - Meet with an In-Person Assistor
    - Locations information is available at:  
[info.nystateofhealth.ny.gov/ipanavigatorsitelocations](https://info.nystateofhealth.ny.gov/ipanavigatorsitelocations)

#### Source


#### Graphics

Stock photo ID:1053499632

60

### Common Benefit Identification Card (CBIC)

- The CBIC is the vehicle through which eligible individuals access various governmental benefit programs, such as:
  - Supplemental Nutrition Assistance Program (SNAP)
  - Temporary Assistance for Needy Families (TANF)
  - Medicaid



#### Audio

- The CBIC is the vehicle through which eligible individuals access various governmental benefit programs, such as:
  - Supplemental Nutrition Assistance Program (SNAP)
  - Temporary Assistance for Needy Families (TANF)
  - Medicaid


#### Source

#### Graphics

61

### Common Benefit Identification Card, cont'd.

- All Medicaid participants will receive a CBIC card with a Client Identification Number (CIN)



The image shows a sample of a New York State Common Benefit Identification Card (CBIC). The card is white with a blue header and footer. The header includes the date printed (10/21/2014 02:35:03 PM) and the New York State logo. The card contains several fields: ID Number (0000000000), Card Number (000000 0000 0000 000 00), Date (00/00/0000), Last Name (LSTN), First Name (FRST), Signature (Handwritten), and Photo (Placeholder). The footer includes the New York State logo and the text 'Department of Health'.

#### Audio

- All Medicaid participants will receive a CBIC card with a Client Identification Number (CIN)
- This is an example of a CBIC card


#### Source

#### Graphics

62

**Common Benefit Identification Card,**  
cont'd.

- The CIN from the CBIC card is used by participating medical care providers and/or pharmacies for the purpose of verifying coverage and to obtain medical services and prescriptions
- The CIN is what is used by WIC staff to verify Medicaid eligibility via the Medicaid Eligibly Verification System (MEVS)

 NEW YORK STATE Department of Health

Audio

- The CIN from the CBIC card is used by participating medical care providers and/or pharmacies for the purpose of verifying coverage and to obtain medical services and prescriptions
- The CIN is what is used by WIC staff to verify Medicaid eligibility via the Medicaid Eligibly Verification System (MEVS)


Source

Graphics

63

**Common Benefit Identification Card,  
cont'd.**

- If the WIC participant cannot present their CBIC card but can provide the CIN, or the CIN is available in the participant's WIC record, staff can use the number to verify eligibility

 NEW YORK STATE Department of Health

Audio

- If the WIC participant cannot present their CBIC card but can provide the CIN, or the CIN is available in the participant's WIC record, staff can use the number to verify eligibility

Source



WPM #1130

Graphics

64

### Medicaid Eligibility Verification System Methods

- Phone System
  - 1-800-997-1111
  - Requires a touch-tone telephone
  - The provider is prompted to enter information via numbers, asterisk and pound keys



#### Audio

Agencies can verify eligibility a few different ways. This first option is by using the Phone System.

- Staff can call the 800 number listed
- If using the phone system, this requires a touch-tone telephone
- The provider is prompted to enter information via numbers, asterisk and pound keys



#### Source

#### Graphics

65

### Medicaid Eligibility Verification System Methods, cont'd.

- ePACES
  - Requires a computer with internet connection
  - Information is entered into the online system for verification



#### Audio

You can also verify Medicaid eligibility via the computer.

- This is through ePaces
- If using ePaces, this requires a computer with internet connection
- Information is entered into the online system for verification


#### Source

#### Graphics

66

### **MEVS Responses Acceptable to Confer Eligibility to WIC**

- Medicaid Eligible (MA Eligible)
  - Means they are receiving their coverage through Fee-for-Service
- Eligible PCP (pre-paid capitation program)
  - Means they are enrolled in a Managed Care plan
- Medicaid Spenddown
  - Means they are participating in the Excess Income program

 NEW YORK STATE Department of Health

#### Audio

- Medicaid Eligible (MA Eligible)
  - Means they are receiving their coverage through Fee-for-Service
- Eligible PCP (pre-paid capitation program)
  - Means they are enrolled in a Managed Care plan
- Medicaid Spenddown
  - Means they are participating in the Excess Income program


#### Source

#### Graphics

67

**MEVS Responses Not Acceptable to Confer Eligibility to WIC**

- Eligible Capitation Guarantee
- Eligible Only Family Planning Services
- Essential Plan – Family Planning Benefit and Non-Emergency Transportation
- Emergency Services Only
- Medicare Coinsurance and Deductible Only

 NEW YORK STATE Department of Health

Audio

- Explanation of responses that cannot confer eligibility.
- Eligible Capitation Guarantee
- Eligible Only Family Planning Services
- Essential Plan – Family Planning Benefit and Non-Emergency Transportation
- Emergency Services Only
- Medicare Coinsurance and Deductible Only



Source

Graphics

68

### Interaction #7

- What is a significant piece of information that you learned today?



Chat-in or unmute lines

Audio

What is a significant piece of information that you learned today?


Source

Graphics

69

### Summary

- Today we discussed...
  - Medicaid as an adjunct program that confers eligibility for WIC Program
  - MEVS responses acceptable to confer eligibility to WIC
  - Special rules for pregnant women
  - How to apply for Medicaid
  - Individuals who are automatically eligible for Medicaid



### Summarize the training

Today we discussed...

- Medicaid as an adjunct program that confers eligibility for WIC Program
- MEVS responses acceptable to confer eligibility to WIC
- Special rules for pregnant women
- How to apply for Medicaid
- Individuals who are automatically eligible for Medicaid



### Source

### Graphics

70

### Interaction #8

- Please share with your colleagues how you will make sure your entire team has a better knowledge base about Medicaid



Chat-in or unmute lines

#### Audio

Please share with your colleagues how you will make sure your entire team has a better knowledge base about Medicaid.

#### Source

#### Graphics

Slide 71



Audio  
Questions?

Source

Graphics

Property of NYS DOH / May Not be Reproduced or Copied