

NEW JERSEY MEDICAID MANAGED CARE: MANDATORY ENROLLMENT

By: Valerie A. Powers Smith, Esq.

The State of New Jersey has recently announced that they are going to *phase in* the mandatory HMO enrollment of Medicaid beneficiaries who are currently in the fee-for-service system. These are the current plans:

- 41,000 Medicaid beneficiaries will receive a letter soon, informing them that they are required to enroll in a Medicaid HMO, and if they don't choose by **June 1st**, they will be **auto-assigned for July 1, 2011**. Although an exact breakdown was not provided, the first group of mandatory enrollees will be DYFS kids and the ABD (aged, blind and disabled) individuals who do not have Medicare and are not in a Medicaid waiver. The "target date" for the Medicaid letters to be mailed to the 41,000 individuals was **April 15th**.
- Those who are "dually eligible" – that is, people who receive both Medicaid and Medicare – and people who have a Medicaid waiver – *including the Community Care Waiver (CCW)* – will not be required to enroll in a Medicaid HMO until the Fall of 2011, but the exact date has not been finalized.
- **Phase 1:** this group is mandatory enrollees, which includes DYFS children and the ABD (aged, blind and disabled) individuals who do not have Medicare and are not in a Medicaid waiver. Note, however, people with developmental disabilities, who are Medicaid-only, and who are enrolled in the New Jersey Division of Developmental Disabilities' Community Care Waiver (CCW) are included in Phase 1. Letters to this group will be mailed soon and will advise beneficiaries that they **must choose a Medicaid HMO by June 10, 2011 and; if they do not choose, they will be auto-assigned for July 1, 2011.**
- **Phase 2** (enrollment date is 9/15/11; effective date 10/1/11): this group of mandatory enrollees includes the dual eligibles and Medicaid-only beneficiaries who have a Medicaid waiver other than the CCW. Medicaid beneficiaries who receive their benefits under a Medicaid Waiver *other than the CCW* will be required to enroll in Phase 2. The applicable Waiver Programs are:
 - > AIDS Community Care Alternatives Program (ACCAP)
 - > Community Resources for People with Disabilities (CRPD)
 - > Global Options for Long-Term Care (GO)
 - > Traumatic Brain Injury (TBI)

In the past, Medicaid had an HMO exemption policy for people with disabilities whose health care needs were being met in the Medicaid fee-for-service system. However, the current Medicaid plan is that there will not be any exemptions for anyone. The Medicaid-only people with disabilities who previously had an exemption will be enrolling in Phase 1.

Anyone who has not selected a Medicaid HMO by the deadline date will be automatically enrolled and the State will randomly assigned the individual to one of the Medicaid HMOs. An individual has 90 days after the auto-enrollment date to change to a different HMO should the same be necessary. After

90-days, however, an individual will be required to remain in the HMO until the Open Enrollment period -- October 1 to November 15. That being said, a Medicaid HMO beneficiary is able to change to another HMO for “good cause” at any time.

The following insurance companies provide Medicaid Managed Care services in the following counties:

- **Amerigroup** (1-800-600-4441) - Serving all counties except Salem
- **Healthfirst NJ** (1-888-464-4365) - Serving: Bergen, Essex, Hudson, Mercer, Middlesex, Morris, Passaic, Somerset, Sussex and Union
- **Horizon NJ Health** (1-877-765-4325) - Serving all counties
- **United Healthcare Community Plan** (1-800-941-4647) - Serving all counties

For more information, visit the New Jersey Division of Medical Assistance and Health Services website at: <http://www.state.nj.us/humanservices/dmahs/home/index.html>.

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