

STATE OF NEW YORK

5485--A

Cal. No. 1107

2019-2020 Regular Sessions

IN SENATE

May 2, 2019

Introduced by Sen. RIVERA -- read twice and ordered printed, and when printed to be committed to the Committee on Health -- reported favorably from said committee, ordered to first and second report, ordered to a third reading, amended and ordered reprinted, retaining its place in the order of third reading

AN ACT to amend the public health law and the social services law, in relation to automatic enrollment and recertification simplification for Medicaid eligible recipients

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Paragraph (b) of subdivision 7 of section 4403-f of the
2 public health law is amended by adding a new subparagraph (iii) to read
3 as follows:

4 (iii) Where a person determined eligible for Medicaid ("Medicaid
5 recipient") has been determined by the commissioner or his or her desig-
6 nee to require community-based long term care services for more than a
7 continuous period of one hundred twenty days, and the Medicaid recipient
8 has not selected and enrolled in a managed long term care plan prior to
9 any expiration date of such determination of need for long term care,
10 after being provided with information to make an informed choice, the
11 commissioner shall assign the recipient to a managed long term care
12 plan, taking into account consistency with any prior community-based
13 direct care workers having recently served the recipient, quality
14 performance criteria, capacity, and geographic accessibility. The
15 commissioner may assign participants pursuant to such criteria on a
16 weighted basis. A recipient assigned to a managed long term care plan
17 under this subparagraph shall be deemed to have been determined to be in
18 need of long term care services for more than a continuous period of one
19 hundred twenty days and eligible to be enrolled in a managed long term
20 care plan.

EXPLANATION--Matter in italics (underscored) is new; matter in brackets [-] is old law to be omitted.

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1 § 2. Paragraph (b) of subdivision 2 of section 366-a of the social
2 services law, as added by section 51 of part A of chapter 1 of the laws
3 of 2002, is amended to read as follows:

4 (b) Notwithstanding the provisions of paragraph (a) of this subdivi-
5 sion, an applicant or recipient may attest to the amount of his or her
6 accumulated resources, unless such applicant or recipient is seeking
7 medical assistance payment for long term care services for the first
8 time. A recipient who has already provided documentation of resources
9 may attest to the amount of accumulated resources if it has remained the
10 same or is less than the amount originally documented. For purposes of
11 this paragraph, long term care services shall mean care, treatment,
12 maintenance, and services described in paragraph (b) of subdivision [±]
13 one of section three hundred sixty-seven-f of this title, with the
14 exception of short term rehabilitation, as defined by the commissioner
15 of health.

16 § 3. Paragraph (d) of subdivision 5 of section 366-a of the social
17 services law, as amended by section 12 of part D of chapter 56 of the
18 laws of 2013, is relettered paragraph (e) and three new paragraphs (f),
19 (g) and (h) are added to read as follows:

20 (f) Notwithstanding paragraph (b) of subdivision two of this section
21 and paragraphs (a), (b), (c) and (d) of this subdivision, the following
22 recipients will be recertified automatically, unless there has been a
23 finding of lack of eligibility for Medicaid:

24 (i) enrollees in Medicaid managed long term care plans as defined in
25 section forty-four hundred three-f of the public health law;

26 (ii) enrollees in Medicaid managed care plans as defined in section
27 three hundred sixty-four-j of this title who receive personal care
28 services pursuant to paragraph (e) of subdivision two of section three
29 hundred sixty-five-a of this title or consumer directed personal assist-
30 ance services pursuant to section three hundred sixty-five-f of this
31 title;

32 (iii) enrollees receiving Medicaid in the Aged, Blind and Disabled
33 category who receive fixed income from the Social Security Adminis-
34 tration (SSA); and

35 (iv) Medicare Savings Program (MSP) recipients who have a fixed income
36 from the Social Security Administration (SSA).

37 (g) Nothing in paragraph (e) of this subdivision should be construed
38 to alter a Medicaid recipient's obligation to inform the public welfare
39 district of changes in income or other factors that might impact eligi-
40 bility pursuant to subdivision four of this section.

41 (h) Upon a finding of lack of eligibility, recipients identified in
42 paragraph (e) of this subdivision will be entitled to notice and hearing
43 rights as provided in section twenty-two of this chapter.

44 § 4. This act shall take effect on the one hundred eightieth day after
45 it shall have become a law; provided that the amendments to paragraph
46 (b) of subdivision 7 of section 4403-f of the public health law made by
47 section one of this act shall be subject to the expiration and reversion
48 of such paragraph and shall expire and be deemed repealed therewith and
49 provided further that such amendments shall not affect the repeal of
50 such section and shall expire and be deemed repealed therewith. Effec-
51 tive immediately, the commissioner of health shall make regulations and
52 take other actions reasonably necessary to implement this act on that
53 date.