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Medicaid Managed Care: Basic Facts

WHAT IS MEDICAID MANAGED CARE?

Medicaid Managed Care is a program in which recipients of Medicaid receive their medical care from a managed care health plan. When you enroll in a managed care health plan, you choose a doctor to be your primary care physician. This doctor will then refer you to other doctors and specialists as you need them. When you're enrolled in a managed care health plan, generally, you must receive all medical care from providers within the managed care network. Medicaid Managed Care differs from "fee-for-service" Medicaid in that "fee-for-service" recipients can go to any doctor that takes Medicaid. However, a Medicaid managed care health plan entitles you to the same benefits as those received from Medicaid fee-for-service.

DO I HAVE TO JOIN A MEDICAID MANAGED CARE HEALTH PLAN IF I RECEIVE MEDICAID?

Most Medicaid recipients must join a managed care health plan unless he/she is exempt or excluded from enrollment. If a person is "exempt" it means he/she has the option of whether or not to enroll in a managed care health plan. If a person is "excluded" it means he/she cannot enroll in a plan.

WHO IS EXCLUDED FROM MEDICAID MANAGED CARE?

Examples of members who cannot enroll in a Medicaid Managed Care Plan include:

- Individuals who receive both Medicaid and Medicare;
- Individuals who are Medicaid "spend down" or "excess income" recipients; and
- Individuals who are expected to be Medicaid eligible for less than 6 months (except for pregnant women).

WHO HAS AN EXEMPTION FROM MEDICAID MANAGED CARE?

Examples of members who are "exempt" from enrolling in a Medicaid Managed Care Plan include:

- Native Americans,
- Residents of Alcohol/Substance Abuse Long Term Residential Treatment Programs;
- Individuals with chronic medical conditions who have been actively treated for at least six months by a specialist who is not a network provider for any Medicaid managed care health plan in the service area. This exemption is limited to 6 months; and
- Participants in certain Medicaid Waiver Programs.

WHAT DOES "NEW YORK MEDICAID CHOICE" DO?

New York Medicaid Choice, also known as Maximus, is a program that New York State has contracted with to enroll people in Medicaid Managed Care. New York Medicaid Choice can enroll you in a managed care health plan, advise you about health plan options and answer questions, process requests for managed care exemptions or transfers to other managed care plans, and take complaints. Its toll-free phone number is 800-505-5678. You can find information about Medicaid Managed Care and New York Medicaid CHOICE at <https://www.nymedicaidchoice.com>.

WHO CAN I CONTACT IF I HAVE QUESTIONS?

You may call MFY Legal Services, Inc.'s Government Benefits Project at 212-417-3732 on Mondays from 10:00 a.m. to 12:00 p.m. If you are a mental health consumer you may call MFY's Mental Health Law Project at 212-417-3830 on Mondays, Tuesdays, and Thursdays from 10:00 a.m. to 5:00 p.m.

DISCLAIMER: This fact sheet gives general information for NYC residents; it is NOT legal advice.