

Section 1- MA changed to Medicaid and/or Child Health Plus language added

S32/Y0013, F82/U0138, F83/U0142, U53/X0222, E44/X0064, E45/X0065, E49/X0066,
E55/X0060, E56/X0061, E68/X0067, U91/C0226

**Section 2- Over Resources and Over Income and Resources Messages removed and
MA changed to Medicaid**

U16/C0144, U28/C0249

Section 3- Miscellaneous Language changes

E0007, E0008, E0025, E0030

Section 1- MA changed to Medicaid and/or Child Health Plus language added

(Child Health Plus paragraph reads) “There is another free or no cost health insurance program for children under age 19 who are ineligible for Medicaid, called Child Health Plus (CHPlus). One of the health plans that participates in CHPlus will contact you once your child’s case has closed to ask if you would like to enroll your child(ren) in this program. To avoid a break in coverage, please call the CHPlus hotline at 1-800-698-4543 immediately to apply.”

Opening

Reason Code	Paragraph #	Definition	Case Type
S32	Y0013	Accept MBI-WPD, No Premium Payment #	20

Undercare

Reason Code	Paragraph #	Definition	Case Type
*F82	U0138	Child 10-18, Medicaid to FPBP Due to Excess Income #	20, 24
*F83	U0142	Child 10-18, Medicaid to FPBP Due to Excess Income, 60 Days Post-Partum #	20
U53	X0222	Medicaid with Spenddown to MBI-WPD #	20

Undercare/Discontinuance

Reason Code	Paragraph #	Definition	Case Type
*E44	X0064	Child Turning 6, Excess Income, Spenddown Not Met # D	20, 24
*E45	X0065	Child Turning 6, Excess Income and Resources, Spenddown Not Met # D	20, 24

Undercare/Discontinuance con't

Reason Code	Paragraph #	Definition	Case Type
*E49	X0066	Child Turning 1, Excess Income, Spenddown Not Met # D	20, 24
*E55	X0060	Child 1-5, Excess Income, Spenddown Not Met # D	20, 24
*E56	X0061	Child 1-5, Excess Income and Resources, Spenddown Not Met # D	20, 24
*E68	X0067	Child Turning 1, Excess Income and Resources, Spenddown Not Met # D	20, 24
U91	C0226	Child 6-18, Discontinue Medicaid Due to Excess Income or Income and Resources, FPBP Ineligible Due to Excess Income, Eligible but Declines or Age Ineligible # D	20, 24

Section 2- Over Resources and Over Income and Resources Messages removed and MA changed to Medicaid

Undercare/Discontinuance

Reason Code	Paragraph #	Definition	Case Type
U16	C0144	Discontinue MBI-WPD, Medical Improvement Group, Not Working 40 Hrs, Not Working at Federal Minimum Wage, Medicaid Ineligible Due to Excess Income, FHP Ineligible Due to Excess Income, Equivalent Health Insurance or Public Employee, S/CC # D	20
U28	C0249	Discontinue MBI-WPD Due to No Longer Working, Medicaid Ineligible Due to Excess Income, Spenddown Not Met, FHP Ineligible Due to Excess Income, Equivalent Health Insurance or Public Employee # D	20

Section 3 - Miscellaneous Language changes

Paragraph #	Definition
E0007	<i>Explanation of the Excess Income program for Non-immigrant/Undocumented Alien Emergency Only-</i> “Immigrant” changed to “Alien”, “Medical Assistance” changed to “Medicaid”.
E0008	<i>Explanation of the Excess Resource Program for Non-immigrant/Undocumented Alien Emergency Only-</i> “Immigrant” changed to “Alien” “Medical Assistance” changed to “Medicaid”.
E0025	<i>Explanation of CBIC Card (acceptances)</i> Language added to paragraph reads- “You must use your New York State Benefit Identification Card for medical services. If you are enrolled in a Managed Care Health Plan, you will use your health plan card for plan covered services. You must use your New York State Benefit Identification Card for pharmacy and other services not covered by your health plan.”..
E0030	<i>Explanation of the MBI-WPD Program</i> <ul style="list-style-type: none">• “Medical Assistance” changed to “Medicaid”,• Under title “To Qualify for the MBI-WPD program”, bullet “Be engaged in work activity for which all applicable State and Federal income and payroll taxes are paid” now reads “Be Engaged in work activity for which you receive financial Compensation.”• Under title Premium Payments, the last sentence in the first paragraph “you will have to pay a \$25 monthly premium for each MBI-WPD recipient.” Now reads “you will have to pay a monthly premium for Medicaid coverage.”