

**Primary DOH Contact**  
**Local District Support Unit (518) 474-8887**

**CNS Changes**

**Section I:** Revision and/or addition of Upstate CNS Notices, renewals & insert and attachments notice due to FHP program ending.

**Section I:** Revision of Upstate CNS Notices notice due to FHP program ending  
\*\* These changes became effective in January 2015

The Family Health Plus (FHP) program has been discontinued effective January 1, 2015 as a result of the passage of the Affordable Care Act (ACA). Upstate notices have been revised, eliminated or new notices have been created due to this change.

**Eliminated notice reason codes:**

The following notices and /or renewals are being eliminated due to they either reference FHP eligibility and/or based on pre-ACA eligibility rules, or no-longer reflects current policy or has already been replaced by new Magi-Like reason code:

<b>Reason Code</b>	<b>Paragraph #</b>	<b>Description</b>
DD5	C0362	Discontinue FHP/FHP-PAP due to excess income, FPBP ineligible due to excess income or FPBP eligible, but declined.
D66	U0233	FPBP to FPEP due to income exceeding 200% FPL
E49	X0066	Discontinue MA, child turning 1, excess income, spenddown not met.
E68	X0067	Discontinue MA, child turning 1, excess income and resources, spenddown not met.
U03	C0133	Discontinue MBI-WPD due to no longer meets the requirements for MBI- WPD Medical Improvement Group. MA ineligible due to over income, FHP ineligible due to over income, equivalent insurance or federal employee.
U06	C0142	Discontinue MBI-WPD due to did not submit proof that they are working at least 40 hours per month or are earning at least the Federally required minimum wage. MA ineligible due to over income, ineligible due to over income, equivalent insurance or federal employee.
U07	C0143	Discontinue MBI-WPD due to did not submit proof that they are working at least 40 hours per month or are earning at least the Federally required minimum wage. MA ineligible due to over income, ineligible due to over income, equivalent insurance or federal employee.

<b>Reason Code</b>	<b>Paragraph #</b>	<b>Description</b>
U08	C0131	Discontinue MBI-WPD due to no longer meets the requirements for MBI-WPD Medical Improvement Group. MA ineligible due to over income, FHP ineligible due to over income, equivalent insurance or federal employee.
U09	C0132	Discontinue MBI-WPD due to no longer meets the requirements for MBI-WPD Medical Improvement Group. MA ineligible due to over income, FHP ineligible due to over income, equivalent insurance or federal employee.
U16	C0144	Discontinue MBI-WPD due to did not submit proof that they are working at least 40 hours per month or are earning at least the Federally required minimum wage. MA ineligible due to over income, FHP ineligible due to over income, equivalent insurance or federal employee.
U65	C0006	Discontinue MA – not a resident of district (MA extension).
U72	C0136	Discontinue MA due to excess income due to COLA.
U91	C0226	Discontinue MA, child/SSI-R child 1-18, MA ineligible due to excess income and/or resources, FPBP ineligible due to excess income or FPBP eligible but declines.
V39	C0206	Discontinue FHP due to equivalent insurance or federal employee.
X83	X0205	Discontinue FHP, turning 65, MA ineligible due to excess income.
X84	X0206	Discontinue FHP, turning 65, MA ineligible due to excess resources.
X85	X0207	Discontinue FHP, turning 65, MA ineligible due to excess income and Resources.
Z34	R0003	MA Recert SSI Mail In Community Case
Z63	R8203	Renewal reminder

**New notice reason codes:**

The following MBI-WPD notice reason codes, U06, U07, U16, U08, U09 and U03, will be replaced with two new notices due to they are directed to pre-ACA eligibility categories, include FHP references, inaccurate citations and pull incorrect MBL data elements:

<u>Reason Code</u>	<u>Paragraph #</u>	<u>Description</u>
U98	C0352	Discontinue MBI-WPD due to no longer meets the requirements for MBI-WPD Medical Improvement Group. Ineligible for MA due to over MAGI income limit.
U99	C0353	Discontinue MBI-WPD due to did not submit proof that they are working at least 40 hours per month or are earning at least the Federally required minimum wage. MA ineligible due to over MAGI income limit.

**Language revisions:**

The following Upstate notices, renewals and language insert & attachments have been revised to remove any FHP references and/or pull MAGI-like MBL data elements, revise outdated citations and State statutes.

**\*\* Please note, the Reason Code mnemonics for the revised notices which appear when the notice is created via the Client Notice Subsystem and on WMS transaction history screens, will continue to include the letters “FHP”. Revision of the mnemonic code will be addressed in a future migration.**

<u>Reason Code</u>	<u>Paragraph #</u>	<u>Description</u>
C04	C0446	Discontinue TMA End 12 months
C05	U0001	Continue MA Unchanged
C12	U0156	Add FPBP Person(s) to MA case
C15	U0059	Continue FPBP Unchanged
C20	U0157	Add Person(s) to FPBP case
C52	U0206	Coverage Restored: Suspended 21-64 Year Old in Error, Individual Not Admitted to a Psychiatric Center (Upstate)
C53	C0282	Discontinue MA/FPBP, Incarceration Out-of-State
C54	U0205	Suspend MA Coverage 21-64 Year Old Admitted to a Psychiatric Center (Upstate)
C55	U0173	Upstate Suspend Coverage for Inmate of NYS or Local Correctional Facility
C56	U0176	Reopening: Case Suspended as Incarcerated in Error (Upstate)

<b>Reason Code</b>	<b>Paragraph #</b>	<b>Description</b>
C65	C0197	Discontinue MA/FPBP/MSP, Not a Resident of District (County to County Move- Upstate to NYC/Upstate), Comment "County A" letter
C69	C0292	Discontinue MA Incarcerated Individual Released to Custody of USIC
C85	C0320	Discontinue MA, Individual Discharged from a Psychiatric Center to Another State's Law Enforcement
C86	C0319	Discontinue MA, Individual Discharged from a Psych Center to Custody of USICE
C87	C0314	Discontinue MA, Discharged to Psych Center Out-of-State
C88	C0300	Discontinue MA/FPBP, Fail to Provide Proof of Citizenship Identity
C96	C0322	Discontinue MA, Individual Discharged from a Psych Center to the Custody of the Fed Bureau of Prisons
CC2	U0183	Continue Coverage Unchanged Pending Decision (For Enrollment Center use only)
D15	C0328	Individual in the FPBP PE Period, Deny Ongoing FPBP Coverage Due Failure to Document (Closing)
D61	C0332	Medicaid to Family Planning Extension Program, Non-Immigrant/ Undocumented Immigrant 60 days Post-Partum
D64	C0335	Woman at 60 days Post-Partum to Family Planning Extension Program Due to Failure to Provide Documentation
D65	C0336	Woman at 60 Days Post-Partum to Family Planning Extension Program Due to Failure to Return Renewal
E09	C0126	Discontinue MA, Photo ID Refusal
E60	C0007	Discontinue MA, Unable to Locate
E63	C0004	Discontinue MA, Not a State Resident
E79	C0001	Discontinue MA, Not Provided in Current Living Arrangement
E85	U0060	Deletion from Case Moved Out of Household
E90	C0026	Discontinue MA, Client Request

<b>Reason Code</b>	<b>Paragraph #</b>	<b>Description</b>
E95	C0027	Discontinue MA, Died
E98	N0012	Discontinue MA, Opened in Error Infant
F10	C0195	Discontinue MA/RMA, Failed to Return Renewal Form
F12	C0012	Discontinue MA, Fail to Apply for SSA
H30	C0033	Discontinue TMA, No Dependent child under 21
S07	X0025	Medicaid Level To Excess Income Due To COLA Increase
S10	X0011	Change In Figures Used To Calculate Exc Inc Amount
S63	C0248	Discontinue MA, Failure to Provide Info to Clear Up Discrepancy
T06	S0007	Request For Proof Of Correct SSN Recipient
T07	S0009	Request For Proof Of Correct SSN Applicant
U14	C0261	Discontinue FPBP, Fail to Return Renewal
U18	C0188	Discontinue MBI-WPD, Excess income and/or resources
U20	C0063	Discontinue MA/RMA/FPBP – Failed to provide verification of factors which affect eligibility, did not state unable to get information
U21	C0065	Discontinue MA/RMA/FPBP – Failed to provide verification of factors which affect eligibility, Unable to get information, but did not provide a good reason
U28	C0249	Discontinue MBI-WPD, No longer working excess income, SD not met
U29	U0003	MBI-WPD to MA Exc Inc SD Not Met No Longer Working
U30	U0154	MBI-WPD to MA, Exc Inc Non-Financial Reasons, SD Not Met
U66	C0070	Discontinue MA/FPBP, currently in receipt of assistance
U77	C0140	Discontinue MA/FPBP, concurrent benefits intrastate no aid continuing
U78	C0141	Discontinue MAFPBP, already receiving benefits in another State (Inter-state), aid continuing
V13	C0015	Discontinue MA, Fail to utilize benefits

<b>Reason Code</b>	<b>Paragraph #</b>	<b>Description</b>
V17	C0050	Discontinue MA, Incorrect-Fraudulent SSN
V30	C0008	Discontinue MA, Fail To Comply With IV-D Req
V31	C0014	Discontinue MA, Fail to Provide SSN
V38	C0072	Discontinue MA, Fail to contact agency
V98	C0325	Discontinue MA, Pregnant Woman in PE Period Deny Medicaid Due to Failure to Document (Closing)
X23	C0365	Discontinue MA, Attestor Fails to Provide Amount of Income and or Resources at Renewal
X28	C0274	Discontinue MA, end of RMA, excess income
X80	X0208	Medicaid to Spenddown Due to Excess Income

**Renewals / Inserts & Attachments**

<b><u>Reason Code</u></b>	<b><u>Paragraph #</u></b>	<b><u>Description</u></b>
	R8313	Terms Rights and Responsibilities
	R9001	Documentation Checklist for Renewal
	S0033	Notification that eligibility may be determined via the Health Exchange
Z48	R0033	Renewal Letter for FPBP-Only
Z49	R0044	EC renewal mail-in or phone-in cover Letter - General population
Z49	R0045	NYHO Cover Letter for FPBP Renewal (Mail-in or Phone-in)
Z61/Z85	R8201	Renewal cover letter - General population
Z62/Z86	R8202	Renewal cover letter for SSI-R
Z61, Z85, Z62, Z86, Z49	R8301	Renewal question 2 Name-DOB-SSN
Z61, Z85, Z62, Z86, Z49	R8304	Renewal question 4 Pregnancy
Z61, Z85, Z62, Z86, Z49	R8309	Renewal question 5 Health Ins