

Recipients to be Enrolled into Managed Care upon Approval of Medicaid Eligibility

As of April 17, 2017, the Division of Health Care Financing and Policy (DHCFP) has implemented the second phase of the Direct Managed Care Enrollment process to enroll recipients into their Managed Care Organization (MCO) immediately upon approval of their Medicaid eligibility. This change will give Medicaid recipients immediate access to their Managed Care benefits, such as Case Management, and immediate access to their MCO provider network avoiding unnecessary provider transitions. Direct Managed Care Enrollment will provide recipients the care they need sooner, avoid rate issues, avoid confusion and overlap with the Health Care Guidance Program (HCGP), and improve the continuity of care.

The Direct Managed Care Enrollment project has been implemented in two phases.

- Phase 1 of the project was implemented October 16, 2016, and immediately re-enrolls returning recipients into Managed Care.
- Phase 2 of the project was implemented April 17, 2017, and immediately enrolls newly eligible recipients into their MCO upon approval of their eligibility.