4.4   Auto-Assignment Algorithm

EXPLANATION OF AUTO ASSIGNMENT

Pursuant to the terms and conditions of the waiver, individuals required to enroll who do not select a health plan will be auto assigned to a plan.

Specific steps and requirements include the following:

    C   An individual will be assigned to a plan only if it is geographically accessible. These standards are described in both the waiver and the State's RFP for plan qualification.

    C   An individual will be assigned to a plan only if the plan has sufficient capacity.

    C   In the first three years of the program, plans affiliated with Article 28 facilities (predominately prepaid health services plans) will receive 25%, 22½ and 20 % of the initial auto assignments, respectively.

    C   The remainder of auto assignments will be distributed evenly among all health plans.

AUTOMATIC ASSIGNMENT PROCESS AND CRITERIA

MANDATORY ENROLLEES

ADC/PA & MA
HR/PA & MA
Transitional MA
SOBRA women and children

RECIPIENT/CASE CRITERIA FOR AUTO ASSIGNMENT

C Recipient's district of financial responsibility - a table will be maintained indicating mandatory districts vs. voluntary districts.

C No Racial Ethnic code with value of 1 (American Indian) - if indicated.

C No SSI Status code with value of 1 (Active) - if indicated.

C No current SURS restriction on file with values of 02 (Podiatry)
                   03 (Dental)
                   04 (DME)
                   05 (Pharmacy)
                   06 (Physician)
                   08 (Clinic)

C No current exception on file with values of 90 (Managed Care Exclusion)
                91 (General MC Exemption)
                92 (DOH/MC Exemption)
                94 (OMH/MC Exemption)
          95 (OMRDD/MC)
                96 (SPMI Exemption)
                81 (Traumatic Brain Injury)

C No current PCP record with capitation code of "3"

C No current Principal Provider record with values of "01 -14"

C Transaction types 02 (Opening)
         06 (Recert)
         10 (Re-opening)
         11 (Re-activation)

C Valid and prospective MA coverage dates on file - depending on the time of the month the auto assign is done, coverage for the first of the next month or the subsequent month must be present.

C Coverage codes 01 (Full coverage)
          10 (Full coverage except long term care)
          15 (Prenatal Care)
          16 (HR/UT)
          30 (Full PCP coverage)
          32 (PCP/HR)

PA/ADC & HR

C Case type 11 (PA/ADC) and 12 (PA/ADC-U) with Aid Categories 10 (PA/ADC)
                          11 (PA/ADC-U)

C Case type 14 (PG-ADC) with Aid Categories 09 (PA/PG-ADC-U)
                  13 (PA/PG-ADC)

C Case type 16 (PA/HR), with Aid Categories 14 (PA/HR-VA)
                   15 (PA/HR)
                   18 (PA/HR Interim)
                   19 (PA-VA)
                   63 (State Asst/HR)
                   64 (State Asst/HR)

MA/ADC & HR

C Case type 20 (MA ONLY) with Aid Categories 27 (MA only, ADC related)
                    43 (MA only, Prenatal Care)
                    44 (MA only, Expanded Cov.
                      infants)
                    21 (MA only, HR eligible)
                    39 (MA only, HR related parent)

RECIPIENTS NOT AUTO ASSIGNED

C Racial Ethnic code equal to "1" (American Indian) - if indicated.

C SSI Status code equal to "1" (Active) - if indicated.

C 65 years or older.

C Current SURS restriction on file with value "02-08."

C Current Exception on file with value of "90-96" + 81.

C   Current PCP record on file with Capitation Code of "3."

C   Current Principal Provider record on file with value of "01 -14."

C   Coverage Codes   02 (Outpatient Only)
                                       03 (Inpatient Only)
                                       04 (Not eligible)
     05 (Sanctioned)
     06 (Provisional Coverage)
     07 (Emergency Services Only)
     08 (Presumptive Eligibility/Home Care)
     09 (Medicare Coinsurance and Deductible Only)
     13 (Presumptive Eligibility/Prenatal A)
     14 (Presumptive Eligibility/Prenatal B)
     17 (Cobra/Aids)
     30 (PCP Coverage)
     31 (Capitation Guarantee Only/HR)
     32 (PCP/HR Coverage)
     33 (Capitation Guarantee Only)

C   Case type 22 (MA-SSI)

C   Aid Category   24 (MA only - MA Aged)
     25 (MA only - MA Blind)
     26 (MA only - MA Disabled)
     28 (MA only - Public Home)
     29 (MA only - Citycaid only)
     35 (MA only - Presumptive Eligibility/Home Care)
     36 (MA only - Presumptive Eligibility/Pregnant Women)
     37 (MA only - Emergency Eligibility/FNP)
     38 (MA only - Emergency Eligibility/Local)
     40 (MA only - Public Shelter Resident)
     41 (MA only - Presumptive Eligibility/Prenatal A)
     42 (MA only - Presumptive Eligibility/Prenatal B)
     45 (MA only - Aliens HR/FP)
     50 (SSI - Aged)
     51 (SSI - Blind)
     52 (SSI - Disabled)
     53 (SSI - Pending OAA)
     54 (SSI - Pending AB)
     55 (SSI - Pending AD)
     60 (State Asst/MA - Aged)
     61 (State Asst/MA - Blind)
     62 (State Asst/MA - Disabled)

PHSPs will get the first 25% of Auto-Assignments. Persons with a card code of "R" will not be auto assigned (nursing home recipients, etc.).

Given the above conditions, an auto-enrollment record would be formatted for each recipient on the file. This file would be input to the nightly enrollment processes.

Reports to the Prepaid Capitation Plans and the local districts will be generated by this process and update the bulletin board as well.