

MAPP Segment End Date Reason Codes Crosswalk

Code	New Code #	Code to be discontinued 11/1/18 √	Current Code Description	New Code Description	New Definition	Current Segment Type	New Segment Type	Code used for Disenrollment √
01			Transferred to another HH	<i>no change</i>	Member is working with, or wants to work with, another HH agency.	Both	<i>no change</i>	
02			Member opted-out (pre consent only)	Individual opted-out (pre-consent only)	Individual has voluntarily opted-out. Individual does not want to be a Health Home member and receive Health Home services.	Both	Outreach	
03			Transferred to another CMA	<i>no change</i>	Individual is working with another CMA within the same HH.	Both	<i>no change</i>	
04			Member deceased	Individual deceased	HH has been informed that individual is deceased.	Both	<i>no change</i>	√
05			Member has a new CIN	Individual has new CIN	If Medicaid changes an individual's CIN, segment is ended under the old, and new segment created using the new CIN.	Both	<i>no change</i>	
07			Closed for Behavior	Closed for health, welfare and safety concerns for member and/or staff	Disenrollment due to health, welfare, and safety concerns for member and/or staff (formerly for <i>behavior</i>).	Both	Enrollment	√
08		√	Member moved out of service area					
09			Member moved out of state	Individual moved out of state	Member moved out of New York State.	Both	<i>no change</i>	√

11			Member incarcerated	Individual incarcerated	Individual is incarcerated where the length of stay is expected to be longer than 6 mos.	Both	<i>no change</i>	√
12		√	Refused to sign or rescinded consent					
13			Patient of inpatient facility	Individual is in an inpatient facility	Member is in an excluded setting and the length of stay is expected to be longer than 6 mos.	Both	<i>no change</i>	√
14			Enrolled Health Home member lost to services	Enrolled Health Home member disengaged from Care Management services	Member is considered disengaged when Diligent and Continued Search efforts do not result in location of member.	Enrollment	<i>no change</i>	√
15		√	Member dissatisfied with services					
16			Inability to contact/locate member	Inability to contact/locate individual	Individual is unreachable during outreach attempts.	Outreach	<i>no change</i>	
17		√	Member not interested in HH services					
18			Member interested in HH at a future date	<i>no change</i>	For individuals not yet ready for HH services who express future interest.	Outreach	<i>no change</i>	
19			Member doesn't meet HH criteria	Individual doesn't meet HH eligibilty/appropriateness criteria	Individual does not/no longer meets eligibility criteria required for enrollment.	Both	<i>no change</i>	√
21			Member no longer requires HH services	Member has graduated from the HH Program	Individual can successfully self-manage and monitor their chronic conditions.	Enrollment	<i>no change</i>	√
23		√	Member disenrolled					

24			Member is no longer eligible for Medicaid	Individual is not/no longer eligible for Medicaid	Individual no longer qualifies or meets eligibility requirements for Medicaid.	Both	<i>no change</i>	√
25			Member moved from Outreach to Enrollment (can be system generated)	Individual moved from Outreach to Enrollment (can be system generated)	When user selected, end of outreach segment when individual is found and is eligible for HH services.	Outreach	<i>no change</i>	
27		√	Member not eligible for HH program					
28			Health Home change MMIS ID Provider ID	<i>no change</i>		Both	<i>no change</i>	
29			Member withdraws consent	Member withdrew consent to enroll	Member chooses to disenroll from the Health Home program.	Enrollment	<i>no change</i>	√
32			Closure	Provider Closed	For use when HH or CMA closes business and member is transferred to another HH and/or CMA.	Both	<i>no change</i>	
33			Merger	<i>no change</i>	In the instance of a merger between two HH or CMAs.	Both	<i>no change</i>	
35		√	Member refused consent					
	41			Coverage not compatible	Individual's Medicaid coverage is not compatible with HH.		Both	√
	42			Program not compatible	Individual chooses to move to another program not compatible with HH program.		Both	√

	43			Individual moved between HHSC and HHSA	When a member who previously received services as a child transitions to adult, or an adult transitioning back to HHSC.		Both	
	44			Segment Correction	For use only if directed by DOH in order for HH RE codes to be correctly attributed to the member.		Enrollment	
99		√	Other	Other - FOR DOH USE ONLY	Formerly "Other,". Can no longer be used by HH - <i>for DOH use only</i> . Reach out to DOH if the appropriate segment end reason code cannot be found.	Both	Providers can not use	