

**Office of Health Insurance Programs**

**Division of Long Term Care**

**MLTC Policy 14.05: Aid-Continuing to be provided without regard to the expiration of prior service authorization**

**Date of Issuance: August 6, 2014**

---

This is to notify you of a recent change in State law that affects all managed long term care (“MLTC”) plan products’ obligation to provide aid-continuing to plan enrollees. [See Public Health Law Section 4403-f (7)(a)(ii).]

This change in State law requires that aid-continuing be provided without regard to the expiration of the MLTC plan’s prior service authorization.

This means that, when a MLTC plan assesses an enrollee and determines to reduce or discontinue previously authorized services, and the enrollee timely files an internal appeal and asks that benefits be continued pending the outcome of the internal appeal, the enrollee is entitled to receive the previously authorized services unchanged pending the outcome of the internal appeal even if the enrollee’s service authorization period has expired.

This also means that, when an MLTC enrollee requests a State fair hearing to review a MLTC plan notice of final adverse determination, and the Office of Administrative Hearings of the NYS Office of Temporary and Disability Assistance has issued an aid-continuing directive regarding that enrollee, the MLTC plan must comply promptly with that aid-continuing directive even if the enrollee’s service authorization period has expired. The MLTC plan must comply with the aid-continuing directive until the fair hearing decision is issued.

This change in State law applies to MLTC enrollees who were in aid-continuing status on April 1, 2014, as well as to enrollees for whom aid-continuing is directed after April 1, 2014.

Should you have questions regarding this matter, please contact your plan manager 518-474-6965.