



Donna Frescatore
NYS Medicaid Director
Office of Health Insurance Programs
New York Department of Health, Empire State Plaza Corning Tower
Albany, NY 12237

Dear Ms. Frescatore:

We write today on behalf of hundreds of thousands of New Yorkers who receive mental health and/or substance use disorder care through the state's public mental hygiene system, and the providers who serve them.

Recently we became aware of a significant insurance coverage transition impacting New Yorker's who are enrolled in Medicaid Managed Care and are becoming eligible for Medicare either due to turning 65 or who are qualified for disability benefits. These individuals, often referred to as 'dual eligible' beneficiaries will soon be default enrolled by state approved health plans into the plans' Medicare Advantage D-SNP and/or its' Medicaid Advantage Plus plan. Apparently, the care recipient will have to take active steps to decline the default enrollment.

The vast majority of advocates who represent organizations that provide a broad range of mental health and/or substance use disorder services first became aware of the changes to come about 3 weeks ago, and only as result of our relationships with the Medicare Rights Center. Since then, we have been struggling to understand the details of the transition and its impact on the providers and the people they serve. There was no notification for advocates or for the staff who are responsible for assisting dual- eligible beneficiaries with coordination of benefits. We now know that the first group of health plans approved by the state to default enroll their insureds will begin April 1, to be followed by additional health plans in May and so on.

There is a very significant problem associated with this transition that will affect the continued viability of many mental health and substance use disorder providers. As the result of the planned change, providers will no longer be reimbursed at the APG government rate for Medicare-covered services rendered to these dual-eligible care recipients, despite the fact that the individual will concurrently remain enrolled in the Medicaid Managed Care Plan for which the APG government rate is mandated by law. We have already heard from several plans that confirm this information. This is an issue that will continue to grow with every passing month as more Medicaid beneficiaries turn 65 or become disabled. Furthermore, dual-eligible beneficiaries in Opioid Treatment Program (OTPs), who are default enrolled into a Medicare Advantage plan may be forced to choose between Medicare-covered OTP services to treat their opioid use disorder or continuing to receive core services under the associated Medicaid Advantage Plus plan.

The financial viability of the behavioral health community and health of those we serve is at significant risk.

We respectfully ask for an immediate meeting with you in order to rectify this urgent situation.

On behalf of the signatories below,

Sebrina Barrett, Executive Director,
Association for Community Living

Amy Dorin, President and CEO, The
Coalition for Behavioral Health

Allegra Schorr, President, Coalition of
Medication-Assisted Treatment Providers
and Advocates of New York State

Paige Pierce, Chief Executive Officer, Families
Together in NYS

Glenn Liebman, Chief Executive Officer,
Mental Health Association in New York State

Wendy Burch, Executive Director, NAMI-NYS

John Coppola, Executive Director, New York
Association of Alcohol and Substance Abuse
Providers

Harvey Rosenthal, New York Association of
Psychiatric Rehabilitation Services

Jackie Negri, Director, New York State Care
Management Coalition

Andrea Smyth, Executive Director, New
York State Coalition for Children's Behavioral
Health

Lauri Cole, Executive Director, New York
State Council for Community Behavioral
Healthcare

Laura Mascuch, Executive Director,
Supporting Housing Network of

Cc:

Ann Sullivan, Commissioner, OMH

Arlene González-Sánchez, Commissioner, OASAS

Jonathan Bick, DOH

April Hamilton, DOH

Emil Slaine, OMH

Robert Myers, OMH

Gary Weiskopf, OMH

Joe Katagiri, OMH

Sean Byrne, OASAS

Patricia Lincourt, OASAS

Tricia Schell-Guy, OASAS
