

**Medicaid Administration**  
**NY State of Health Transition Fact Sheet: HARP**

Effective January 1, 2014, Medicaid eligibility for most individuals who are not aged, blind, or disabled, is determined through NY State of Health. NY State of Health is a Health Plan Marketplace that allows individuals, families, and small businesses to compare health plans and to purchase and enroll in health insurance on-line.

The transition of Medicaid consumers from Local Department of Social Services (LDSS)/Human Resources Administration (HRA) to NY State of Health, has been occurring across the State in phases. HARP enrolled members were previously carved out of this transition. Beginning February 2019, HARP members who meet the Modified Adjusted Gross Income (MAGI) criteria and are not otherwise excluded from being enrolled on NY State of Health are identified for this transition.

**HARP members meeting MAGI eligibility will move from LDSS/HRA to NY State of Health according to their recertification date:**

1. Upstate<sup>1</sup>: The first members to transition have a 4/30/19 eligibility end date.
2. NYC: The first members to transition have an 8/31/19 eligibility end date.

**What to expect:**

- The process of renewing for those individuals selected for transition is different from how they recertified in the past.
- Instead of a renewal notice, recipients will receive a letter from WMS informing them that from now on they will have to receive their coverage through NY State of Health.
- NY State of Health will send transitioning members a second notice with details about the process for renewing on NY State of Health, including information on: How to access the account; when to access the account to avoid interruptions in coverage; and who to contact for assistance.
- Members will need to log on to the on-line NY State of Health Marketplace or call 1-855-355-5777, or TTY: 1-800-662-1220 to recertify before their eligibility end date to prevent disenrollment from Medicaid.
- Members transitioned from LDSS/HRA to NY State of Health will receive the same coverage and services they would be offered in the district, based on eligibility.

**Where to go for Help:**

- Members can receive in person assistance with enrollment from an Enrollment Navigator, please visit: <https://nystateofhealth.ny.gov/> to access.

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<sup>1</sup> All Counties outside of NYC including Long Island



**Department  
of Health**

**Office of  
Health Insurance  
Programs**

- Please check in with your clients as to whether they have received these letters in the mail.
- Inform your clients of the importance of holding onto the NY State of Health letter as it has important information that will enable them to log in to their NY State of Health account for Medicaid coverage.
- Let your clients know help is available and assist them in accessing help as soon as they receive the NY State of Health letter.
- Members can call NY State of Health Customer Service at 1-855-355-5777 for general information relating to their Medicaid coverage transition.

**Important information:**

- It is very important that clients use the account information found in the letter from NY State of Health
- Members must ensure Medicaid, whether WMS or NY State of Health, has an accurate address for them or they risk mail being returned as undeliverable.

**NOTE:** It is very important for consumers to access their accounts on time. If they fail to meet the enrollment deadline, they risk having a gap in coverage.

- For more information about NY State of Health or to find an enrollment assistor/navigator, please visit: <https://nystateofhealth.ny.gov/> or call Customer Service at 1-855-355-5777, TTY: 1-800-662-1220.