

**Medicare Eligibility**

We have been asked to provide the Plans with additional clarification as to how Medicare eligibility impacts eligibility for coverage through the Healthy New York program both initially and upon re-certification. Please note that the impact varies for the individual vs. the group product and also according to the size of the group.

**Individual and Individual Proprietor Program:**

- ◆ Medicare eligibility precludes enrollment and serves as a basis for non-renewal of the Healthy New York insurance contract at the time of re-certification.
- ◆ Medicare eligible applicants may not apply for family coverage on behalf of non-Medicare eligible dependents. Such dependents must submit applications and be admitted to the program on their own merit.
- ◆ Dependents who are Medicare eligible may not be included as members.

**Group Program:**

The Healthy New York statute provides that employees who are Medicare eligible are not eligible for coverage (unless otherwise eligible pursuant to Federal Law). This impacts groups differently depending on whether they have more or less than 20 employees.

**For groups fewer than 20 employees:**

- ◆ Medicare eligibility precludes enrollment of the employee and serves as a basis for non-renewal of the Health New York insurance coverage at the time of re-certification.
- ◆ Such Medicare eligible employees may still obtain coverage for their dependents, as long as the dependents are not also Medicare eligible.
- ◆ Dependents who are Medicare eligible may not be included as members.

**For groups with 20 or more employees:**

- ◆ Due to federal law, Medicare eligible employees are eligible for coverage through the Healthy New York program and they may obtain such coverage on behalf of their dependents.
- ◆ Dependents may be included as members without regard to Medicare eligibility.