

Office of Program Accountability

INVESTIGATION, REVENUE AND ENFORCEMENT ADMINISTRATION

INFORMATIONAL 2018-07-BFI

Issued: August 8, 2018

Form Instructions: Medicaid Monthly Eligibility Determination Report, BFI-241

Audience

This is intended for all BFI Staff and informational for all others.

Purpose

The purpose of this informational is to inform BFI staff about the use of the *Medicaid Monthly Eligibility Determination Report* BFI-241 form.

Background

The BFI-241 <u>replaces</u> the informal Medicaid eligibility breakdowns used when formulating the Medicaid overpayment claims for BFI Civil Litigation and Criminal Prosecution referrals. This form will be used when BFI investigates an allegation where the final disposition involves a Medicaid overpayment in order to present a clear understanding of how the eligibility was determined.

Process

All areas of the form are to be completed by the Investigator. The completed form will compare the household's total monthly income to the New York State Income and Resource Standards and Federal Poverty Levels (FPL) [MAPDR-01] for that particular year and show if the Medicaid household was ineligible or eligible for the Medicaid benefits received on a monthly basis. The top of the form is self-explanatory as to what information is required in the areas to be completed. The following is a breakdown of what is entered in each of the columns of the form.

- The first column is the claim month.
- In the second column, enter the household size for that month.
- In the third column, enter the New York State Income and Resource Standards and Federal Poverty Levels (FPL) [MAPDR-01] income standard amount for the determined household size.

The use of either the Family Health Plus (FHP) standard or the Modified Adjusted Gross Income (MAGI) standard depends on the year of the claim. For overpayments occurring in 2014 and earlier use the FHP standard. For Overpayments occurring in 2015 to present, use the Federal Poverty Level (FPL) Chart to identify the MAGI standard to use for the family size. The fourth column requests an indication of where the income information was derived such as

- In the fourth column, click on the drop down arrow and select the monthly income source (where the income information was derived such as _______) for the household for that month. Two selections can be made in this field.
- In the fifth column, enter the total income amount for that month. The total of the different sources added together should be entered in this field.
- In the sixth column, click on the drop down arrow and select a yes or no to indicate if the household was eligible to receive benefits for that month.