



Re-Enrollment & Disenrollment Policy

1. PURPOSE

The following policy outlines and defines requirements MATCH clients must meet in order to re-enroll into the MATCH Program following each enrollment period. This document also clarifies the expectations MATCH clients are asked to adhere to in order to avoid disenrollment as well as the processes and procedures that must be followed in order to re-qualify for the program following a disenrollment.

2. Re-Enrollment

In order to qualify for re-enrollment into MATCH, clients must meet the following requirements:

- a. Continue to meet basic program requirements: Household Income <200% of the FPL, Age 18-64, Uninsured, & a resident of McDowell County for at least
- b. Appropriate use of emergency department services (no more than 2 visits for reasons not defined as a “medical emergency” during their previous enrollment period.
- c. Appropriately utilized donated primary care services to the following extent:
 1. For clients without a chronic disease(s): At least (1) visit to their assigned primary care provider during the previous enrollment period.
 2. For clients with a chronic disease(s): At least (2) visits to their assigned primary care provider during the previous enrollment period.
- d. Adherence to the expectations outlined in the MATCH Patient Expectations Agreement during the previous enrollment period.
- e. If applicable, connection to MATCH case management staff within 2 attempted contacts during the previous enrollment period.

3. Reasons for Disenrollment:

The following outlines probable cause for disenrollment from the MATCH Program at any point during a client's enrollment:*

- a. No longer meeting basic program requirements: Household Income <200% of the FPL, Age 18-64, Uninsured, & a resident of McDowell County for at least
- b. Continued inappropriate use of emergency department services without engaging with case management staff following (2) attempted contacts and a (2) week waiting period.
- c. Failure to appropriately utilize and establish assigned primary care services within 6 months of MATCH Enrollment Start Date.
- d. Failure to adhere to the expectations outlined in the MATCH Patient Expectations Agreement.
- e. Failure to engage with MATCH case management staff within (2) weeks of second attempted contact.

**This list is not extensive, other reasons for disenrollment will be judged fairly and enacted as needed in order to preserve the integrity of the MATCH Program.*

4. Disenrollment/Failure to Qualify for Re-Enrollment

- a. If clients do not meet any of the above stated requirements, they will be unable to re-enroll in the MATCH Program for (1) calendar year from the date of their attempted re-enrollment.
- b. Clients who are disenrolled during an active enrollment will be ineligible to re-enroll in the program until (1) calendar year after their disenrollment date.

5. DEFINITIONS [Below, list terms and definitions relevant to HIPAA privacy policy for your organization. To delete this text, click it and then press Delete.]

Term: Medical Emergencies

This list is not extensive, determination of what constitutes a medical emergency will be made via fair discussion and consensus among client, enrollment staff, and appropriate medical providers if necessary. According to the American College of Emergency Physicians, the following are warning signs of a medical emergency:

Bleeding that will not stop
Breathing problems (difficulty breathing, shortness of breath)
Change in mental status (such as unusual behavior, confusion, difficulty arousing)
Chest pain
Choking
Coughing up or vomiting blood
Fainting or loss of consciousness
Feeling of committing suicide or murder
Head or spine injury
Severe or persistent vomiting
Sudden injury due to a motor vehicle accident, burns or smoke inhalation, near drowning, deep or large wound, etc.
Sudden, severe pain anywhere in the body
Sudden dizziness, weakness, or change in vision
Swallowing a poisonous substance
Upper abdominal pain or pressure