2021 EmblemHealth (HMO D-SNP) Valid Epaces Responses for Plan Eligibility				
Epaces Response on Screen	Epaces Response Description	EH VIP Dual (HMO D-SNP), EH VIP Dual Select (HMO D-SNP) & EH VIP Dual Reserve(HMO D-SNP)		EH VIP Solutions (HMO D-SNP)
COMMUNITY COVERAGE WITH CBLTC	COMMUNITY COVERAGE WITH COMMUNITY BASED LONG TERM CARE	\checkmark	~	~
COMMUNITY COVERAGE NO LTC	COMMUNITY COVERAGE WITHOUT LONG TERM CARE	\checkmark	~	\checkmark
ELIGIBLE PCP	ELIGIBLE PCP	\checkmark	~	\checkmark
ELIGIBLE ONLY INPATIENT SERVICES	ELIGIBLE ONLY INPATIENT SERVICES	\checkmark	~	~
ELIGIBLE ONLY OUTPATIENT CARE	ELIGIBLE ONLY OUTPATIENT CARE	\checkmark	~	~
MA ELIGIBLE	MEDICAID ELIGIBLE	\checkmark	~	\checkmark
OUTPATIENT COVERAGE WITH CBLTC	OUTPATIENT COVERAGE WITH COMMUNITY BASED LONG TERM CARE	\checkmark	~	\checkmark
Medicare Coinsurance and Deductible Only	Medicare Coinsurance and Deductible Only(QMB)			\checkmark
Valid Award Letter w/ 6 months(Submit Document)	Valid Award Letter w/ 6 months(Submit Document)			~
2021 C	onnecticare (HMO D-SNP) Valid Epaces Resp			
DSS Benefit Response on Screen	DSS Response Description	Choice Dual (HMO D-SNP)	Choice Dual Basic (HMO D-SNP)	
Husky C Medicare Covered Services	Full Medicaid QMB	✓	\checkmark	-
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