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DIVISION: Office of Long Term Care PAGE 1

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TO: All Local District Commissioners, Medicaid Directors, Care At Home

Coordinators

FROM: Mark Kissinger, Deputy Commissioner

Office of Long Term Care

SUBJECT: New CAH I/II Case Management Agency Selection Forms and Application

Cover Sheet Amendment (Attachments)

EFFECTIVE DATE: Immediate

CONTACT PERSON: Office of Long Term Care

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The purpose of this GIS is to notify local department of social services (LDSS) staff of two new forms related to certification of participant provider choice for Care at Home I and II (CAH I/II) Medicaid waiver case management services: Case Management Agency Selection form and Change of Case Management Agency Request form. These forms are for immediate use. Other forms developed and utilized by Case Management agencies will no longer be accepted.

Completion of Case Management Agency Selection form will be required at the time of a child's enrollment in the waiver program. The form is to be signed by the participant's parent or guardian to certify choice in the selection of the participant's case manager. The case management agency and the LDSS CAH Coordinator must also sign the form and maintain a copy as part of the child's permanent CAH case record. The form must be submitted by the LDSS CAH Coordinator to the State Department of Health (NYSDOH) CAH program staff along with the CAH request for enrollment application documentation. The CAH I/II Application Cover Sheet was updated to reflect the new Case Management Selection Form.

The Change of Case Management Agency Request form is to be completed whenever there is a change in a child's case management agency. The change may occur when requested by a parent or guardian, the family is moving to a new county of residence and the current CAH case management agency does not have service locations in the new location, or the case management agency is no longer rendering services. This form is to be signed by the participant's parent or guardian, current and requested CAH case management agencies, and the LDSS CAH Coordinator. A copy is then forwarded to the NYSDOH Care At Home Program. It is the responsibility of the current case management agency to share the Plan of Care documents with the new case management agency.