

WGIUPD

GENERAL INFORMATION SYSTEM
DIVISION: Office of Health Insurance Programs

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TO: Local District Commissioners, Medicaid Directors

FROM: Lisa Sbrana, Director
Division of Eligibility and Marketplace Integration

SUBJECT: Revised DOH-4220: Access NY Health Care Application

ATTACHMENT: DOH-4220 Access NY Health Care Application (8/21)

EFFECTIVE DATE: Immediately

CONTACT PERSON: Local District Support Unit
Upstate (518) 474-8887 NYC (212) 417-4500

The purpose of this General Information System (GIS) message is to inform local departments of social services (LDSS) of revisions to the "Access NY Health Care Application" (DOH-4220). To accommodate certain policy updates and program changes, such as the requirement to apply for Medicare if age 65 or older; the requirement for pregnant individuals to provide a Social Security Number (SSN) if they have one, citizenship or immigration status; and to incorporate language changes that improve readability, the DOH-4220 required certain modifications.

Revisions that were made to the application are as follows:

- An optional section for applicants to list their preferred gender identity along with associated help text was added to Section B. Districts are advised that WMS is currently unable to accommodate gender designations. The sex field in WMS can only accept male "M" or female "F" because payments for certain medical services are currently linked to the "M" or "F" entries in that system. Individuals applying for Medicaid should be informed that either an "M" or "F" variable for the sex field is required to process the Medicaid application. All services can be made available for individuals regardless of the gender identity selection on the application and whether selecting "M" or "F" in the sex field. However, medical review may be required in order for payments to be made for certain services linked to "M" or "F" sex markers to ensure clinical appropriateness. The Office of Temporary and Disability Assistance (OTDA) and the Department of Health issued a joint Administrative Directive on gender designation (see Section V in 20-ADM-01, "Gender Designation "X"). The directive does not change existing Medicaid processes or rules regarding drug utilization review and/or prior authorization requirements for certain gender affirming services.
- Language regarding the requirement to apply for Medicare if age 65 and older was added to section D (see 17 ADM-01, "Medicare Enrollment at Age 65"). The paper insert OHIP-0112, "You Must Apply for Medicare," which explains the requirement to apply for Medicare, no longer needs to be included with the application.

- Language indicating it is optional for pregnant individuals to provide citizenship or immigration status and language in the Terms, Rights, and Responsibilities section stating pregnant individuals are not required to provide an SSN, was removed. However, there is no change to existing policy. Pregnant consumers are not required to provide their SSN or citizenship/immigration status. If an application is received with citizenship/immigration status or SSN information that would require the Alien Citizenship Indicator (ACI) 'E,' the ACI indicator should continue to be left blank. System changes are required to accommodate ACI 'E' for pregnant individuals. Additional guidance regarding these changes will be forthcoming.
- A statement regarding the availability of the DOH-4220 in Alternative Formats was incorporated into section A. (see 16 ADM-08, "Alternative Format and Disability Accommodation Indicator Use"). Because this was added the DOH-5130, "Notice Options Available to Applicants Who May Be Blind or Visually Impaired" will no longer need to be included when the revised DOH-4220 is given to an applicant.
- A new paragraph "Notice of Nondiscrimination Policy" was added to the "Terms, Rights and Responsibilities" section of the application. This addition informs the applicant that NY State does not discriminate on the basis of race, color, national origin, creed/religion, sex, age, marital/family status, disability, arrest record, criminal conviction(s), gender identity, sexual orientation, predisposing genetic characteristics, military status, domestic violence victim status and/or retaliation. In addition to this notification, language was added to provide applicants with contact information should they feel they have been discriminated against on any of these bases and wish to file a complaint.
- A new paragraph "Accommodations" was added to the "Terms, Rights and Responsibilities" section of the application. This paragraph informs the applicant that the NY Medicaid program provides free aid and services to people with disabilities to enable them to communicate effectively with the Department. It also gives direction on who to contact if reasonable accommodations are necessary.
- A question about receiving services from an Indian Health Program was added to Section B to accommodate a future enhancement to the system.
- The term "Facilitated Enrollers" was replaced with the term "Assistors" throughout the application.
- The term "Food Stamps" was replaced with the current program name of "Supplemental Nutrition Assistance Program" (SNAP).
- Language related to the requirement for counties to enroll consumers in Medicaid Managed Care was modified, since this is a statewide requirement.
- Images on the front cover and inside of the application were updated to reflect the Aged, Blind and Disabled population who predominantly use the DOH-4220.

The updated application has been posted to the New York State Department of Health (DOH) website and will be printed and stocked in the DOH warehouse within a few weeks of the online publication. The revised DOH-4220 "Access NY Health Care Application" will be available from the warehouse when the printing has been completed. The revision date of the application is August 2021. Once the application is available in the warehouse and districts receive copies, the older version should be discarded. However, if an applicant submits an older version of the DOH-4220, districts must still accept it and not require the individual to complete the newer application. Copies of the OHIP-0112 and DOH-5130 would need to be sent to the applicant in these situations.

Please direct any questions to your local district liaison.