

DSS-4357EL

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GENERAL INFORMATION SYSTEM

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DIVISION: Health & Long Term Care

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TO: Local District Commissioners, Managed Care Coordinators

FROM: Martin J. Conroy, Acting Deputy Commissioner, Division of Health & Long Term Care and Ellen J. Anderson, Dept. of Health, Director of Managed Care

SUBJECT: Appeals of Local Department of Social Services Determinations

EFFECTIVE DATE: Immediately

CONTACT PERSON: Maureen Connors, (518) 486-9015

The Department of Health is interested in learning the extent to which Medicaid recipients exercised their right to an appeal under NYCRR 360-10.13 and 360-10.16, good cause for changing managed care providers and also, cases where the plan requests withdrawal of the participant.

Please forward to this office by COB July 15, 1996 the number of determinations (adverse and positive) of each type of case which have been issued by your district over the last year. Responses can be faxed to Maureen Connors, Intergovernmental and Consumer Affairs, at (518)474-3733, or sent to her at Corning Tower, Room 2074, Empire State Plaza, Albany, NY 12237. If you have any questions, Maureen may be reached at (518)486-9015.