

DSS-4357EL

WGIUPD

GENERAL INFORMATION SYSTEM

12/17/99

**DIVISION:** Office of Medicaid Management

**PAGE 1**

**GIS** 99 MA/039

**TO:** All Local District Commissioners

**FROM:** Betty Rice, Director  
Division of Consumer & Local District Relations

**SUBJECT:** Report on Presumptive Eligibility for Long Term Care Services

**EFFECTIVE DATE:**

**CONTACT PERSON:** Regina Goodermote (518) 474-9130

Administrative Directive 97 ADM-10 contained the following paragraph on reporting requirements for presumptive eligibility for Long Term Care Services:

"SSL Section 364-i requires a report to the Governor and the Legislature. The report must evaluate the program and include the program's effects on access, quality and cost of care, and any recommendations to improve the program. Social Services districts must submit a report to the Department on the impact of this program in their districts on their operating procedures, including any indirect costs. While social services districts may submit this report in the format of choice, the Department would like the following areas to be addressed: impact on district operations, costs, and access and quality of care rendered to participants, and any recommendation to improve the program. The report must be sent by January 3, 2000, to:

Office of Medicaid Management  
Division of Consumer and Local District Relations  
Bureau of Medicaid Eligibility/Disability  
NYS Department of Health  
Room 727, 1 Commerce Plaza  
Albany, New York 12260"

Please send your reports to the attention of Regina Goodermote.

We know from the reports generated by WMS that Presumptive Eligibility - Long Term Care (Individual Categorical Code 35) is not used frequently and in many instances does not show a conversion to Medicaid. Many of the authorizations were allowed to expire. We would be interested in some of the reasons for this and welcome your comments.

We look forward to receiving your report. Thank you for your time and consideration in this regard.