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| LOCAL COMMISSIONERS MEMORANDUM |  
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Transmittal No: 90 LCM-3

Date: January 12, 1990

Division: Medical Assistance

TO: Local District Commissioners

SUBJECT: Medicare Guidelines for Skilled Nursing Care

ATTACHMENTS: Attachment I: Instructions to Medicare Fiscal  
Intermediaries on Coverage of Skilled Nursing Care  
(Not Available On-Line)

Enclosed for your information is a copy of materials recently received from the Health Care Financing Administration (HCFA) instructing Medicare Fiscal Intermediaries (FIs) on the transition under the Medicare Catastrophic Repeal Act. As you know, Congress repealed the Medicare Catastrophic Coverage Act on November 22, 1989. Therefore, Medicare benefits for skilled nursing facility care revert back to those that were in effect prior to January 1, 1989 (e.g. three day prior hospitalization requirement, maximum 100 days coverage per spell of illness).

No specific action is required by social services districts regarding this information. However, districts should not confuse this information with recent transmittals regarding Medicare optimization procedures. Any questions on this information or on Medicare optimization efforts should be directed to Barry T. Berberich, Director, Bureau of Long Term Care at 1-800-342-3715, extension 3-5611, or your county representative at extension 3-7581, and in NYC at 1-212-587-4853.

Sincerely,

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Jo-Ann A. Costantino  
Deputy Commissioner  
Division of Medical Assistance