TO:       Local District Commissioners

SUBJECT:  Chapter 41 Of The Laws Of 1992: Changes To The Medical Assistance Program

ATTACHMENTS: Dear Medicaid Recipient letter (available on-line)

This Local Commissioners Memorandum (LCM) is to provide districts with further details pertaining to the Department's implementation of Medical Assistance (MA) Program changes mandated by Chapter 41 of the Laws of 1992. These changes were described in Local Commissioners Memorandum Transmittal Number 92-LCM-73.

In May 1992 letters were sent to Medicaid recipients explaining the implications of Chapter 41 of the Laws of 1992 on the Medical Assistance Program. A separate letter was sent to individuals identified on WMS as Home Relief (HR) which described changes to their coverage under the MA Program. The Department has found that a number of individuals originally eligible for MA as HR are now eligible for MA under a federal category of assistance as disabled or otherwise and, therefore, should not be subject to the HR limitations. The Department will be sending the attached letter to notify these recipients that they are not subject to the limitations described in the letter that was sent to all recipients identified as HR. Details describing this population will follow in a future LCM.

For more information regarding this correspondence contact Ben Mastrototaro at 1-800-342-3715, extension 3-0530.

Jo-Ann A. Costantino
Deputy Commissioner
Division of Medical Assistance
Dear Medicaid Recipient:

In May 1992 you received a letter which began "Dear Home Relief Recipient". That letter said that your Medical Assistance (Medicaid) benefits would be reduced beginning July 1, 1992 because you get Medicaid only because you are a Home Relief recipient or are eligible for Home Relief.

We have reviewed your Medicaid records, and we have determined that your Medicaid benefits should not be reduced because you are disabled, pregnant, or you are otherwise eligible for full benefits.

Effective July 1, 1992, your benefits will not be limited. Additionally, you will not be subject to the 32 day inpatient hospital limitation. The attached letter tells you what Medicaid benefits are available to you because you are disabled, pregnant, or otherwise fully eligible for Medicaid.

Also, because of a federal court order, you temporarily do not have to pay any co-payments when you get some Medicaid services. We will tell providers when they may start charging the co-payment.

Sincerely,

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

Attachment