DIVISION: Health & Long Term Care

TO: Commissioners of Social Services

DATE: June 9, 1994

SUBJECT: Introduction of the DSS-4411: "Recertification For Medical Assistance (Chronic Care)"

SUGGESTED DISTRIBUTION: Medical Assistance Directors
WMS Coordinators
Corrective Action Coordinators
Staff Development Coordinators
Forms Coordinators

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1-800-343-8859, extension 3-1171

ATTACHMENTS: Attachment I-Overview of the DSS-4411
Attachment II-DSS-4411

FILING REFERENCES

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DSS-329EL (Rev. 9/89)
I. PURPOSE

This Informational Letter introduces a new document, the DSS-4411: "Recertification for Medical Assistance (Chronic Care)".

II. BACKGROUND

92 INF-49 introduced the DSS-3174 (Rev. 6/92): "Recertification for Public Assistance-Medical Assistance-Food Stamps", a fourteen (14) page document which combined and replaced the former client completed DSS-3174: "Recertification for..." and the worker completed DSS-3608: "Recertification Guide". For Medical Assistance-only cases, the (Rev. 6/92) recertification document is intended for recertifying community cases only.

The DSS-3174 (Rev. 6/92) is used in upstate districts. New York City continues to use the DSS-3174 NYC (Rev. 6/92): "Recertification for: Public Assistance-Medical Assistance-Food Stamps" and the Pub. 1313 NYC (Rev. 6/92): "How to Complete the Social Services Recertification Application".

The DSS-3174: "Recertification for..." captures information necessary to recertify a recipient residing in the community. Persons residing in the community experience changes in employment, living arrangements and other areas, which do not generally affect persons in chronic care. Because the chronic care population is relatively stable at recertification, requiring institutionalized persons to complete the DSS-3174 places an unnecessary burden on districts, recipients, and their representatives. Therefore, Health & Long Term Care is introducing the DSS-4411: "Recertification for Medical Assistance (Chronic Care)" to be used when recertifying individual chronic care recipients and chronic care spousal recipients, when there are no dependent family members.

III. PROGRAM IMPLICATIONS

When recertifying a single recipient or a recipient with a spouse, but no dependent family members, in chronic care status, the DSS-4411: "Recertification for Medical Assistance (Chronic Care)" is the primary document for gathering information. It replaces the:

-- DSS-3174: "Recertification for: Public Assistance-Medical Assistance-Food Stamps";

-- DSS-3174 NYC: "Recertification for: Public Assistance-Medical Assistance-Food Stamps";
When recertifying a recipient in chronic care status with dependent family members in the community, the DSS-3174 (Rev. 6/92): "Recertification for ..." must be used. The "Recertification for Medical Assistance (Chronic Care)" should not be used to recertify community cases.

Attached is an overview and copy of the DSS-4411.

IV. NECESSARY ACTION

Because the DSS-4411 is a new document and the Department does not know how many each district will need, it is not being automatically shipped. Each district must order the quantity of documents needed. The document is currently available. It should be ordered immediately by completing form DSS-876: "Request for Forms and Publications" and mailing it to:

New York State Department of Social Services
Forms and Publications Section
40 North Pearl Street
Albany, NY 12243

Upon receipt of the DSS-4411, districts should immediately begin using it for all individual chronic care and chronic care spousal recipients, when there are no dependent family members. All existing DSS-3174 (Rev. 7/91), Pub. 1313 (Rev. 7/91), DSS-3608 (Rev. 6/89) and DSS-3617 (Rev. 5/85) are now obsolete. They must be destroyed once your shipment of the DSS-4411 (Rev. 1/94) arrives.
Overview of the DSS-4411

General Information

The document is formatted widthwise and contains four (4) printed pages.

The document is completed by the recipient and the examiner. The recipient completes the white areas. The shaded areas are reserved for the examiner to complete and/or make notes.

Page 1, Identifying Information

Directions on how to complete the document.

Name and address of the district.

Action taken upon completion of the recertification process.

WMS case identifying information.

Recipient's identifying information.

Recipient's spouse's identifying information.

Name and address of the person completing the document.

Page 2, Resources

The recipient must identify any resources s/he owns. The recipient and/or his/her spouse must identify any resources s/he or they transferred within the last 30 months. This information must include the value, location, plus any identifying numbers or titles.

Page 3, Income

The recipient and his/her spouse, if any, must identify all income they receive. Identifying information must include the source, amount, plus any identifying numbers and/or titles.

Health Insurance

The recipient and his/her spouse must supply information concerning third party health insurance. This information is used to obtain health insurance coverage for the recipient.
Housing Expenses

When there is a community spouse, this section must be completed.

Ethnic Affiliation

The recipient may complete by indicating his/her racial/ethnic affiliation.

Page 4, Declarations

The recipient and/or his/her authorized representative must sign this page.