



STATE OF NEW YORK DEPARTMENT OF HEALTH

Corning Tower The Governor Nelson A. Rockefeller Empire State Plaza Albany, New York 12237

Antonia C. Novello, M.D., M.P.H., Dr.P.H.
Commissioner

Dennis P. Whalen
Executive Deputy Commissioner

November 08, 2005

TO: All MBL Liaisons

Re: MBL Transmittal 05-5

Dear MBL Liaisons:

Enclosed is MBL Transmittal 05-5. This transmittal includes information regarding:

- New MBL Shelter Types 42 and 51 to identify the new Congregate Care Level III – Enhanced Residential Care groups with a MBL effective FROM Date of 01/01/06 or greater.
- New MBL Shelter Type 44 to identify the Supportive/Specialized Housing related group with a MBL effective FROM Date of 11/01/05 or greater.
- Updated MBL Shelter Type Table

These changes will be available on Production 11/21/05. If you have any questions, please contact Charles Moore at 518-402-6791 or 518-402-9399.

Sincerely,

PRB

Patti Buttino
Director, Bureau of Medicaid Support Systems
Division of Information Technology
Office of Medicaid Management

cc: MA Directors

Date: November 08, 2005

MBL TRANSMITTAL

Transmittal No.: 05-5

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MaBel Subject: New Shelter Types 42 and 51 Congregate Care Level III – Enhanced Residential Care

Affected Budget Type(s): 01, 02, 04, 05, 06, 08, 09 and 10

Contact Person: MBL Unit at 518-402-6791 or 518-402-9399

Reason for Change

Effective January 1, 2006, Adult Homes and Enriched Housing Programs certified by the Department of Health (DOH) will be reclassified from Congregate Care Level II facilities to Congregate Care Level III. The new Congregate Care level III is defined as "Enhanced Residential Care and also includes Schools for the Mentally Retarded".

This change will affect residents of these programs who are in receipt of Medicaid-only by increasing the Standard of Need that is used to determine Medicaid eligibility.

Change in Procedure/System Processing

The new Shelter Types are:

42 – Congregate Care Level III – Enhanced Residential Care (NYC, Nassau, Suffolk, Westchester and Rockland)

51 – Congregate Care Level III – Enhanced Residential Care (Rest of State)

PNA = Congregate Care Level III Amount (Annually adjusted)

Shelter Amount = Congregate Care Level III Amount (Annually adjusted)

Associated MBL Editing:

If Shelter Type = 42 or 51

- MBL Effective FROM Date must be 01/01/06 or greater
- Budget Type can not be 07
- Water and Shelter Amount must be blank
- Additional Allowance must be blank or 99 "Other"
- Fuel Type
 - If Budget Type is 04 or 08 then Fuel Type must be blank or zero "0"
 - If Budget Type is 01, 02, 05, 06, 09 or 10 then Fuel Type must be zero "0"

These new Shelter Types can also be used to calculate a budget for residents of Schools for the Mentally Retarded, which are also included in Congregate Care Level III, but have not previously been supported by MBL.

System Processing Conversion

Operators of Adult Homes and Enriched Housing Programs provided the Department with identifying information about their residents which was used to match against WMS to create a file of active Case Type 20s. Cases selected for this file were then matched against existing MBL budgets to determine whether the stored budgets met the following criteria:

- Number in Case = 1
- Shelter Type = 16 or 29

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MaBel Subject: New Shelter Types 42 and 51 Congregate Care Level III – Enhanced Residential Care

Affected Budget Type(s): 01, 02, 04, 05, 06, 08, 09 and 10

Contact Person: MBL Unit at 518-402-6791 or 518-402-9399

System Processing Conversion (Continued)

The weekend of November 19, 2005 budgets meeting these match criteria will have their existing Shelter Type 16 or 29 (Congregate Care Level II) overlaid with the new Shelter Type codes of 42 (Congregate Care Level III, NYC, Nassau, Suffolk, Westchester, Rockland) or 51 (Congregate Care Level III, Rest of State), respectively.

Districts will receive two reports via BICS as a result of this Shelter Type conversion. The conversion file case output report information for all districts should be routed to the appropriate BICS queue for retrieval by the local districts MA representative. The report format will be the same as those used to identify the MRB Eligibles and Exceptions. Reports will be identified on the respective BICS queue as Example: (001-XWBB75a-PF-**). This breaks down as "001" number of copies, "X" BICS "WBB75a-d" filenames (Eligible and/or Exception), "PF" Print File and "***" District Number. Districts that have no identified cases will not receive a report.

ELIGIBLES: Cases appearing on this report are those that met the above selection criteria and successfully had the existing Shelter Type 16 or 29 converted to 42 or 51, respectively. The Version Number, Transaction Type and Date Stored were also modified in this conversion process. When the Effective From Date of the converted budget is changed to January 1, 2006, either through Mass Rebudgeting or manually by the worker, the new Standard of Need applicable to Adult Homes and Enriched Housing Programs will be generated.

EXCEPTIONS: Cases appearing on this report are those that did not meet the selection criteria outlined above. These cases should be reviewed by the worker. Districts should pay particular attention to the existing Shelter Type code being used on the MBL budget.

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MaBel Subject: New Shelter Type 44 – Supportive/Specialized Housing

Affected Budget Type(s): 01, 02, 04, 05 and 06

Contact Person: MBL Unit at 518-402-6791 or 518-402-9399

Reason for Change

A recent audit of HRA/HASA indicated the need for an uncapped Room and Board Shelter schedule. This request creates a new Shelter Type – 44 for Supportive/Specialized Housing situations that are AIDS related.

Change In Procedure/System Processing

The new Shelter Type 44 – Supportive/Specialized Housing will have the following:

PNA amount = \$45.00

Shelter Amount = Uncapped Room & Board Shelter schedule

Associated MBL Editing:

If Shelter Type = 44

- MBL Effective FROM Date must be 11/01/05 or greater
- Budget Type must be 01, 02, 04, 05 or 06
- No Energy calculation on the MA Budget output screen
- Water Amount must be blank
- Fuel Type must be zero "0"
- Additional Allowance must be blank or 99 "Other"

MBL TRANSMITTAL

***** MBL SHELTER TYPE TABLE *****

CODE	SHELTER TYPE	BASIC ALLOWANCE	ENERGY	AMOUNT	FUEL	WATER	ADDITIONAL NEEDS
01	RENT	Pre Add	Yes	Allowance Table	Yes	Yes	01, 02, 03, 13, 99
02	RENT PUBLIC	Pre Add	Yes	Allowance Table	Yes	Yes	01, 02, 03, 13, 99
03	OWN HOME	Pre Add	Yes	Allowance Table	Yes	Yes	01, 02, 03, 13, 99
04	ROOM & BOARD	\$45.00	No	Unlimited St Mo Cap	No	No	01, 02, 03, 99
05	HOTEL PERMANENT	Pre Add	Yes	Allowance Table	No	No	01, 02, 03, 13, 99
06	HOTEL TEMPORARY	Pre Add	Yes	Unlimited	No	No	01, 02, 03, 13, 99
07	MIGRANT CAMP	Pre Add	Yes	Allowance Table	Yes	Yes	01, 02, 03, 13, 99
09	MEDICAL FACILITY (OTHER THAN TITLE XIX FACILITY)	\$40.00	No	Unlimited	No	No	99
11	ROOM	Pre Add	Yes	Allowance Table	No	No	01, 02, 03, 13, 99
12	NON-LEVEL II ALCOHOL TREATMENT FACILITY	\$45.00	No	Unlimited	No	No	01, 02, 03, 99
14	PUBLIC HOME (OTHER THAN TITLE XIX FACILITY)	\$17.00	No	Unlimited	No	No	99
15	CONGREGATE CARE LEVEL I (NYC, NASSAU, SUFFOLK, WESTCHESTER, ROCKLAND)	PNA Level I	No	Level I	No	No	99
16	CONGREGATE CARE LEVEL II (NYC, NASSAU, SUFFOLK, WESTCHESTER, ROCKLAND)	PNA Level II	No	Level II	No	No	99
18	FOSTER CARE	No	No	Unlimited	No	No	No
20	EMERGENCY RENTAL SUPPLEMENT PROGRAM	Pre Add	Yes	Hotel/Mot Rate	Yes	Yes	01, 02, 03, 13, 99
22	SHELTER FOR VICTIMS OF DOMESTIC VIOLENCE	\$45.00	No	Unlimited	No	No	01, 02, 03, 99
23	UNDOMICILED	Pre Add	Yes	No	No	No	01, 02, 03, 99
28	CONGREGATE CARE LEVEL I (REST OF STATE)	PNA Level I	No	Level I	No	No	99
29	CONGREGATE CARE LEVEL II (REST OF STATE)	PNA Level II	No	Level II	No	No	99
33	HOMELESS SHELTER TIER II - Less than 3 MEALS/DAY	Pre Add	Yes	Unlimited	No	No	01, 02, 03, 99

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***** MBL SHELTER TYPE TABLE (Continued) *****

CODE	SHELTER TYPE	BASIC ALLOWANCE	ENERGY	AMOUNT	FUEL	WATER	ADDITIONAL NEEDS
34	HOMELESS SHELTER TIER II – 3 MEALS/DAY	\$63.00	No	No	No	No	01, 02, 03, 99
35	HOMELESS SHELTER NON-TIER I or TIER II – 3 MEALS/DAY	\$45.00	No	Unlimited	No	No	99
36	SHELTER FOR HOMELESS LESS THAN 3 MEALS/DAY	Pre Add	Yes	Unlimited	No	No	01, 02, 03, 99
37	RESIDENTIAL PROGRAM FOR VICTIMS OF DOMESTIC VIOLENCE - LESS THAN 3 MEALS/DAY	Pre Add	Yes	Unlimited	No	No	01, 02, 03, 99
42	CONGREGATE CARE LEVEL III (NYC, NASSAU, SUFFOLK, WESTCHESTER, ROCKLAND)	PNA Level III	No	Level III	No	No	99
44	SUPPORTIVE/ SPECIALIZED HOUSING	\$45.00	No	Unlimited	No	No	99
51	CONGREGATE CARE LEVEL III (REST OF THE STATE)	PNA Level III	No	Level III	No	No	99