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Section 1 – New Reason Code for 2007.3 Migration

C32/U0117

Section 2 – Language Changes – Change in language and/or Regulation(s)

C26/U0161, C27/U0162, C60/U0072, C61/U0169, S63/C0248, S64/U0150, S86/U0160,
S87/U0061, U66/C0070, U66/D0003, U70/D0155, V14/D0026, X23/C0265, X23/D0160

Section 3 – Language Changes for MBI-WPD – Removal of Message

U70/D0155

Section 4 – Language Changes to Attachments

E0002, E0019, E0028, E0029, E0031

Section 5 – Language Changes to Resource Attestation Attachments

S0020, S0021

Section 6 – Language Changes to Renewals

8201, 8202, 8301, 8303, 8305, 8308, 8309, 8313, 8314, R0020, R0034
R0042, R0043, R9000, R9001, R9004, R9006, R0033

Section 7 – Chronic Care Code Changes- Allowing Earned Income

V41/U0022, V42/U0042, V45/U0051, V47/U0026, V49/U0049, V50/U0057, V52/U0014,
V55/U0040, V60/U0047, V63/U0056

Section 8 – Presumptive Eligibility

Section 1 - New Reason Code for 2007.3 Migration

C32/U0117

Undercare

Reason Code	Paragraph Number	Description	CT
C32	U0117	Continue MA Payment of Health Insurance Premiums	20

Section 2 - Language Changes – Change in language and/or Regulation(s)

C26/U0161, C27/U0162, C60/U0072, C61/U0169, S63/C0248, S64/U0150, S86/U0160, S87/U0061, U66/C0070, U66/D0003, U70/D0155, V14/D0026, X23/C0265, X23/D0160,

Denial

Reason Code	Paragraph Number	Description
U66	D0003	Deny MA/FHP/FPBP Currently in Receipt of Assistance within the Same District Title, Language and Reg. change
V14	D0026	Deny MA/FHP Failed to Complete Declaration of Citizenship/ Immigration Status Language and Reg. change
X23	D0160	Deny MA/FHP Attestor Failed to Provide Amount of Resource(s) at Application Reg. change

Undercare

Reason Code	Paragraph Number	Description
C26	U0161	Community Coverage without Long Term Care to Community Coverage with Community- Based Long Term Care Added Income to Language and Reg. change
C27	U0162	Community Coverage with Community- Based Long Term Care to All Covered Care and Services, FP Reg. change

Section 2 - Language Changes – Change in language and/or Regulation(s) Con't

Undercare Continued

Reason Code	Paragraph Number	Description
C60	U0072	Community Coverage without Community- Based Long Term Care to All Covered Care and Services, FP Added Income to Language and Reg. change
C61	U0169	Community Coverage without Community- Based Long Term Care to All Covered Care and Services, S/CC Added Income to Language and Reg. change
S64	U0150	All Covered Care and Services to Community Coverage without Long Term Care, Failure to Provide Documentation of Income and/or Resources, No Spenddown Added Income to Language and Reg. change
S86	U0160	Community Coverage with Community- Based Long Term Care to Community Coverage without Long Term Care Due to Failure to Provide Documentation of Income and/or Resources at Renewal, No Spenddown Added Income to Language and Reg. change
S87	U0061	Continue MA Unchanged without Long Term Care (Attestor or Current Documenter Failed to Verify) Language and Reg. change

Discontinuance

Reason Code	Paragraph Number	Description
U66	C0070	Discontinue MA/FHP/FPBP Currently in Receipt of Assistance within the Same District Title and language change
S63	C0248	Discontinue MA/FHP, Failure to Provide Information to Clear Up Discrepancy Added Income to Language and Reg. change
X23	C0265	Failed to Provide Amount of Income and/or Resource(s) at Renewal Added Income to Language and Reg. change

Section 3 – Language Changes for MBI-WPD – Removal of Message

U70/D0155

Denial

Reason Code	Paragraph Number	Description
U70	D0155	MBI-WPD Ineligible, Failure to Submit Proof of Work, MA Ineligible Due to Excess Income and/or Resources, FHP Ineligible Due to Excess Income and/or Resources or Equivalent Health Insurance

Removed Message # 5 FHP Public Employee.

Section 4 – Language Changes to Attachments

E0002, E0019, E0019, E0028, E0029, E0031,

Paragraph Number	Description
E0002	Explanation of the Excess Income Program Language Changes
E0019	Health Care Programs for New Yorkers Paragraph removed for “Special Programs for Children”
E0028	Explanation of the Income and Resource Documentation Requirements For Medicaid Title Changed Income Added to Language, Other Minor Language Changes
E0029	HIPPA Privacy Notice Minor Language Changes
E0031	Child/Teen Health Program Information Reference to Child Health Plus A has been removed

Section 5 – Language Changes to Resource Attestation Attachments

S0020, S0021

Paragraph Number	Description
S0020	Community Coverage: No Long Term Care Added Income to Language

Undercare

S0021 Community Coverage with Community- Based Long Term Care
(Undercare)
Language Changes

Section 6 – Language Changes to Renewals

8201, 8202, 8301, 8303, 8305, 8308, 8309, 8313, R0020, R0034
R0042, R9000, R900, R0033

Reason Code	Paragraph Number	Description
Z61	8201	Cover Letter for Renewal Form
Z61	8202	Cover Letter for Renewal Form, SSI Related

Language changed regarding how recipients will verify income and/or resources.

“You do not need to send proof of income and resources at this time unless the renewal form says you must. If you have to provide proof of income and/or resources at a later date, you will be contacted and told what to send.”

Z61, Z62 8301 Name – DOB – SSN, Question # 1

Z61.Z62 8303 Household, Question # 3

References to “Child Health Plus A” have been removed.

Z61.Z62 8305 Address, Question # 5

Z61, Z62 8308 Income, Question # 8

Z61, Z62 8314 Resources, Question # 12

Question #12 additional instructions **“If you do not have any resources, please write “NONE” under Resources Type.”**

An additional message has been added for 8305 and 8308; message choice will be linked to the RVI Code and CT.

Question A - For use with CT 20 when RVI Code equals 1, 2, or 4.

Question B - For use with CT24 and CT20 when RVI Code equal 3 or 9

Z61, Z62 8309 Health Insurance, Question # 9

Message A and B have had minor changes to language and an additional message choice has been added.

**Message C - If you are not insured by your employer now, does the employer offer health insurance?
Yes or No**

If yes, employer name and telephone number: _____.

We maybe able to pay the cost of your health insurance premiums if it is cost effective.

Z61, Z62 8313 Terms, Rights and Responsibilities

Child Health Plus A has been removed, Minor language changes.

Section 6 – Language Changes to Renewals Continued

Reason Code	Paragraph Number	Description
N/A	R9000	QI-1 Documentation Checklist For Renewals

Proof of Income and Residency has been removed.

Z61, Z62 R9001 Documentation Checklist for Renewal Form

Language regarding Child Health Plus A has been removed.

N/A R9004 How Medicaid Helps You and Your Family

Language regarding Child Health Plus A has been removed.

N/A R9006 QI-1 Re-Enrollment Form

Under Monthly Income it now states “List Amounts before any taxes or other deductions”.

Z46 R0020 MA Recertification SSI Related Mail-In SLIMB

Recipient must now “submit proof of health insurance premiums”, no longer asking for proof of income and/or value of resources.

Z48 R0033 Cover Letter for FPBP Renewal Form

Proof of Income has been removed.

Z48 R0034 Documentation Checklist for FPBP Renewal

Proof of Income and Residency/ Home Address has been removed.

Z47 R0042 Notice of Renewal (Recertification) For BCCCTP

**Program Office name has been changed to “Office of Health Insurance Programs.”
Also, requested items for Income and Resources and current address have been removed.**

N/A R0043 Notice of Renewal (Recertification) for QI-1 (Upstate and Downstate)

Recipient must now submit proof of health insurance premiums, no longer asking for proof of income and/or resources.

Section 7 – Chronic Care Code Changes- Allowing Earned Income

V41/U0022, V42/U0042, V45/U0051, V47/U0026, V49/U0049, V50/U0057, V52/U0014, V55/U0040, V60/U0047, V63/U0056

Undercare

Reason Code	Paragraph Number	Description
V41	U0022	Recalculation of Contribution to Chronic Care (Individual) Income Only
V42	U0042	Recalculation of Contribution to Chronic Care (individual) Resource Only
V45	U0051	Recalculation of Contribution to Chronic Care (Individual) No change
V47	U0026	Recalculation of Contribution to Chronic Care (Individual) Income/Resource Contribution
V49	U0049	Recalculation of Contribution to Chronic Care (Individual) No Liability
V50	U0057	Recalculation Contribution to Chronic Care (Individual) Resource Contribution, Income Contribution Same

Opening/Undercare

V52	U0014	Intent to Establish Liability toward Chronic Care (Individual) Income Only
V55	U0040	Intent to Establish Liability toward Chronic Care (Individual) Income/Resource Contribution
V60	U0047	Intent to Establish Liability toward Chronic Care (Individual) No Liability
V63	U0056	Intent to Establish Liability toward Chronic Care (Individual) Resource Only

Section 8 – Presumptive Eligibility

As noted in the WMS Section of this coordinator letter a subset of CNS reason codes are being allowed with Case Type 21 and Transaction Type 09. Timely notices will be generated with no A/C language included.