

Section II - Change in Printing Order of CNS Generated renewals for Case Types 20 and 24
Z61/8201, Z62/8202, Z05/R0046, Z49/R0044

The order in which renewal questions are generated by CNS does not match HEART data entry screens; therefore, to assist in processing, all CNS generated renewals (included those generated by the districts) will be reorganized as follows:

- 8300 (Title)
- 8305 (Address)
- 8301 (Name-DOB-SSN) *Revise to remove title. Title now used in 8300.
- 8303 (Household)
- 8304 (Pregnancy) *Reference to question numbers revised to reflect the new order.
- 8309 (Health Insurance)
- 8311 (Illness, Injury, Disability)
- 8310 (Parent or Spouse Outside the Home)
- 8306 (Housing Expense)
- 8308 (Income) *Reference to question numbers revised to reflect the new order.
- 8307 (Citizenship, Immigration)
- 8314 (Attestation of Resources)
- 8315 (Recipient Signature)
- E0039 (HIPPA Privacy Notice)
- 8313 (Terms, Rights, Responsibilities)
- E0031 (Child/Teen Health Program Information)
- R9001 (Document Checklist for Renewal)

Section III: Reason code to go from worker fill to no-fill
X54/Y0003

The following reason code is now a no-fill code. These Notices require no additional information from the worker and do not need to be put into the CNS subsystem prior to the WMS transaction. The Notice Number is system generated during the nightly batch process.

Opening

Reason Code	Paragraph Number	Description
*X54	Y0003	Accept Medicare Buy-In Program, QMB

Section IV: New Language
C52/U0206, C51/Y0081, C54/U0205, C89/C0304, C90/C0305, C91/U0209, C92/U0207, C93/U0210, S97/U0222

According to 11 OHIP/ADM-1, if the recipient fails to document income and/or current resources at renewal, coverage would be reduced to current documenter. S64/U0150 "All Covered Care and Services to Community Coverage" does not accurately reflect policy. Existing Reason Code S64 will be discontinued. Revised language will be generated by new Reason Code S97.

Undercare

Reason Code	Paragraph Number	Description
S97	U0222	All Covered Care and Services to Community Coverage with LTC Due to Failure to Provide Documentation of Income and/or Resources, No Spenddown

Effective April 1, 2011 eight new reason codes were added for OMH Psychiatric Centers. These follow the guidelines for the prisoner suspension process.

Opening

Reason Code	Paragraph Number	Description
C51	Y0081	(Opening) Suspend MA Coverage 21-64 Year Old Admitted to a Psychiatric Center (Upstate)

Undercare

Reason Code	Paragraph Number	Description
C52	U0206	Coverage restored: Suspended 21-64 Year Old in Error, Individual Not Admitted to a Psychiatric Center (Upstate)
C54	U0205	Suspend MA Coverage 21-64 Year Old Admitted to a Psychiatric Center (Upstate)
C91	U0209	FHP to MA, Individual Discharged From a Psychiatric Center (Upstate)
C92	U0207	Reinstate FPBP, Individual Discharged From a Psychiatric Center
C93	U0210	Reinstate MA, Individual Discharged From a Psychiatric Center (Upstate)

Discontinuance

Reason Code	Paragraph Number	Description
C89	C0304	Discontinue Medicare Savings Program for a 21-64 Year Old Individual Admitted to a Psychiatric Center (Upstate)
C90	C0305	Discontinue MA Payment of Health Insurance Premiums of Individual Admitted to and OMH Psychiatric Center

Section V: Notice being eliminated
S64/U0150

Undercare

Reason Code	Paragraph Number	Description
S64	U0150	All Covered Care and Services to Community Coverage without LTC Due to Failure to Provide Documentation of Income and/or Resources, No Spenddown

Section VI: Message changed and message selection added to language
M23/M0003

Due to some counties having Medicaid Advantage products and some not, the following message #4 needed to be added and message #3 changed for this reason code.

Message 3 (Medicare with Med Adv)

You now have Medicare. Persons with Medicare cannot be in Medicaid Managed Care. However, you have the option to join Medicaid Advantage, a managed care program for those with Medicaid and Medicare. To find out more, call the Managed Care unit.

Message 4 (Medicare NO Med Adv)

You now have Medicare. Persons with Medicare cannot be in Medicaid Managed Care.

Informational Letters – Transaction Type = 00

Reason Code	Paragraph Number	Description
M23	M0003	Disenrollment Due to Exclusion from Managed Care

Section VII: New pull dates for reason code
C63/C0171

Originally the date that was pulled for this reason code C63 used on case type 22 “This is to inform you that we will continue Medicaid until _____ for:” was calculated T+10 end of the month. It was determined by policy that this date should actually be the MA Coverage “To” date just like reason code C65 used on case types 20 and 24.

Discontinuance

Reason Code	Paragraph Number	Description
C63	C0171	Disc MA-SSI Not a Resident of District (Upstate)