

DOH Contact: Local District Support Unit (518) 474-8887

CNS Changes

Section I: New CNS Opening Reason Code created for immediate referrals to LDSS by NYSoH.
Section II: Revision, deletion, and/or addition of Upstate CNS Denial Notices.

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New Opening Reason Code with renewal questions:

In order for Upstate to handle immediate referrals that are MLTC, waivers, SNP, FFC community based service, etc, a new opening/renewal reason code is needed. It will be process the same way as the “H2W-Renewal Letter Individual Transferred from NYSoH” except the renewal cover letter and questions will be slightly different.

****NOTE: Like the H2W, this reason code will produce all the renewal questions and the automated or manual renewal is *NOT REQUIRED*. A Renewal AFA will not be allowed to be entered in screen 4 when H2W or H3W is used.**

Reason Code	Paragraph #	Description
H3W	Y0102	Opening/Renewal letter to authorize Medicaid coverage for immediate referral from NYSoH (Includes renewal questions)

Section II: Revision, deletion, and/or addition of Upstate CNS Denial Notices

Eliminated notice reason codes:

The following notices are being eliminated due to they either reference FHP eligibility and/or based on pre-ACA eligibility rules, or no-longer reflects current policy or has already been replaced by new Magi-Like reason code:

Reason Code	Paragraph #	Description
S88	D0158	Denied MA, child/SSI-R child 1-18, due to excess income and/or resources, FPBP ineligible due to excess income or FPBP eligible, but declines
U34	D0116	Denied MA due to excess income and/or resources, FHP ineligible due to excess income, non-ESHI, federal employee, or ESHI not cost effective and FPBP ineligible due to excess income or eligible, but declines, FP
U73	D0065	Denied MA for emergency medical service only due to not a citizen, qualified alien or permanently residing in the US under color of law (PRUCOL) and ineligible due to excess income, S/CC

X45	D0123	Denied MA due to excess income and/or resources, FHP ineligible due to failed to choose a plan, FP or MA SSI-R
X46	D0124	Denied MA due to excess income, FHP ineligible due to failed to choose a plan, SCC
X47	D0125	Denied MA due to excess income, FHP ineligible due to failed to choose a plan, FNP Parent

The following notices, issued when an MBI-WPD recipient fails to meet program requirements, are directed to pre-ACA eligibility categories, include FHP messages, inaccurate citations and pull incorrect MBL data elements and must be removed from production:

Reason Code	Paragraph #	Description
U62	D0156	Deny MBI-WPD Not Certified Disabled, MA ineligible due to excess income, FHP ineligible due to excess income, equivalent insurance or federal employee (FP)
U64	D0157	Deny MBI-WPD Not Certified Disabled, MA ineligible due to excess income, FHP ineligible due to excess income, equivalent insurance or federal employee (SCC)
U74	D0162	Deny MBI-WPD Not Certified Disabled, MA ineligible due to excess income, FHP ineligible due to excess income, equivalent insurance or federal employee (FNP)

New notice reason code:

The following MBI-WPD notice reason codes, U62, U64, and U74, will be replaced with the following new notice that reflects current policy:

Reason Code	Paragraph #	Description
D77	D0332	Deny MBI-WPD Not Certified Disabled, MA Ineligible (MAGI-like)

Notice language revisions:

The following notices have been revised to remove any FHP references, revise outdated or inaccurate citations, wording and/or to reflect current policy:

Reason Code	Paragraph #	Description
*E09	D0064	Denied MA, Photo ID refusal
*E19	D0048	Denied MA/FPBP, Death before determination, insufficient information to make determination
*E60	D0006	Denied MA/FPBP, Unable to locate
*E61	D0005	Denied MA, Not a resident of district

*E63	D0004	Denied MA/FPBP, Not a resident of state
*E79	D0001	Denied MA/FPBP, Not provided in current living arrangement
*E80	D0043	Denied MA, Fail to provide required information about non-applying LRR
*F12	D0011	Denied MA, Failure to apply for Social Security Benefits
*F29	D0018	Denied MA, Entered state to obtain medical care
*F40	D0008	Denied MA, Failure to enroll in a Group Health Plan
*H15	D0050	Denied MA/FPBP, Voluntary withdrawal of application
U20	D0039/ D0040	Denied MA/FPBP, Failed to provide verification of factors which affect eligibility, did not state unable to get information (Intro/summary)
U21	D0041/ D0042	Denied MA/FPBP, Failed to provide verification of factors which affect eligibility, Unable to get information, but did not provide a good reason (Intro/summary)
U60	D0154	Denied MBI-WPD, Not currently working, MA ineligible
U66	D0003	Denied MA/FPBP, Currently in receipt of assistance within same district, No AC
U70	D0155	Denied MBI-WPD, Failed to submit proof of work, MA ineligible
U79	D0070	Denied MA/FPBP, Concurrent benefits Intra or Inter state
V13	D0014	Denied MA, Failure to utilize benefits
V14	D0026	Denied MA, Fail to complete Declaration of Citizenship/Immigration status
V17	D0137	Denied MA, Incorrect/Fraudulent SSN
V30	D0007	Denied MA, Failure to comply with IV-D requirements
V31	D0013	Denied MA/FPBP, Failed to provide and/or apply for SSN
X23	D0160	Denied MA, Attestor failed to provide amount of resource(s) at application