

**CNS Paragraph Form**

Date: 01.21.09

<b>Program Area</b>	<b>03</b>	<b>(01=PA, 02=FS, 03=MA, 04=HP)</b>
<b>Paragraph Number</b>	<b>S0025</b>	
<b>Version Number</b>	<b>00004</b>	
<b>Effective Date</b>	<b>2009</b>	<b>(YYMMDD)</b>
<b>Title</b>	<b>Community Coverage with Community-Based LTC (Acceptances)</b>	
<b>Comment</b>		
<b>Reason Code</b>		

Message 2 (Community Coverage with Community-Based LTC) (S0025)

Since you requested we determine your eligibility for community coverage with community-based long-term care, we did not review your resources for the transfer of assets look-back period (up to 60 months) and you will not be covered for the following nursing facility services:

- Nursing home care, other than short-term rehabilitation
- Nursing home care provided in a hospital
- Hospice in a nursing home
- Managed long-term care in a nursing home
- Intermediate care facility services

If you need nursing home services, notify your social services district immediately. We will then arrange to review documentation of your resources for the transfer of assets look-back period (up to 60 months) to find out if you are eligible for Medicaid coverage for these services.

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Message 2 (Community Coverage with Community-Based LTC) (S0025)

Dado que usted solicito que determinaramos su habilitacion para cobertura local con servicios de atencion medica a largo plazo de base comunitaria, no hicimos una revision de sus recursos en cuanto al traspaso de bienes de un periodo retroactivo (de hasta 60 meses) y no recibira cobertura por los siguientes servicios de enfermeria:

- Atencion medica en un hogar de convalecencia (nursing home), excepto rehabilitacion a corto plazo.
- Atencion medica tipo hogar de convalecencia (nursing home) proporcionada en un hospital
- Cuidados paliativos en un hogar de convalecencia (nursing home)

- Atencion medica administrada de tratamiento a largo plazo en un hogar de convalecencia (nursing home)
- Centro de servicios de atencion medica intermedia

Si usted necesita servicios de enfermeria especializada, notifique inmediatamente su distrito de servicios sociales. Haremos entonces una revision de documentacion de recursos referente al traspaso de bienes de un periodo retroactivo (de hasta 60 meses) para averiguar si reune los requisitos de Medicaid para cobertura de estos servicios.

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