



STATE OF NEW YORK DEPARTMENT OF HEALTH

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LOCAL COMMISSIONERS MEMORANDUM

Transmittal No: 03 OMM LCM-1

Date: September 11, 2003

Division: Office of Medicaid
Management

TO: Local District Commissioners
Local District CAH Coordinators

SUBJECT: Care At Home Waiver Program Transfers

ATTACHMENTS: None

The purpose of this LCM is to inform the local departments of social services about the procedures for transferring a child already enrolled in the Care at Home (CAH) Medicaid waiver program (CAH I and CAH II). Such a transfer could involve: transfer between CAH I and CAH II; transfer from one county to another county; or transfer to a different CAH waiver (CAH III, IV and VI).

Oversight on a daily basis for CAH I and II is the responsibility of the State Department of Health (SDOH), in conjunction with the local departments of social services (LDSS). For CAH III, IV and VI daily oversight is the responsibility of the Office of Mental Retardation and Developmental Disabilities (OMRDD) and its local Developmental Disabilities Service Offices (DDSOs). Both state agencies (SDOH and OMRDD) and their corresponding local offices must be informed of transfers involving their waivers.

Every LDSS has a designated CAH Coordinator and every DDSO has CAH staff. Current lists of names, addresses and contact numbers are maintained by State DOH and OMRDD.

A. CAH RESTRICTION/EXCEPTION (R/E) CODE

Every child in a CAH waiver has a Medicaid Restriction/Exception (R/E) code entered in his/her WMS file that is specific to the waiver he/she is enrolled in. This code allows payment for case management services when the corresponding rate code is used for that waiver and for the payment for skilled home care. Transfer and enrollment dates in the new waiver must be prospective in order to accommodate system changes, which must occur to complete the transfer process.

Appropriate CAH Restriction/Exception (R/E) codes for the above waivers are: code 62 (CAH I) or 63 (CAH II), code 64 (CAH III), 65 (CAH IV) and 67 (CAH VI).

In all waivers, the LDSS is responsible for making the changes to the R/E code on the WMS file. SDOH will provide technical assistance when necessary.

B. TRANSFER BETWEEN CAH I AND CAH II

1. A child's medical condition and/or needs may change requiring transfer between CAH I and II.
2. The case manager and LDSS CAH Coordinator will conference regarding the appropriateness of the transfer. The LDSS CAH Coordinator will then submit the appropriate paperwork and documentation to SDOH for approval.
3. If the transfer is approved, a letter will be sent from SDOH notifying the LDSS to end date the current Restriction/Exception R/E code on the child's WMS file and activate the new R/E code on the appropriate date.

C. TRANSFER FROM ONE COUNTY TO ANOTHER COUNTY WHEN A CHANGE OF RESIDENCE OCCURS

1. When a child is changing his/her county of residency, the case manager must notify all appropriate local agencies (both in the county of original residence and in the new county) as soon as a date for the move is identified. The LDSS will follow all established procedures for closing and opening Medicaid cases when a change of county residency occurs. The case manager must insure that the Medicaid applications for the child and family are completed at the new county and that the child's DSS 639 is current. The case manager will share all new documentation with the new county. In return, the CAH coordinator in the new county will complete a new plan of care to be shared with the case manager.
2. The LDSS in the original county will end date the CAH R/E code on the child's file when the MA case is closed and the LDSS in the new county will enter the CAH R/E code on the child's file when the MA case is opened.

D. TRANSFER FROM CAH I OR II TO CAH III, IV OR VI

1. The CAH case manager will notify the LDSS and the DDSO, in writing, that the family is requesting a transfer from a SDOH CAH waiver to an OMRDD CAH waiver.

2. The child will be screened by the OMRDD DDSO CAH coordinator to determine whether the child meets the eligibility criteria for CAH III, IV or VI.
3. If eligible, the DDSO will send the child's application to OMRDD CAH Central Office for review and approval. The application should state that the child is already enrolled in CAH I or II. If approved and there are no immediate openings, the child will be placed on the waitlist for CAH III, IV or VI.
4. When there is an opening, a letter will be sent from OMRDD, co-signed by SDOH, notifying the LDSS that the child is being transferred to the CAH III, IV or VI waiver. The appropriate R/E code and effective date will be authorized in the letter. The LDSS will end date the R/E code on the child's file and activate the new R/E code on the waiver enrollment date. Both OMRDD and LDSS will have already agreed on a discharge date from the original waiver and a new enrollment date into the new waiver.

E. TRANSFER FROM CAH III, IV OR VI TO CAH I AND II

1. The CAH case manager must notify the OMRDD DDSO & LDSS staff that a family is requesting to transfer into a SDOH CAH waiver.
2. The DDSO CAH coordinator and the case manager will conference regarding the appropriateness of the transfer. The family should be encouraged to participate in this discussion and at this time, the family should also be informed about other matters related to a transfer from an OMRDD waiver to a SDOH waiver.
3. The DDSO coordinator will contact OMRDD CAH Central Office and the LDSS to discuss plans for transferring the child to the SDOH waiver.
4. If the child is eligible for the SDOH waiver and all parties agree it is appropriate to proceed with the transfer, the case manager will forward a written transition plan for the child to the DDSO CAH coordinator. The CAH case manager will send the child's application to the LDSS requesting consideration for acceptance into the CAH I or II waiver.
5. When the child is transferred into CAH I or II, an enrollment letter will be sent from SDOH notifying the LDSS to activate the new R/E code on the waiver enrollment date. The LDSS will also receive a letter from OMRDD requesting that the child's CAH III, IV or VI case be closed on the day prior to the new effective date for CAH I or II.

Please share this LCM with the Care At Home Coordinator in your county. If you have any questions, please contact Maria MacLasco at (518) 473-5313 (e-mail mxm12@health.state.ny.us).

Kathryn Kuhmerker
Deputy Commissioner