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GENERAL INFORMATION SYSTEM  
**DIVISION:** Office of Medicaid Management

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**GIS** 01 MA/017

**TO:** Local District Commissioners

**FROM:** Kathryn Kuhmerker, Deputy Commissioner  
Office of Medicaid Management

**SUBJECT:** Retroactive Federal Financial Participation (FFP)  
Reimbursement for Inpatient Medical Costs for Involuntarily  
Confined Individuals

**EFFECTIVE DATE:** Immediately

**CONTACT PERSON:** Local District Support Unit (518)474-9130 Upstate  
(212)268-6855 NYC

A Local Commissioner Memorandum, 01 OMM LCM-4, was issued May 3, 2001 regarding the above referenced subject. The LCM advised that retroactive FFP reimbursement will be made only for those inmates who were in receipt of or eligible for Medicaid at their incarceration and who received certain inpatient services specified in the LCM.

During the May 1, 2001 Medicaid Technical Assistance Group (M-TAG) telephone conference, questions were asked about determining Medicaid eligibility for an inmate. Specifically, it was asked if the individual was in a shelter prior to incarceration, could the information collected/documentated by shelter staff be used to determine Medicaid eligibility. Another question was asked if Medicaid could be determined for those cases which were previously denied Medicaid eligibility for inpatient services because the individual was an inmate.

The answers provided during the M-TAG telephone conference require further elaboration. Office of Counsel has advised that in order to submit a claim for retroactive FFP reimbursement for an otherwise Medicaid eligible inmate, an application for Medicaid had to be completed and submitted to the local department of social services. In the event that an application was not completed, retroactive FFP reimbursement is not available for the specified inpatient services. Therefore, retroactive FFP reimbursement would only be available if an inmate was in receipt of Medicaid at the time of incarceration, an application was previously submitted and denied for an otherwise Medicaid eligible applicant due to inmate status, or the specified inpatient services were provided to the otherwise Medicaid eligible inmate no earlier than three-month retroactive period prior to application.

In addition, a question was raised about inmate status during the pre- and post arraignment periods. State staff advised that the issue is whether the person is an inmate of a public institution. If the person has not been remanded to a public institution and continues to live in the community, the individual's Medicaid eligibility is determined as residing in the community.

Any questions regarding this message should be directed to the Bureau of Local District Support.