



# STATE OF NEW YORK DEPARTMENT OF HEALTH

Corning Tower    The Governor Nelson A. Rockefeller Empire State Plaza    Albany, New York 12237

Antonia C. Novello, M.D., M.P.H.  
*Commissioner*

Dennis P. Whalen  
*Executive Deputy Commissioner*

<b>INFORMATIONAL LETTER</b>
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**TRANSMITTAL:** 06 OMM/INF-2

**TO:** Local District Commissioners,  
Medicaid Directors, Temporary  
Assistance Directors and  
CNS Coordinators

**DIVISION:** Office of Medicaid  
Management

**DATE:** July 10, 2006

**SUBJECT:** Revision of the LDSS-4807: "HEALTH CARE PROGRAMS FOR NEW YORKERS"

**SUGGESTED**

**DISTRIBUTION:** Local District Commissioners  
Medical Assistance Staff  
Temporary Assistance Staff  
Staff Development Coordinators  
CNS Coordinators

**CONTACT PERSON:** Local District Liaison  
Upstate: (518) 474-8887  
New York City: (212) 417-4500

**ATTACHMENTS:** LDSS-4807, rev. 01/06, "HEALTH CARE PROGRAMS FOR NEW YORKERS"

**FILING REFERENCES**

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
					GIS 03 MA/007

The purpose of this Office of Medicaid Management/Informational Letter (OMM/INF) is to inform local districts that the LDSS-4807: "HEALTH CARE PROGRAMS FOR NEW YORKERS" has been revised.

A summary of the revisions follows.

1. The title and footer of the document were reformatted.
2. The revision date was changed to (1/06).
3. To accommodate the added information, the document is now printed in a smaller font on legal size paper. The English version is on the front and the Spanish version is on the reverse side.
4. Under "Programs for Adults:", "**If you get Temporary Assistance or SSI, can you get Medicaid?**", the following sentence was added to the end of the paragraph:

"People who get Medicaid can get Family Planning Services."

5. Under "Programs for Adults:", "**What if you do not qualify for Medicaid or Family Health Plus? Is there any other help?**", a paragraph was added concerning the "Cancer Services Program". The paragraph reads as follows:

"The New York State Department of Health Cancer Services Program provides breast, cervical, and colorectal cancer screening at no cost to eligible women and men who are uninsured or cannot pay for these services. Screening services are available in every county/borough in NYS. For more information call 1-800-422-6237."

6. Under "Programs for Adults:", three additional paragraphs were added concerning, "Medicaid Buy-In Program For Working People With Disabilities" (MBI-WPD), and "Medicare Part D". These paragraphs read as follows:

**"If you have a disability and are working and have more income and resources than are allowed for Medicaid, is there any way to get or keep Medicaid health care coverage?"**

Yes, if you are between 16 and 64 years old, have a disability as defined by the Social Security Administration, and are working, you can have income up to 250% of the FPL and resources as high as \$10,000 by participating in the Medicaid Buy-In program for Working People with Disabilities (MBI-WPD). A monthly premium may be charged for participants in this program who have countable income between 150% and 250% of the FPL.

**If you receive Medicare, is it possible to get help in paying for your prescription drugs even if you are not eligible for Medicaid or the Medicare Savings Program?**

If you are entitled to Medicare Part A or Medicare Part B, you are eligible to receive prescription drug benefits through Medicare Part D. To get more information about this program, you may call 1-800-Medicare (1-800-633-4227). You may also be eligible to receive extra help in paying the premiums, coinsurance and deductibles for the Medicare Part D

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prescription drug benefit. To find out more about getting this extra help, you may call 1-800-772-1213.

**If you are currently receiving your prescription drugs through the Medicare prescription drug program and your Medicaid case is being closed, will you lose your Medicare prescription drug benefit?**

If your Medicaid benefit is being discontinued, and you are currently receiving your prescription drugs through Medicare instead of Medicaid, any action to discontinue your Medicaid benefits will have no effect on the prescription drug coverage that you are receiving through Medicare, at least until the end of this calendar year (as long as you continue to be eligible for Medicare Part A or Medicare Part B). If you have any questions about your Medicare prescription drug benefit or to find out how your Medicare prescription drug benefit might change next year, please call 1-800-Medicare (1-800-633-4227). If you are moving out of State, you must notify the Social Security Administration (1-800-Medicare) of your new address, as you will have to enroll in a plan that is offered in your new state of residence."

The 01/06 version of the LDSS-4807: "HEALTH PROGRAMS FOR NEW YORKERS" is currently available. To order this form, the local district should submit a request to:

New York State Department of Health  
Empire State Plaza  
Corning Tower  
Room 2029  
Albany, NY 12237  
Attention: Michael Margiasso.

The document may be ordered at FAX# (518) 486-1432.

Local districts should begin distributing the 01/06 version immediately. All copies of the 05/05 version should be destroyed. The LDSS-4807 must be included with most acceptance, closing and denial notices, and given to each applicant with the client information booklet, LDSS-4148B: "New York State What You Should Know About Social Services Programs". The LDSS-4807 is not needed when the recertification package is mailed, or when the recipient has died, is not a NYS resident or is in prison. The LDSS-4807 is also not required when the temporary assistance case is closed or decreased and Medicaid is continued unchanged or is Rosenberged. More information concerning the distribution of the LDSS-4807 can be found in GIS 03 MA/007: "Introduction of the LDSS-4807: 'HEALTH CARE PROGRAMS FOR NEW YORKERS'".

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Brian J. Wing  
Deputy Commissioner  
Office of Medicaid Management