



STATE OF NEW YORK DEPARTMENT OF HEALTH

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

INFORMATIONAL LETTER

TRANSMITTAL: 11 OHIP/INF-1

DIVISION: Office of Health
Insurance Programs

TO: Commissioners of
Social Services

DATE: January 19, 2011

SUBJECT: Elimination of Paper Notification of Chapter 621
Status, OMRDD-5 and OMH-5

**SUGGESTED
DISTRIBUTION:** Medicaid Directors
Staff Development Coordinators

CONTACT PERSON: Local District Liaison
Upstate: (518) 474-8887
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ATTACHMENTS: None

FILING REFERENCES

| Previous ADMs/INFs | Releases Cancelled | Dept. Regs | Soc. Serv. Law & Other Legal Ref. | Manual Ref. | Misc. Ref. |
|-----------------------|-----------------------|------------|-----------------------------------------|-------------|------------|
| | | | SSL 368- a(1)(f) SSL 365(5) | | |

I. Purpose

This Informational Letter (INF) advises local districts that the forms used by the Office of Mental Health (OMH) and by the Office For People With Developmental Disabilities (OPWDD), formerly known as the Office of Mental Retardation and Developmental Disabilities (OMRDD), to provide notification and documentation of Chapter 621 eligible individuals released from an OMH or OPWDD facility will be discontinued effective immediately. These forms are the OMH-5 and OMRDD-5.

II. Background

Chapter 621 of the Laws of 1974 originally established the requirement that the State reimburse local Departments of Social Services (LDSS) for the full cost of Medicaid expenditures made on behalf of individuals who are discharged from certain Mental Hygiene facilities after having been a patient for five or more continuous years. Such individuals have become known as "Chapter 621 eligibles". Since 1982, OMH and OPWDD have been responsible for notifying the appropriate LDSS when a Chapter 621 eligible individual is being discharged from care and will require assistance from the LDSS. The OMH-5 and OMRDD-5 forms were specifically designed to notify LDSS of such discharge and status, and have been the official forms recognized by the State Department of Health (SDOH) as documentation of an individual's 621 status. Once notified of an individual's 621 status, LDSS were responsible for coding the WMS record with State/Federal charge code 05 as a means of preventing a local share from being charged for Medicaid expenditures.

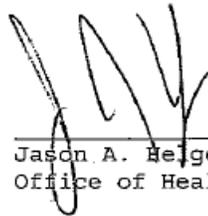
Between 2004 and 2006, OMH, OPWDD, SDOH and LDSS worked together to improve the process of identifying Chapter 621 eligibles. The OMH and OPWDD conducted an extensive record search to collect records identifying persons that had attained 621 status. This information was used to provide the baseline of information for automatic updates of 621 eligibility status to the eMedNY claims payment system.

In order to automatically update 621 statuses on the eMedNY claims file, a 621 Master File was created by OMH, OPWDD and SDOH. This Master File contains a Medicaid Client Identification Number (CIN) and date of 621 facility discharge. This file is used by the State's fiscal agent, Computer Sciences Corporation (CSC), during Medicaid claims processing. All claims are processed against the 621 Master File. If the CIN on a claim matches the CIN on the Master File and the date of 621 facility discharge, no local share is charged.

This Master File is updated on a monthly basis. Every month, OMH and OPWDD send SDOH records of potential 621 eligibles with the date of facility discharge. The SDOH then goes through a multiple step matching process to identify the CINs, and these CINs, with the corresponding 621 discharge dates, are sent to CSC. The CSC adds these records to the master list of all Medicaid enrollees that have been identified by either OMH or OPWDD as 621 eligibles.

III. Program Implications

Inasmuch as an automated process has been established to identify and process claims for Chapter 621 eligibles, manual/paper notification to LDSS is no longer necessary. Therefore, effective immediately OMH and OPWDD will no longer be responsible for notifying the appropriate LDSS through use of the OMH-5 or OMRDD-5 when a Chapter 621 eligible individual is being discharged from their care. Such notification will be electronically sent by OMH and OPWDD to SDOH which will utilize this information in paying claims through the eMedNY system. The Chapter 621 information used by eMedNY is the sole source of documentation of the individual's eligibility for Chapter 621 status. Districts wishing to confirm an individual's 621 status may check eMedNY. The eligibility summary (under the eligibility tab) contains a field in the right top corner, labeled "OMR/OMH 621 Eligibles Discharge Date". An individual who has been identified as 621 eligible will have a date displayed in this field. Absent a date in this field, the individual does not meet the criteria for 621 status. Districts will no longer need to code the WMS record with State/Federal charge code 05.



Jason A. Helgeson, Deputy Commissioner
Office of Health Insurance Programs