

NEW YORK STATE
DEPARTMENT OF SOCIAL SERVICES
40 NORTH PEARL STREET, ALBANY, NEW YORK 12243



BARBARA B. BLUM
Commissioner

[An Administrative Directive is a written communication to local Social Services Districts providing directions to be followed in the administration of public assistance and care programs.]

ADMINISTRATIVE DIRECTIVE

TRANSMITTAL NO.: 80 ADM-84
[Medical Assistance]

TO: Commissioners of Social Services

SUBJECT: Implementation of Stenson Court Decision

DATE: October 15, 1980

SUGGESTED DISTRIBUTION: All MA Staff
All SSI Staff

CONTACT PERSON: All questions regarding this release should be directed to your county representative at 800-342-3715, extension 4-9133.

I. PURPOSE

The purpose of this directive is to advise you that the U.S. Supreme Court has denied our application for a review of the retroactive portion of the Stenson v. Blum Court decision. As a result, districts will be required to reinstate Medicaid benefits as of December 20, 1979, for SSI recipients who were improperly terminated from Medicaid and who contact social services districts indicating they wish to receive Medicaid.

II. BACKGROUND

This Department had previously by 80 AIM-19 advised you of the U.S. District Court decision in Stenson v. Blum. The District Court held that a local agency may not terminate a recipient's Medicaid coverage solely on a determination of ineligibility for Supplemental Security Income. This directive further sets forth the proper procedures for terminating coverage.

The District Court as affirmed by the Second Circuit Court of Appeals has also required that all persons who were terminated from Medicaid as a result of a determination of ineligibility for SSI between January 1, 1974 and December 20, 1979 must be reinstated to Medicaid as of December 20, 1979.

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Social Services Law and Other Legal References	Bulletin/Chapter Reference	Miscellaneous Reference
80 ADM-19					Stenson v. Blum

Local districts were advised by a letter to all Commissioners dated October 9, 1980, of the method to be followed to process these cases. This directive is officially confirming those instructions.


III. PROGRAM IMPLICATIONS

Implementation of the requirements of this letter will result in an initial reinstatement of coverage as of December 20, 1979 for the affected population. Class members must be reinstated without regard to current eligibility.

IV. REQUIRED ACTION

The State Department of Social Services is sending letters to all persons whose SSI cases have been closed since January 1, 1974 advising them that they are entitled to receive Medicaid at least until an actual determination of ineligibility is made. The State will provide a newspaper publication, as required by the Court Order. The affected persons have been advised to contact their local department of social services if they wish to receive Medicaid. At the same time, the State has sent two computer listings to each county. One list contains information on all persons who lived in that county when their SSI was terminated. The other list contains names and social security numbers for all persons in New York State whose SSI cases have been closed. When a local agency is contacted by one of these individuals, they must take the following steps:

- A. When a person contacts a local district stating that his SSI case was closed and that he wishes to receive Medicaid, the local agency must first verify the person's identity and then check the county specific list. If the person does not appear on that list, the district should check the statewide list, since the person may have resided elsewhere in the State when his SSI case was closed.
- B. If the person appears on either list, the district should prepare an authorization opening the case effective December 20, 1979. The county specific list contains enough information to authorize continued assistance pending an eligibility determination. If the client lived in another county at the time the SSI case was closed, the district shall contact that county to get the information necessary to authorize the case.
- C. Persons whose SSI benefits have been terminated and who subsequently applied for Medical Assistance, been denied, and been notified of their right to a Fair Hearing, do not qualify as class members.
- D. Finally, the district shall follow the procedures specified in 80 ADM-19 to determine ongoing eligibility.



Robert F. Skerrett
Acting Deputy Commissioner
Division of Medical Assistance