+-----+ | LOCAL COMMISSIONERS MEMORANDUM | +-----+ DSS-4037EL (Rev. 9/89) Transmittal No: 93 LCM-101 Date: August 10, 1993 Division: Health & Long Term Care

TO: Local District Commissioners

SUBJECT: Comprehensive Medicaid Case Management (CMCM) - Enrollment of Office of Mental Retardation and Developmental Disabilities' (OMRDD) Providers in MMIS.

ATTACHMENTS: There are no attachments to this LCM.

The statewide Office of Mental Retardation and Developmental Disabilities (OMRDD) Comprehensive Medicaid Case Management (CMCM) program was described in 90 LCM-36. This memorandum conveys specific information regarding the enrollment of the OMRDD providers listed below.

This provider information is required for completion of the individual client WMS registration/termination procedures described in 89 ADM-29 (IV)(L) and 90 LCM-16. Please note that the WMS registration date may be retroactive to cover services provided to Medicaid clients since the agency's start date.

The following providers have been enrolled in MMIS under category of service 0265, rate code 5221 at a fee of 6.52 per quarter hour.

| Provider                 | Provider | Agency's   | RMFO Responsible                | Client      |  |  |  |
|--------------------------|----------|------------|---------------------------------|-------------|--|--|--|
| Name                     | ID #     | Start Date | for LDSS Liaison                | Residential |  |  |  |
|                          |          |            |                                 | Status      |  |  |  |
|                          |          |            |                                 | Limitations |  |  |  |
| Advocacy<br>for the      | 01394930 | 3/15/93    | Rochester<br>(Karen Desso)      | At-Home     |  |  |  |
| Developmentally Disabled |          |            |                                 |             |  |  |  |
|                          |          |            |                                 |             |  |  |  |
| Crystal Run<br>Village   | 01400119 | 4/1/93     | Letchworth<br>(Gary O'Loughlin) | At-Home     |  |  |  |

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| Provider<br>Name                             | Provider<br>ID #                     | <u>Agency's</u><br>Start Date | RMFO Responsible<br>for LDSS Liaison    | <u>Client</u><br><u>Residential</u><br><u>Status</u><br>Limitations |
|--|--------------------------------------|-------------------------------|---|---|
| Exceptional<br>Family<br>Resources           | 01395055                             | 1/1/93                        | Newark<br>(Phillip Dodd)                | At-Home   |
| Harlem<br>Agencies for<br>Development        | 01400040<br>Neighborhood<br>(HAND)   | 4/1/93                        | Manhattan<br>(Maureen Koch-<br>Frances) | At-Home,<br>VOCR, Agency<br>Family Care                             |
| Humanitarian<br>Organization<br>for Multicul |                                      | 1/1/93                        | Newark<br>(Phillip Dodd)                | At-Home   |
| Independence<br>Residences,                  | 01395028<br>Inc.                     | 4/1/93                        | Manhattan<br>(Maureen Koch-France       | At-Home<br>s)   |
| The Jewish<br>Guild for th<br>Blind          | 01400059<br>e                        | 4/1/93                        | Manhattan<br>(Maureen Koch-France       | At-Home<br>s)   |
| Maranatha<br>Human Servic                    | 01395037<br>es                       | 3/1/93                        | Poughkeepsie<br>(Patricia Miller)       | Agency Family<br>Care, At-<br>Home                                  |
| Orange Co.<br>Cerebral Pal<br>Association    | 01400068<br>sy                       | 4/1/93                        | Letchworth<br>(Gary O'Loughlin)         | At-Home   |
| People's<br>Equal Action<br>Community Ef     |                                      | 1/1/93                        | Newark<br>(Phillip Dodd)                | At-Home   |
| Western<br>Orange Count<br>for Independ      | 01400086<br>y Ctr.<br>ent Living, I: | 4/1/93<br>nc.                 | Letchworth<br>(Gary O'Loughlin)         | At-Home   |
| Syracuse<br>Community He                     | 01217330<br>alth Ctr., In            | 1/1/93<br>c.                  | Newark<br>(Phillip Dodd)                | At-Home   |

Any questions concerning this transmittal may be directed to Paul Weinstein at (518) 473-6209, User ID #AZ3200.

Additional information will be conveyed as other <code>OMRDD</code> <code>CMCM</code> providers are enrolled in <code>MMIS</code>.

Sue Kelly Deputy Commissioner Division of Health & Long Term Care