WMS ABEL CODES

TRANSACTION TYPE (TRAN/TT) Migrant Labor Camp Medical Facility (\$40 PNA only) (u) 01 Application Denial Congregate Care Level II-Drug/Alcohol Treatment Facility 02 Opening 03 Denial (Residential Treatment Center) Non-Commerical Room Only 05 Change Recertification/Reauthorization 12 Non-Level II Alcohol Treatment Facility (u) Closing State Operated Community Residence (FS Only) Recertification - Closing Congregate Care Level I-Family Care Congregate Care Level II-Not Drug/Alcohol Treatment 09 Open/Close or Apartment-like Reopening 10 Forced Closing Congregate Care Level II-Apartment-like (OMH/OMRDD 12 Supportive/Supervised Apartments; DSS Enriched Housing) SEPARATE DETERMINATION INDICATOR (SD) 19 Tier II Family Shelter (3 Meals/Day) (u) Separate Determination FS Transitional Benefit 20 Rental Supplement Т 21 Shelter for Homeless (3 Meals/Day) (u) 22 Residential Program for Victims of Domestic Violence CASE TYPE (CASE/CT) (3 Meals/Day) (u) 11 FA 17 SN-FNP 12 SN-FP 19 EAF 23 Undomiciled 13 ADC-FC 33 Homeless Shelter Tier II (Less Than 3 Meals/Day) (u) 31 NPA-FS 36 Shelter for Homeless (Less Than 3 Meals/Day) (u) 16 SN-CSH 32 FS-MIX Residential Program for Victims of Domestic Violence **GROUP HOME 2 PERSON HH TYPE** (Less Than 3 Meals/Day) (u) (Shelter Types 10, 12, 13, 15, 16 and 17) Subsidized Housing (Non-Certificate) 40 Section 8 Voucher (30% Limit) Both TA 4 Both SSA Supportive/Specialized Housing (District 55 Only) 2 1 TA and 1 SSA 5 1 SSA & 1 Neither TA or SSA 3 1 TA & 1 Neither TA or SSA 6 Both Neither TA or SSA SHELTER TYPES NYSNIP FS EXPENSE INDICATOR CODES (HT/AC/UTIL/PHONE) 94 SSI High Shelter, SUA Eligible 95 SSI Low Shelter, SUA Eligible A Excess Charge SSI High Shelter, No SUA X Standard Allowance Third Party Pays Heating Cost Directly to Vendor/ 97 SSI Low Shelter, No SUA Undocumented Incurred HT/AC Costs SSI Shelter Cost and SUA Unknown Standard Allowance HEAP Ineligible (Not Customer of SHELTER PRORATION INDICATOR (PRO/PI) Record)(Also NYSNIP Public Housing Cases with AC Costs) (PA Only) **HEAP** Eligible C Prorate Children's Share of Shelter Needs N No Expense R Refuses HEAP N Prorate All Needs Except Shelter S Prorate Shelter Expenses Only Unknown (NYSNIP Only) P Prorate Parent's Share of Needs **HOUSEHOLD CHILD INDICATOR (CT 16, 17)** 1-9 Number of Essential Persons No Child in Household Child in Household SHELTER RESTRICTORS/INDICATORS FUEL TYPE (TY) (IND/RES/SI/R) (PA Only) Natural Gas 7 Propane Entire Actual Shelter Utilities 1st/Entire Shelter (CT 11, 16) Oil 8 Municipal Electric **PSC** Electric X Shelter Allowance 3 9 Other Fuel Ε **Entire Shelter Cost** 4 Coal 0 Heat Included in P Entire Shelter – Primary Restriction (CT 12, 17) Wood Shelter Costs Entire Shelter - Secondary Restriction (CT 12, 17) S Kerosene X No Fuel Allowed 0 Utilities 1st/Shelter Allowance U Unknown (NYSNIP Only) Utilities 1st/Excess Shelter FS CATEGORICAL ELIGIBILITY INDICATOR (CE) SHELTER FREQUENCY (FRQ) (PA Only) Y Yes N No B Bi-Weekly W Weekly FS AGED/DISABLED INDICATOR Semi-Monthly M Monthly X Aged/Disabled 1st MONTH SHELTER PAYMENT SOURCE (SRC) A All Adults Aged/Disabled S NYSNIP Case I Income R Resource/Exempt Income OTHER PAALLOWANCE (TY) (PA Only) **SHELTER TYPE** u = unlimited (**TY**) 01 Restaurant Allowance - Dinner 01 Rent Private (Including Trailer Lot or Commerical Room)

- 02 Rent Public 02 Restaurant Allowance – Lunch – Dinner
- 03 Own Home (Including Trailer) Restaurant Allowance - Breakfast - Lunch - Dinner
- 04 Room & Board +06 Refrigerator Rental
- Chattel Mortgages 05 Hotel/Motel Permanent
- Home Delivered Meals 06 Hotel/Motel Temporary (u) 13

WMS ABEL CODES

- 14 Other Shelter Needs
- +17 Supplemental Child Care
- 18 Expenses Incident to Pregnancy
- 40 Temporarily Absent Person(s) In Congregate Care
- 45 Person(s) Not in Care Residing in Congregate Care Facility
- Not Included in the Eligibility Determination

OTHER FS ALLOWANCES (OTHER TYPE)

- 15 FS Installation Fee
- 16 Pro-Rated FS Installation Fee

LINE NUMBER (LN)

- 01-20 Line Number of Individual in case with income
 - 98 Income is received by individual in co-op PA case
 - 99 Legally Responsible Non-Case Member in Home

DISREGARD INDICATOR (I) (PA Only)

- 1 If Eligible, Give Disregard
- 2 Calculate With Disregard
- 3 Calculate With \$30 (Prior to 11/1/97)
- 6 No Disregard (CT 16, 17 Only)

EARNED INCOME SOURCES (SRC)

- 01 Salaries, Wages
- 04 Work Experience
- 05 Irregular or Infrequent Income
- 06 Other Earnings
- 07 VISTA
- 08 Severance Pay
- 09 Family Day Care Provider Income
- 10 Employer-Provided Sick Pay
- 12 Lump Sum (PA Only)
- 13 Lump Sum Received by Current Wage Earner (PA Only)
- 20 Net Business Income/Income from Self-Employment
- 22 Earnings of a LRR in Co-op Case (PA Only)
- 30 Training Allowance (FS Only)
- 31 Earnings From Subsidized Private or Public Sector Employment (PA Only)
- 35 School to Work Employment Program (FS Only)
- 40 Earnings from JTPA
- 44 Office for Vocational and Educational Services for Individuals With Disabilities
- 45 Income From Boarder/Lodger
- 46 Net Income From Rental of House, Store or Other Property, Worked More than 20 Hours per Week
- 47 Net Income from Rental of House, Store or Other Property, Worked Less than 20 Hours per Week (PA Only)
- 48 Income from a Roomer
- 49 Earned Income of a Sponsor (FS Only)

FREQUENCY CODES (FRQ/F)

- 1-5 Number of Times Received or Paid in the Month
 - W Weekly B Bi-Weekly
 - S Semi-Monthly M Monthly

WORK DEDUCTIONS INDICATOR (D) (PA Only)

F Full Time P Part Time N No Deductions Allowed

OTHER/UNEARNED INCOME SOURCES (SRC)

- 01 Adoption Subsidy
- 02 Alimony/Spousal Support (Non-Arrears)
- O3 Any Dividends, Interest or Periodic Receipts from Stocks, Bonds, Mortgages, Bank Interest, Trust Funds, Annuities, Credit Unions, Estates, etc.
- 04 Black Lung Disease

- 05 Monthly Net Amount of Educational Grants & Loans (FS Only)
- 06 Child Support Payments
- 07 Disabled Veteran's Benefits (Non-Service Connected)
- 08 Loan (CT 16, 17)
- 09 Foster Care Payments (FS Only)
- 10 GI Dependency Allotment
- 11 Disabled Veteran's Benefits (Service Connected)
- 12 Gifts
- 13 Child/Spousal Support Assigned to Agency (PA Only)
- 17 Spousal Support (Arrears)(CT 16, 17, 31, 32)
- 18 Income from Friends or Non-Legally Responsible Relatives
- 21 Post Compliance Emergency Payment (PA Only)
- 22 Income-In-Kind (PA Only)
- 24 Excess Support Payment
- 26 Lump Sum Payments (PA Only)
- 31 Earnings from Subsidized Private or Public Sector Employment (FS Only)
- 33 NYS Disability Insurance
- 35 Railroad Retirement Benefit Dependent
- 37 Public Assistance Grant (FS Only)
- 38 Railroad Retirement Benefit
- 39 Retirement Benefits (Pensions)
- 40 PA Grant Reduction
- 41 Sick Pay (Private Insurance)
- 42 Social Security Disability Benefit
- 43 Social Security Survivor's Benefit
- 44 Social Security Retirement Benefit
- 45 SSI Benefit
- 46 Social Security Benefit Dependent
- 49 Unemployment Insurance Benefit Compensation
- 50 Union Benefits
- 54 HUD Utility Allowance (PA Only)
- 55 Veteran's Pensions or Benefit
- 59 Worker's Compensation
- 72 Income of a LRR in Co-op Case (PA Only)
- 73 Earnings of a Dependent Child Who Is A Full or Part-Time Student Who Is Not Employed Full-Time (PA Only)
- 75 Deemed Income from a Step-Parent (PA Only)
- 76 Deemed Income from a Sponsor (PA Only)
- 77 Net Income from Rental of House, Store or Other Property, Worked Less than 20 Hours Per Week (FS Only)
- 79 Income from the Trust Fund of an Infant
- 82 Contribution from a Step-Parent (PA Only)
- 83 Contribution from a Sponsor
- 84 Unearned Income of a Sponsor (FS Only)
- 85 Deemed Income from a Grandparent (PA Only)
- 86 Contribution from a Grandparent (PA Only)
- 87 IV-D Payment (FS Only)
- 88 Parent's Share of Needs (PA Only)
- 89 Parent's Share of Needs Less Than Prorated Share (PA Only)
- 90 Reverse Annuity Mortgage Loan
- 91 Earned Income Tax Credit Data Collection Only
- 99 Other

RECALCULATION INDICATOR (RECALC)

Y Yes N No

RECOUPMENT/CLAIM TYPES (TY/TYPE/T)

- 1 Agency Error
- 2 Client Error
- 3 Advance Payment (PA Only)
- 4 PA Fraud/FS IPV
- 5 IV-D Payment (PA Only)
- 6 Applicant Shelter Arrears In Excess of Allowance; Other Non-Rent Shelter Expenses (PA Only)

WMS ABEL CODES AUTOMATED HEAP BENEFIT CALCULATION

FUEL TYPE

0 Heat Included1 Natural Gas

2 Oil

3 PSC Electric

4 Coal

5 Wood

6 Kerosene

7 Propane

8 Municipal Electric

BENEFIT TYPE

- R Regular
- E Emergency
- B Both

VULNERABLE (VULN IND)

Y Yes

N No

${\bf HEAP\,CATEGORICAL\,INDICATOR\,(HP\,CAT\,ELIG\,IND)}$

Y Yes

N No

EMERGENCY TYPE

- A Heat Related Domestic
- B Natural Gas Heat Only
- C Natural Gas Heat and Domestic
- D Electric Heat
- E Non Utility Fuel
- F Non Utility Fuel and Domestic
- G Furnace Repair
- H Propane Reconnect
- J Furnace Replacement
- K Municipal Electric Heat & Domestic

WMS MBL CODES

BUDGET TYPE (BT) 01 LIF/ADC-Related Chronic Care Chronic Care/SSI Related 02 S/CC 04SSI Related Chronic Care and LIF/ADC-Related 05 SSI Related and LIF/ADC-Related 10 Chronic Care and S/CC 06 SSI Related and S/CC Other (Bottom Line Only) 15 TRANSACTION TYPE (TRAN) 02 Opening 06 Recertification 10 Reopening 05 Change Open/Close EXPANDED ELIGIBILITY CODES (EEC) A AIDS Insurance H COBRA Insurance S FHP for Singles/Childless Couples (100%) EEC For C, D, F, I, P T Transitional Medicaid Infants Birth to 1 year Medicaid/Family Planning C Child(ren) 1 to 5 Years V MBI-WPD (SSI Related Budgeting Prior to J D Child(ren) 6 to 18 Years K Family Planning Only MBI-WPD Budgeting) E Disabled Adult Child (DAC) N FHP for 19-20 Not Living w/Parents W MBI-WPD (Only) FHP for Families/19-20 Living with Parents (150%) P Pregnant Woman AGE INDICATOR (AI) FUEL TYPE (TY) Y Individual(s) in the Household is Natural Gas 0 Heat Included in 4 Coal Propane 60 Years of Age or Older 2 Oil 5 Wood Municipal Electric **Shelter Costs** N No One in the Household is 60 3 PSC Electric 6 Kerosene Other Fuel Years of Age or Older **SHELTER TYPE (TY)** (u = unlimited) 01 Rent 16 Congregate Care Level II 02 Rent Public (NYC, Nassau, Suffolk, Westchester) 03 Own Home 18 Foster Care (u) 04 Room & Board (u) 20 Emergency Rental Supplement Program (u) 22 Shelter for Victims of Domestic Violence (u) 05 Hotel Perm. 06 Hotel Temp. (u) 23 Undomiciled 07 Migrant Camp 28 Congregate Care Level I (Rest of State) 09 Medical Facility (\$40 PNA only) (u) 29 Congregate Care Level II (Rest of State) 33 Homeless Shelter Tier II - Less Than 3 Meals/Day (Other Than Title XIX Facility) 34 Homeless Shelter Tier II - 3 Meals/Day 11 Room 12 Non-Level II Alcohol Treatment Facility 35 Homeless Shelter Non-Tier I or Tier II - 3 Meals/Day 36 Shelter for Homeless - Less Than 3 Meals/Day (u) 14 Public Home (u) (Other Than Title XIX Facility) 37 Residential Program for Victims of Domestic 15 Congregate Care Level I (NYC, Nassau, Suffolk, Westchester) Violence - Less Than 3 Meals/Day (u) ADDITIONAL ALLOWANCES (TY) 01 Dinner 18 Pregnancy (Output Only) 21 Dependent Member of Single 02 Lunch & Dinner 19 Community Maintenance Institutionalized Individual 03 Breakfast, Lunch & Dinner Allowance 23 Family Member Allowance 13 Home Delivered Meals 20 Transitional Child Care 99 Other SSI RELATED BUDGETING CODES **Deeming Codes (DEEM)** Living Arrangements Codes (LA) Deem Spouse to Spouse * Single Person Living Alone or Living with Others 2 Deem to SSI-Related Child Couple Living Alone or Living with Others Deem Spouse to Spouse and SSI Related Child* Family Care Level - Upstate (Dist 97/98 Only) No Deeming Family Care Level - New York City (Dist 97/98 Only) Individual - Temporarily Absent * Use when only one spouse is SSI-Related Couple - At Least One of Whom is Temporarily Absent CHRONIC CARE BUDGETING CODES **BUY-IN INDICATOR CODES (BUY) Budget Screen Indicator (BS)** A Calculate Buy-In Eligibility for Adult(s) in the Case Calculate Buy-In Eligibility for Adult(s) and Child(ren) in the Case 1 Chronic Care and Community Screens Personal Incidental Allowance Codes (PIA) Calculate Buy-In Eligibility for Children in the Case C Calculate Eligibility for SLMB/QI-1/QI-2 \$35.00 3 MA Level \$50.00 4 \$90.00 Veteran

CONTRIBUTION CODES (CON)

- 1 Contributing the Table of Support Amount
- 2 Contributing more than the Table of Support
- 3 Contributing less than the Table of Support adjudicated
- 4 Contributing less than the Table of Support not adjudicated
- 5 Refuses to Contribute

WMS MBL CODES

LOCAL CODES (LOC)					
01	Albany	21	Herkimer	40	St. Lawrence
02	Allegany	22	Jefferson	41	Saratoga
03	Broome	23	Lewis	42	Schenectady
04	Cattaraugus	24	Livingston	43	Schoharie
05	Cayuga	25	Madison	44	Schuyler
06	Chautauqua	26	Monroe	45	Seneca
07	Chemung	27	Montgomery	46	Steuben
08	Chenango	28	Nassau	47	Suffolk
09	Clinton	29	Niagara	48	Sullivan
10	Columbia	30	Oneida	49	Tioga
11	Cortland	31	Onondaga	50	Tompkins
12	Delaware	32	Ontario	51	Ulster
13	Dutchess	33	Orange	52	Warren
14	Erie	34	Orleans	53	Washington
15	Essex	35	Oswego	54	Wayne
16	Franklin	36	Otsego	55	Westchester
17	Fulton	37	Putnam	56	Wyoming
18	Genesee	38	Rensselaer	57	Yates
19	Greene	39	Rockland	66	New York City
20	Hamilton				

EARNED INCOME DISREGARD CODE (EID)

- 1 Calculate LIF % (Eligible for LIF in 1 of the 4 Preceding Months
- 2 Calculate with \$30 & 1/3 (Budget Eff. From Date Prior to 11/1/97)
- 3 Calculate with \$30 (Budget Eff. From Date Prior to 11/1/97)
- 4 Calculate LIF % (Eligible for LIF in 1 of the 4 Preceding Months)/\$30 & 1/3

CATEGORICAL INDICATOR CODES (CTG, C)

- 1 SSI Related Spouse/Parent/Individual Aged
- 2 SSI Related Spouse/Parent/Individual Blind
- 3 SSI Related Spouse/Parent/Individual Disabled
- 4 Non-SSI Related Spouse/Parent (LIF/ADC Related)

Calculate LIF % (Eligible for LIF in 1 of the 4 Preceding

Calculate LIF % (Not on LIF in 1 of the 4 Preceding Months)

5 Non-SSI Related Spouse/Parent (S/CC)6 SSI Related Child - Blind

Months)/ \$30

- 7 SSI Related Child Disabled
- 8 Non-SSI Related Child

BOTTOM-LINE REASON CODES (REASON CD)

Case Cannot be Budgeted Due to Family Composition

- 001 Married Couple in Chronic Care
- 002 Married Couple in Family Care
- 003 S/CC Budget for Intact Household
- 004 Under 21 Both Spouse and Parent Responsible
- 005 SSI-Related Child in Chronic Care
- 006 Child(ren) living with Parent in Congregate Care
- 007 to 015 Reserved for Future Expansion

Case Cannot be Budgeted Due to System Limitation

- 101 Case With More Than Two Earned Incomes
- 102 Dollar Amount of Resources/Income Exceeds Seven Characters
- 103 Pro-rate of PA-Need for Coop Household
- *104 Supplemental Energy Allowance
- *105 PNA Increases
- 108 Deeming Waiver Case
- *110 S/CC Congregate Care GIT
- 111 to 115 Reserved for Future Expansion

Case Cannot be Budgeted Due to Litigation or Regulation Change

- 201 Case Affected by Lynch v. Rank Decision
- *202 Case Affected by Rickey v. Perales Decision
- *203 Case Affected by Schmidt v. Perales Decision
- 204 COBRA
- 205 to 215 Reserved for Future Expansion

Other

- 301 Four Month Extension
- 302 Special Eligibility
- 304 to 315 Reserved for Future Expansion

WMS MBL CODES

EARNED INCOME SOURCE (SRC)

- 01 Salaries, Wages (Employer-Provided Sick Pay)
- 05 Irregular or Infrequent Income
- 06 Other Earnings
- 08 Severance Pay
- 09 Family Day Care Provider Income
- 11 Income-In-Kind Shelter
- 12 Lump Sum
- 13 Lump Sum Received by Current Wage Earner
- 15 Other Income-In-Kind
- 20 Net Business Income
- 32 Net Royalties
- 40 Earnings from JTPA
- 44 Office for Vocational and Educational Services for Individuals with Disabilities
- 45 Income from Boarder/Lodger
- 46 Net Income from Rental of House, Store or Other Property, Worked More than 20 Hours per Week
- 47 Net Income from Rental of House, Store or Other Property, Worked Less than 20 Hours per Week
- 48 Income from Roomer

PERIOD (PER, P)

- 3 Weekly 5 Semi-Monthly 7 Bi-Monthly 9 Yearly
- 4 Bi-Weekly 6 Monthly 8 Quarterly

TIME CODES (T)

F Full Time N No Deductions

UNEARNED INCOME SOURCE (SR)

- 01 Adoption Subsidy
- 02 Alimony/Spousal Support
- 03 Any Dividends, Interest, or Periodic Receipts from Stocks, Bonds, Mortgages, Bank Interest, Trust Funds, Annuities, Credit Union, Estates, etc.
- 04 Black Lung Disease Program
- 06 Child Support Payments
- 07 Disabled Veterans Benefits (Non-Service Connected)
- 10 GI Dependency Allotment
- 11 Disabled Veterans Benefits (Service Connected)
- 12 Gifts
- 16 Gross Rental Income from Owned Home
- 18 Income from Friends or Non-Legally Responsible Relatives
- 19 Income from Friends or Non-Legally Responsible Relatives Outside the Household
- 20 Income from Garden or Livestock
- 26 Lump Sum Payments
- 28 German/Austrian Reparation Payments
- 30 Income from JTPA
- 31 Net Income from Rental of House, Store or Other Property
- 33 NYS Disability Insurance
- 34 Older American Act Income
- 35 Railroad Retirement Benefit Dependent
- 38 Railroad Retirement Benefit
- 39 Retirement Benefits (Pensions)
- 41 Sick Pay (Private Insurance)
- 42 Social Security Disability Benefit
- 43 Social Security Survivor's Benefit
- 44 Social Security Retirement Benefit
- 46 Social Security Benefit Dependent
- 47 Social Security Benefit DAC48 Social Security Benefit Pickle
- 49 Unemployment Insurance Benefit
- 50 Union Benefits
- 51 OVESID Training Allowance
- 55 Veteran's Pensions or Benefit
- 59 Worker's Compensation
- 60 Income-In-Kind Provided by LRR Shelter

UNEARNED INCOME SOURCE (SR) (cont'd)

- 64 Income-In-Kind Provided by LRR Meals
- 70 Other Income-In-Kind
- 73 Earnings of a Child or Minor who is a Full or Part Time Student who is Not Employed Full Time
- 75 Deemed Income from a Stepparent
- 82 Contribution from a Stepparent
- 99 Other

UNEARNED INCOME EXEMPTION (EXEMPT)

- 01 Health Insurance Premium
- 02 Court Order Support
- 03 Other Federal, State or County Tax
- 06 20% R.S.D.I.
- 11 One-Third SSI Child Support
- 12 Cost of Living RSDI Increase Resulting in SSI Ineligibility
- 14 VA Aid and Attendance/Housebound Allowance
- 15 Receipt/Increase in SSICB resulting in SSI Ineligibility
- 20 Other Amounts Limited by Designated Use
- 21 Medicare

RESOURCE

Liquid Resources (CD)

- 01 Cash on Hand
- 02 Bank Accounts
- 03 Stocks, Bonds, Securities
- 04 Promissory Notes
- 05 Mortgages, Conditional Sales Contracts
- 06 Trust Funds
- 07 PIA Savings Account
- 08 Lump Sum Payments (includes tax refunds, insurance settlements, inheritances, etc.)
- 10 Reparation Payments
- 22 Vehicle
- 91 Resources Above MA Level/Determination FHP
- 98 Other Liquid Resources

Life Insurance (Life-Ins.)

- 42 Straight Life
- 43 Endowment
- 44 Cash Value of Life Insurance to be Disregarded for SSI Budgets
- 45 Burial Reserve to be Disregarded for SSI Budgeting

WMS SUBSYSTEM CODES

MA RESTRICTION/EXCEPTION SUBSYSTEM CODES

MA RESTRICTION/EXCEPTION RECORD SOURCE CODES (SYSTEM-GENERATED)

- G System Generated Code
- E User Entered Record

$\label{eq:marestricted/exception} \begin{magnetical}{l} MARESTRICTED/EXCEPTION STATUS FLAG CODES \\ (SYSTEM-GENERATED) \end{magnetical}$

1 Active

Inactive

MA RESTRICTION/EXCEPTION TYPE CODES

- 02 Podiatry
- 03 Dental
- 04 Durable Medical Equipment
- 05 Pharmacy
- 06 Physician
- 08 Clinic
- 09 In-Patient Hospital
- 25 OMR Sub-Chapter A Exception
- 30 HHCP Long Term Home Health Care Program (Project In Progress)
- 31 Community Alternative Systems Agency (CASA)
 - Community Based
- 32 CASA Individual in SNF/HRF
- 35 Case Management
- 38 UT Exempt
- 39 Aid Continuing
- 40 SNF Expense Level
- 41 ICF-DD Expense Level
- 42 Hospital/SNF Expense Level
- 43 Hospital/ICF-DD Expense Level
- 44 Alternate Care Demo
- 45 Hospital/Home Demo
- 46 OMRDD Home and Community Based Services (HCBS) Waiver (IRA, FC or at Home)
- 47 OMRDD Home and Community Based Services (HCBS) Waiver (CR and Subchapter A Day Treatment)
- 48 OMRDD Home and Community Based Services Waiver–(HCBS), (CR and Subchapter A Day Treatment)
- 49 IRA RES Hab Consumer
- 50 Prenatal Connect
- 51 Connect
- 53 HR Underserved
- 55 MCC Pharmacy
- 56 MCC Physician
- 58 MCC Clinic
- 59 MCC Hospital
- 62 Care at Home (CAH I)
- 63 CAH II
- 64 CAH III
- 65 CAH IV
- 66 CAH V
- 67 CAH VI
- 68 CAH VII
- 69 CAH VIII 70 CAH IX
- 70 CAH IX
- 81 (TBI) Traumatic Brain Injury
- 82 Cash and Counseling (Project in Progress)
- 83 Alcohol and Substance Abuse ASA (Project in Progress)
- 90 Managed Care Excluded
- 91 Managed Care Exempt
- 92 DOH Exempt
- 94 OMH Exempt

- 95 OMRDD Waivered Services Look Alikes
- 96 (SPM) Seriously and Persistently Mentally Ill Adults and (SED) Seriously Emotionally Disturbed Children

PRINCIPAL PROVIDER SUBSYSTEM CODES

PRINCIPAL PROVIDER CODES

- 00 No Principal Provider
- 01 Private Skilled Nursing
- 02 Voluntary Intermediate Care (VOICF)
- 03 Public Skilled Nursing
- 04 State Intermediate Care
- 05 OMRDD Developmental Center
- 06 OMH Psychiatric Center
- 07 Acute Hospital Long Term Care
- 08 Hospital Excess
- 10 Child Care Facility
- 12 OMR Small Residential Unit (SRU)
- 14 Personal Care Services
- 16 Assisted Living Program (ALP)
- DL Delete

PRINCIPAL PROVIDER PAYMENT EXCEPTION TYPE CODES (PA, MA)

- 1 Per Diem Payments to Provider are Not Allowed
- 2 Per Diem Payments to Provider are Allowed

RFI - RESOLUTION CODES

- No Action Needed Application Denied or Withdrawn or Case Closed
- 2 Current Case Data is Correct
- 3 Case Rebudgeted Due to CINTRAK Data
- 4 Application Denied or Withdrawn Due to CINTRAK Data
- 5 Case Closed Failed to Respond
- 6 Case Closed Financially or Categorically Ineligible
- 7 No Case Change Referral for Investigation
- 8 Client and Matched Individual Not the Same Person
- 9 SSA Validation Data Acknowledged
- X Emergency Processing Required

PREPAID CAPITATION PLAN SUBSYSTEM CODES

Benefits Package - User Entered in Concert with Provider ID and County Code #

Prepaid Capitation Plan Capitation Code

- 3 Individual Enrollee
- 0 End of Capitation

DOMESTIC VIOLENCE SUBSYSTEM CODES

 $\begin{array}{lll} ASSESSMENT \ STATUS & WAIVER \ STATUS \\ C-Credible & A-Approved \\ D-Client \ Declination & D-Denied \end{array}$

 $F - Failure \ to \ Show \qquad \qquad P - Partially \ Approved$

N – Not Credible R - Requested

P - Pending

DENIAL REASONS

C – Fraudulent Claim
D – Failure to Provide Doc.
F – Failure to Show
P – No Program Require.
R – Client Request
T – No Threat of Danger

N - Not Credible

O - Other

WMS SYSTEM-GENERATED CODES

ANTICIPATED FUTURE ACTION CODES ANTIC. FUT. ACT. - (PA, MA, FS)

- 101 Individual Turning 6 Weeks
- 102 Individual Turning 3 (PA)/6(MA)
- 103 Individual Turning 14 Years
- 104 Individual Turning 16 Years
- 105 Individual Turning 18 Years
- 106 Individual Turning 21 Years
- 108 Widow Turning 60 Years
- 109 Individual Turning 62 Years
- 110 Individual Turning 65 Years
- 111 Individual Turning 72 Years
- 113 Individual Turning 19 Years
- 114 Individual Turning 20 Years
- 116 Individual Turning 1 (CT = 11: CAP, 12, 16, 17, 20)
- 221 Significant Birthday
- 308 End of POS Authorization Other Than FC, DC, or HH
- 333 Domestic Violence Waiver Expires
- 403 In Psych Institution Prior to 21st Birthday Turning 22
- 410 Initial 18 Month Foster Care Review by Court
- 411 Twenty-Four Month Foster Care Review by Court

CASE STATUS CODES - CASE STATUS (PA, MA, FS)

- 01
 New
 21
 Active override

 10
 Active
 22
 Closed override

 14
 Closed
 23
 Denied override
- 15 Denied

INDIVIDUAL DISPOSITION STATUS CODES IND. STAT. - (PA, MA, FS, HEAP)

20 Case Closed (System-Generated at Closings)

MA RESTRICTION/EXCEPTION RECORD SOURCE CODES (MA)

G System Generated Code E User Entered Code

MA RESTRICTION/EXCEPTION STATUS FLAG CODES (MA)

1 Active 2 Inactive

REASON CODES - REASON CODE (PA, MA, FS)

- 001 Conversion
- 720 PCP Enrollement or Disenrollment
- 740 Case Now in Receipt of Cash Assistance (Forced Closing)
- 901 Individual Added to Case (Individual Level PA, FS)
- 941 Not a State Resident (SSI Recipient)
- 942 Death (SSI Recipient)
- 943 Not in Receipt of FS
- 944 PA Undercare FS Benefit Decision Not Complete
- 945 PA Undercare FS Benefit Remains Co-Op
- 968 Forced Closing of Case (FS)
- 979 Utility Fix
- 986 CIN Unduplication
- 987 Separate Two Persons with Same CIN
- 988 Auto SDX/WMS Interface
- 990 WMS/SSN Enumeration
- A65 Excess Support Address Verification (TT=05, 14)
- A66 Excess Support Payment Auth. (TT=14)
- Y11 Auto-Close NYSNIP Shelter Type 98 Case: Failure to Redeem
- Y34 IV-D Ind Changed to Y

PA/MA DENIALS

- 754 Combined PA/MA Denial
- 755 Denial, Failure to Participate in a Drug/Alcohol Program
- 766 Failure to Comply with a PA Employment Requirement (CT 16, 17)

- 768 Failure to Comply with a PA Employ. Requirement (CT 12)
- 793 PA/MA Denial Client's Request
- 795 Failure to Sign PA Consent Form to Release Drug/Alcohol Treatment Records
- 797 Failure to Sign Citizenship Alien Declaration
- 802 Combined PA/MA Denial-Ineligible Alien

PA DENIALS/MAACTION

- 753 PA Denial, MA Separate Determination
- 789 PA Denial, MA Separate Determination (SSI/SSA Benefits Suspended)

PA/MA DISCONTINUANCE

(Closings and Recertification Closings)

- 761 Combined PA/MA Discontinuance
- 762 Discontinuance, Failure to Participate in a Drug/Alcohol Prgm.
- 767 Failure to Comply with a PA Employ. Requiremt. (CT 16, 17)
- 769 Failure to Comply with a PA Employ. Requirement (CT 12)
- 790 Failure to Sign PA Consent Form to Release Drug/Alcohol Treatment Records
- 791 Lump Sum Not Eligible for MA
- 792 Failure to Sign Citizenship Alien Declaration
- 794 PA/MA Discontinuance Client's Request
- 803 Combined PA/MA Discontinuance Ineligible Alien
- 805 New Resident Qualified Alien Ineligible for 12 Months
- 861 PA/No MA Lanaguage

PA DISCONTINUANCE/MA EXTENSIONS (Closings and Recertification Closings)

- 700 MA Continuing Pending Separate Determination
- 705 No PA Recert
- 707 Beginning MA Extension after PA Closing
- 710 Begin PCP Guaranteed Eligibility Period
- 715 Continuous Eligibility or Continuous/PCP Guarantee
- 756 MA Continues Unchanged 1 Month Extension
- 758 MA Continues Unchanged Pending Decision
- 760 MA Continuation of Newborn
- 763 MA Continues, Support Extension
- 764 TMA Acceptance, First Six Months
- 765 MA/PCP Extension
- 771 Two Month MA Postpartum Extension
- 821 MA Continues Unchanged
- 827 MA Continues Unchanged Reporting Required
- 858 Continuous Eligibility for Children
- 859 Continuous Eligibility for Children Moved Out of District

PA ACCEPTANCE

- 839 MA Acceptance
- 840 MA Acceptance Managed Care Coverage
- 841 MA Denied
- 842 MA Denied First Month(s) MA Eligible Subsequent Months
- 843 MA Denied First Month(s) Manage Care Coverage Subsequent Months
- 844 MA Denied First and Subsequent Months

PA UNDERCARE

- J65 Excess Support
- Y33 DV Update
- 820 Separate Manual MA Notice Required

MA OPENING

923 Case Opened for Newborn

MA UNDERCARE

- 920/I98 Newborn Added to Case 921/I96 Unborn Name Conversion
- 946 Recalculation of Contribution toward Chronic Care,

Single, COLA (Upstate)

WMS SYSTEM-GENERATED CODES

MA DISCONTINUANCE SOCIAL SECURITY NUMBER CODES (PA, MA, FS, HEAP) 922 Inmate in a Penal Institution +A Validation Failed: SSN Not on SSA File PENDING DATA STATUS CODES (PA, MA, FS) +B Validation Failed: No Match on Name +C Validation Failed: No Match on DOB and Sex AC/DBR Awaiting Direct Budget Reauthorization Completion AT/CUI Awaiting Transmission After CIN Undupe of +D Validation Failed: No Match on DOB Inactive Case +E Validation Failed: No Match on Sex AT/DEN Awaiting Transmission After App. Denial 7 SSN SSA Input AT/DRB Awaiting Transmission After Direct Budget 8 SSN SSA Validation AT/FCFD Awaiting Transmission After Forced Closing 9 SSN Failed SSA Validation AT/FDE Awaiting Transmission After FDE TRANSACTION TYPE CODES (TRANS TYPE) (PA, MA, FS, AT/FDEOV Awaiting Transmission After FDE-Override AT/REA Awaiting Transmission After Reactivation HEAP) AT/REAOV Awaiting Transmission After Reactivation Override Application Denial AT/UM Awaiting Transmission After Undercare FDE Withdrawal AT/UMOV Awaiting Transmission After U/M-Override Reactivation 11 AU/CUI Awaiting Local Update After CIN Undupe 12 Forced Closing of Case of Inactive Case Forced Deletion of Individuals AU/DBR Awaiting Local Update After Direct Budget Reauthorization PARENT INDICATOR (PA) AU/DEN Awaiting Local Update After App. Denial Child Only AU/FCFD Awaiting Local Update After Forced Closing Single Parent Households and Two Parent Households with Awaiting Local Update After FDE AU/FDE One Disabled Parent AU/FDEOV Awaiting Local Update After FDE-Override Two Parent Households with No Disabled Parent AU/REA Awaiting Local Update After Reactivation AU/REAOV Awaiting Local Update After Reactivation Override RECIPIENT AID CATEGORY CODES (MA) AU/UM Awaiting Local Update After Undercare PG-ADC (FP) AU/UMOV Awaiting Local Update After UM Override 10 FA-Family Assistance CUI/BUP CIN Undupe Awaiting Batch Update of Inactive 11 ADU-U (FP) 12 IV-E (FP) DBR/BUP Signed-Off After Direct Budget Reauthorization PG-ADC (FP) 13 - Awaiting Batch Update TANF with Deprivation (FP) 16 DBR/SSG Awaiting Sign-Off After Direct Budget TANF without Deprivation (FP) 17 Reauthorization 18 Safety Net w/out deprivation (FP) DEN/BUP Sign-Off After App. Denial - Awaiting Batch Update 19 Safety Net - Non-Cash (FP) DEN/SSG Awaiting Sign-Off After App. Denial 20 Supplemental Payment (NYC) (FNP) 100% Local FCFD/BUP Signed-Off After Forced Closing - Awaiting 21 LIF W/out Depriv/SCC (FP) Batch Update 22 RESERVE FOR FUTURE USE FDE/ALEC Full Data Entry - Awaiting Local Error Correction 23 MA-CW (FP) FDE/BUP Signed-Off After FDE - Awaiting Batch Update 24 MA-Aged (FP) FDE/ERR Awaiting Error Correction After FDE 25 MA-Blind (FP) **FDEOVER** Overridden Full Data Entry 26 MA-Disabled (FP) Awaiting Sign-Off After FDE 27 ADC Medically Needy (FP) FDE/SSG No Pending Data Exists 28 NOPEND Public Home (FNP) REAC/BUP Signed-Off After Case Reactivation 30 Presumptive Eligibility for Children (FP) - Awaiting Batch Update 31 Poverty Level Child (FP) REAC/ERR Awaiting Undercare Maintenance Error Correction 32 LIF Related w/deprivation (FP) After Case Reactivation 35 Presumptive Eligibility Home Care (FNP) State/Local REAC/OVR Overridden Reactivation 36 RESERVE FOR FUTURE USE REAC/SSG Awaiting Sign-Off After Case Reactivation 37 Alien Eligibility (FNP) State/Local REAC/UM Awaiting Undercare Maintenance After Case 38 Alien Eligibility (FP) Reactivation 39 FNP Related Parent Living Child (FP) UM/ALEC Undercare Maintenance - Awaiting Local Error 40 Public Shelter Resident (FNP) 100% Local 41 Presumptive Eligibility Prenatal A (FP) Correction UM/BUP Signed-Off After Undercare Maintenance 42 Presumptive Eligibility Prenatal B (FP) - Awaiting Batch Update 43 Prenatal Care (FP) UM/CL Awaiting Clearance Resolution 44 Infant (200% FPL)(FP) UM/CLERR Awaiting Clearance Resolution and Error Correction 45 Child 1-6 (133% FPL)(FP) Awaiting Undercare Maintenance Error Correction 47 Child Welfare (FNP) 100% Local UM/ERR UMOVER Overridden Undercare 48 Child Continuous Coverage (FP) UM/SSG Awaiting Sign-Off After Undercare Maintenance 49 Expanded-Continuous Coverage Reauthorization 50 SSI Aged (FP) 51 SSI Blind (FP) 52 SSI Disabled (FP) **NOTE:** The Pending Data Status Codes have been listed in 53 SSI Pend Aged (FP) alphabetic mnemonic order. Pending Data Status 54 SSI Pend Blind (FP)

Code would always appear as mnemonics on the

WMS Inquiry Screens.

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RECIPIENT AID CATEGORY CODE (MA) (cont'd)

- 55 SSI Pend Disabled (FP)

- 53 Family Planning Coverage (FP)
 54 Poverty Level Infant (FP)
 55 Infant Continuous Coverage (200% FPL)(FP)
- 59 CAP/MA Guarantee (FNP) State/Local
- 60 Safety Net Aged (FP)
- 61 Safety Net Blind (FP)
- 62 Safety Net Disabled (FP)
- 63 Safety Net (FP)
- 66 Emergency Shelter (FP)
- 67 Safety Net w/deprivation (FP)
- 68 FHP Singles/Childless Couples (FP)
- 69 FHP Parents/19-20 years olds (FP)
- 70 FHP Pregnant Woman 100% FPL (FP)
- 71 Child 6-18 100-133% FPL (FP)
- 72 FHP Pregnant Woman 200% FPL (FP)
- 74 Presumptive Eligibility Healthy Women Partnership (Under 65)
- 75 Presumptive Eligibility Healthy Women Partnership (65 +Over)
- 76 Legal Alien (FNP)
- 77 Presumptive Eligibility Healthy Women Partnership Male (FNP)
- 78 LIF/SN/TL Cash (FP)
- 79 LIF/SN/TL NC (FP)
- 81 Child-Continuous Coverage 6-18 (100-133% FPL)
- Medicaid Buy-In Disabled Basic Group
- 83 Medicaid Buy-In Medically Improved

MISCELLANEOUS PA, MA, FS CODES

RESOURCE LINE NUMBERS

- 01-20 Line Number of Individual in Case with Resources
 - 88 Alien Sponsor has Resource

RESOURCE CODES

PA RESOURCE CODES

CODE DEFINITION

- 01 Cash on Hand
- 02 Bank Account
- 03 Stocks, Bonds, Securities
- 04 Promissory Notes
- 05 Mortgages
- 06 Trust Fund
- 09 Burial Reserve
- 22 Vehicle
- 86 Income Tax Refunds
- 87 Non-Exempt Real Property
- 88 Cash Value of Life Insurance
- 99 Other Resources

FS RESOURCE CODES

CODE DEFINITION

- 01 Cash on Hand
- 02 Bank Accounts
- 03 Stocks, Bonds, Securities
- 06 Trust Fund
- 22 Vehicle
- 87 Non-Emempt Real Property
- 99 Other Resources

OVERRIDE REASON CODES (PA, MA, FS)

- 01 Pending Fair Hearing Aid to Continue (PA & MA Only)
- 02 Fair Hearing Decision
- 03 Court Decision
- 04 Department Policy Change
- 05 Administrative Reason
- 06 Non-Reimbursable Care, Payment for Services