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| LOCAL COMMISSIONERS MEMORANDUM |
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DSS-4037EL (Rev. 9/89)

Transmittal No: 93 LCM-9

Date: January 26, 1993

Division: Health & Long
Term Care

TO: Local District Commissioners

SUBJECT: Utilization Thresholds and ICF/DD Recipients

ATTACHMENTS: Exception Code 38 Error Report
(Not available on-line)

The legislation that established the Utilization Thresholds Program provides for an exemption for services provided through a managed care program. Services provided to individuals in intermediate care facilities for the developmentally disabled (ICF/DD's) are considered to be managed care and are therefore exempted. The Welfare Management System (WMS) is now able to accept code 38 in the Recipient Restriction/Exception Subsystem to identify this population.

A one time conversion run was performed on October 6, 1992 to convert appropriate existing cases to code 38. All new cases since October 6, 1992, of individuals with principal provider codes of "02" (HRF-private), or "04" (HR-public), or "12" (small residential unit) or "05" (OMR/DD) will require the local social services district to update the Recipient Restriction/Exception Subsystem.

A monthly report will be provided to alert you to cases which are new additions to or terminations from one of the above Principal Provider codes. Since the code 38 is the only indicator that these recipients are considered to be in managed care, and therefore exempt from Utilization Thresholds, it is important that coding for these individuals be accurate. Attached are the first two monthly reports. Cases with the error condition "no active restriction 38 record" should be handled as detailed in the "adding code 38 for an individual" instructions found later in this memorandum. Cases with the error condition "no active principle provider record" should be handled as detailed in "terminating code 38". Please use these first monthly reports for changes that need to be made, as well as subsequent reports in the months ahead.

Following are the instructions to be used for entering these codes:

Accessing the Recipient/Exception Subsystem

Access the Medical Assistance Menu by choosing selection 25 on the WMS Menu.

Access the Restriction/Exception Subsystem by Typing "R" on the Medical Assistance Menu.

Select the function: Input TYPE "I".

Enter three fields of data:

CIN
CASE NUMBER
WORKER ID

1. Adding Code 38 for an Individual.

After accessing the RE/EXC subsystem Input screen:

- a. Enter the R/E code of 38 (ICF/DD) in the RE/EXC TYPE field.
- b. No Provider identification number entry is required.
- c. The RE/EXC PERIOD FROM date is entered equal to the first day of the month that the recipient has a principle provider code.
- d. Review for accuracy then transmit the information that was entered.
- e. Store the verified data using Special Function key 13.

2. Terminating code 38

After accessing the RE/EXC subsystem Input screen:

- a. Enter the RE/EXC TYPE and THRU DATE. The date should be the effective date of the termination.
- b. Transmit the date.
- c. Press SF 13 to store.

3. Inactivation - Terminating a Code 38 will not correct an erroneous active period. To inactivate an erroneous placement:

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After accessing the RE/EXC subsystem:

- a. Enter the RE/EXC TYPE recipient to be inactivated.
- b. Enter the RE/EXC THRU DATE equal to the RE/EXC FROM date.
- c. Transmit and review the data.
- d. Store using SF 13.

If you have questions concerning this please contact Jim Donnelly, (User ID 0me320) at (518) 486-7481.

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Executive Deputy Commissioner