| INFORMATIONAL LETTER |

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TRANSMITTAL: 96 INF-17

DIVISION: Services and

Commissioners of Community
Social Services Development

Date: May 1, 1996

SUBJECT: Post Institutional Services Planning (PISP)

Requirements: Statutory Changes Regarding State

Charge Clients

SUGGESTED

TO:

DISTRIBUTION: Commissioners

Directors of Social Services

Adult Services Staff Medical Assistance Staff Public Assistance Staff

CONTACT PERSON: Adult Services Representative, as follows:

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ATTACHMENTS: None

FILING REFERENCES

Previous	Releases	Dept. Regs.	Soc. Serv. Manual Re	ef. Misc. Ref.
ADMs/INFs	Cancelled		Law & Other	
			Legal Ref.	
			Art. 9-B SSL	
83 INF-17		313	Section	95 LCM-92
87 INF-5		457	131.2 SSL	
			29.15 Mental	
			Hygiene Law	

DSS-329EL (Rev. 9/89)

The purpose of this release is to inform local social services districts of a statutory change which affects the follow-up services requirements for certain persons who have been discharged or released from psychiatric facilities and developmental centers subject to licensure by the State Offices of Mental Health (OMH) or Mental Retardation and Developmental Disabilities (OMRDD).

Section 198 of Chapter 81 of the Laws of 1995 repealed Section 153.1(h) of Social Services Law which defined state charge status for OMH and OMRDD inpatient dischargees and releasees and provided 100% state reimbursement for Title XX services provided to these clients. Consequently, reimbursement no longer is available to local districts for the cost of providing the specific services activities set forth in Section 313.2 of the Department's regulations. To minimize the adverse impact of this change, it is recommended that local social services districts discontinue the optional follow-up visits, as specified in Section 313.2(a)(3) of the Department's regulations, to "state charge" OMH and OMRDD clients who are residing in certified residential care facilities, other than Family Type Homes for Adults. Districts also should consider transferring staff assigned to this function to the Protective Services for Adults program in order to secure 50% reimbursement for this staff and to bolster this increasingly important program area.

Despite the elimination of 100% services reimbursement, Section 313.2(a)(1)&(2) of the Department's regulations still requires "state charge" mental hygiene clients residing in the community or in Family Type Homes for Adults to be visited at regular intervals. While the Department is reviewing the feasibility of maintaining these requirements, for now, districts must continue to comply with them. In order to avoid duplication of effort, it is recommended that the staff assigned to monitor the Family Type Home for Adults program be utilized to provide the mandated semi-annual follow-up visits to OMH and OMRDD "state charge" clients residing in these homes. The periodic client visit requirements for "state charge" OMH and OMRDD clients living in the community should continue to be met under the appropriate Title XX service category based on the needs of each client.

The general requirements for districts to engage in discharge planning with OMH and OMRDD facilities, which are set forth in Section 313.1 of the Department's regulations and in 83 INF-17, remain in effect. With regard to services this means assuring that a timely process is in place for assessing the needs of persons being discharged or released from OMH or OMRDD facilities; providing Protective Services for Adults and other Title XX adult services when appropriate; and cooperating with the facility director in the on-going review and evaluation of the client's services plan when the district is providing Protective Services for Adults or another Title XX service.

As stated in 95 LCM-92, there continues to be 100% state reimbursement for Medical Assistance for "state charge" OMH and OMRDD dischargees and releases after applying all applicable federal funding. Costs associated with Public Assistance are no longer 100% state reimbursable, but are reimbursed at standard rates.

The policies outlined above are consistent with the agreement between the Department and OMH set forth in 87 INF-5.

Rose M. Pandozy
Deputy Commissioner
Services and Community Development