

WGIUPD

GENERAL INFORMATION SYSTEM

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DIVISION: Office of Health Insurance Programs

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GIS 07 MA/006

TO: Local District Commissioners, Medicaid Directors

FROM: Deborah Bachrach, Deputy Commissioner
Office of Health Insurance Programs

SUBJECT: LDSS-3955 "Certification of Treatment of Emergency Medical Condition" English/Spanish Version (Upstate)

EFFECTIVE DATE: Immediately

CONTACT PERSON: Local District Support Unit
Upstate (518) 474-8887 NYC (212) 417-4500

The purpose of this GIS message is to provide a revised LDSS-3955 entitled "Certification of Treatment of Emergency Medical Condition". The revised form contains the Spanish translation of the "Authorization to Release Medical Information."

Temporary non-immigrants and undocumented immigrants applying for coverage for the treatment of emergency medical conditions must submit the LDSS-3955 (Upstate) "Certification of Treatment of Emergency Medical Condition," completed and signed by a physician. This version is a two-sided document and replaces Attachment E-1 of 04 OMM/ADM-7.

Social services districts must begin using the revised LDSS-3955 immediately. Social services districts must discard any existing supplies of the previous version of the LDSS-3955.

A new completed LDSS-3955 must be obtained from a physician at least once every 90 days in order to continue the Medicaid authorization.