WGIUPD

GENERAL INFORMATION SYSTEM

DIVISION: Office of Health Insurance Programs

GIS 20 MA/10

то:	Local District Commissioners, Medicaid Directors	
FROM:	Lisa Sbrana, Director Division of Eligibility and Marketplace Integration	
SUBJECT:	Correction of Multiple Client Identification Numbers (CINS) on WMS	
EFFECTIVE DATE:	November 1, 2020	
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The purpose of this General Information System (GIS) message is to provide guidance on the correction process for duplicate Client Identification Numbers (CINs) and to introduce a new quarterly report entitled "Quarterly LDSS Correction of WMS Duplicate CIN Report." This report will be used by the Department of Health (DOH) to monitor and document the corrective actions taken on duplicate CINs.

The Office of the New York State Comptroller completed a Medicaid Duplicate CIN audit in July 2019. One of the audit recommendations was to centralize oversight functions for the detection and resolution of duplicate CINs within the Department of Health (DOH) for all Medicaid enrollees. This oversight will help to record in a centralized location, the resolution of duplicate CINs, including the initiation of recoupment of Medicaid managed care capitation payments when appropriate.

Each local department of social services (LDSS) is responsible for resolving duplicate CINs. Currently, LDSS staff receive two duplicate CIN reports. The MUP-730 (Upstate) and the MNY- 760 CL Downstate/Downstate Duplicate Report, are monthly BICS or "green bar" reports that list enrollees with two active WMS CINs. A second report, "Two Active WMS CINs: LDSS to Determine," is sent to a local district when DOH staff identify an enrollee with two active WMS CINs. LDSS staff should continue to process coverage terminations for one of the CINs that appear on these reports, complete CIN consolidation procedures (see WMS/BICS Coordinator Letter dated 11/20/2007) and process recoupment of Medicaid managed care premiums when duplicate capitation payments are identified for the same managed care plan.

Beginning in November 2020, a new oversight report entitled "Quarterly LDSS Duplicate CIN Report," will be emailed to LDSS Medicaid Directors. The report will identify duplicate CINs that were previously identified on one of the two reports mentioned above, and which remain unresolved from the previous calendar quarter (past three months or longer). Information on this new report includes the enrollee's name, date of birth, the district and case number associated with each CIN and the date the duplicate CINs were initially reported to the local district.

Districts must use the information on the report, along with the enrollee's category of eligibility and any other public benefit information the LDSS has to determine which CIN and associated coverage must remain active and which CIN and associated coverage should be closed. In general, a CIN with active Medicaid enrollment on a Temporary Assistance, Supplemental Security Income (SSI), Foster Care, or Services case should remain active and the CIN associated with any other Medicaid case type should have coverage terminated. For Medicaid-only cases, the CIN with '30' (Medicaid managed care) coverage takes precedence over the CIN with fee-for-service coverage.

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Once a determination is made regarding which CIN and associated coverage will be closed, the district must close coverage on the identified CIN, complete the required procedures for CIN consolidation and initiate the recoupment of managed care capitation payments, if appropriate. Duplicate CINs on the report may be active in more than one district. When this occurs, districts are required to work collaboratively to determine which CIN will remain active and which CIN will be closed and whether there are any managed care premiums to process for recoupment. CIN consolidation procedures can be found in Centraport, 2007 WMS Coordinator Letter dated 10/22/2007. In addition, General Information System (GIS) messages 13 MA/010, 05 MA/025 and 05 MA/034 provide guidance on resolving duplicate CINs and recoupment of Medicaid managed care premiums.

DOH will use the new report to monitor and document duplicate CIN resolutions. Districts will confirm that a duplicate CIN has been resolved by entering information in the following columns on the report:

- CIN Termed by LDSS The CIN selected to be closed.
- Date Termed The date of closing transaction in WMS.
- MMC Capitation Overlap The date range managed care capitation payments were paid on both CINs. This includes managed care capitation payments made to the same plan and capitation payments made to two different MMC plans). Enter "NA" (not applicable) if no managed care capitation payments were paid on the CIN being closed. Enter "None" if managed care capitation payments were paid on both CINs but the MMC enrollment periods did not overlap.
- MMC Recoupment Processed Enter "Y" to confirm the district has completed recoupment procedures for managed care capitation payments paid on both CINs for the same plan and coverage period. This column should be left blank if "NA" or "None" was entered for MMC Capitation Overlap. This column should also be left blank if overlapping managed care capitation payments were paid to two different MMC plans.
- CIN Consolidation Completed The date CIN consolidation procedures were completed and confirmed as a successful consolidation on the WMSBCINC CIN Consolidation Report (Upstate) or the MNY 760_Aged 3 Up Downstate/Downstate Duplicate Report.
- LDSS Worker ID The worker confirming coverage on one CIN has been closed and recoupment of any duplicate managed care capitation payments has been processed.

The completed report must be returned to Local District Support staff within 15 business days of receipt.

Any discrepancies found in the Duplicate CIN report information (e.g., incorrect date of birth), must be resolved and corrected in the WMS case record. In addition, LDSS staff are reminded that any updates to demographic information should be made to the case record as soon as possible in order to allow for proper CIN assignment at re-application and to increase the accuracy of case records.

Please direct any questions regarding this GIS message to your local district support liaison.