**WGI UPD** GENERAL INFORMATION SYSTEM 01/16/98 0 OFFICE OF MEDICALD MANAGEMENT PAGE 1 ° °GIS 98 MA/001 0 0 °TO: Local District Commissioners, Medicaid Directors 0 °FROM: Ann Clemency Kohler, Deputy Commissioner 0 Office of Medicaid Management 0 0 °SUBJECT: Change in Work Requirements

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°EFFECTIVE DATE: Immediately

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Local departments of social services are reminded that pursuant to Chapter 436 of the Laws of 1997, work requirements are no longer a reason for denying or discontinuing Medicaid. Thus, a person who is not eligible for cash assistance pursuant to the provisions of Title 9-b of Article 5 of the SSL would be, if otherwise eligible, eligible for Medicaid.

Should districts become aware of a client adversely affected by a misapplication of this policy, the district should reinstate Medicaid eligibility and provide reimbursement for paid medical bills for this period. In accordance with <u>Greenstein v. Dowling</u>, reimbursement for paid medical expenses must not be limited to the Medicaid rate or fee for the particular service. Social services districts should follow the reimbursement procedures set forth in the New York State Manual for Local Social Services Districts at Volume I, Chapter 7, pages 20 through 26 (dated November 10, 1996) and Volume II, Chapter 5, pages 16 thorough 21 (dated November 10, 1996).