

NEW YORK STATE

DEPARTMENT OF SOCIAL SERVICES

40 NORTH PEARL STREET, ALBANY, NEW YORK 12243-0001

MARY JO BANE
Commissioner



(518) 474-9475

LOCAL COMMISSIONERS MEMORANDUM

DSS-4037EL (Rev. 9/89)

**NO
ATTACHMENTS**

Transmittal No: 92 LCM-108

Date: July 16, 1992

Division: Medical Assistance

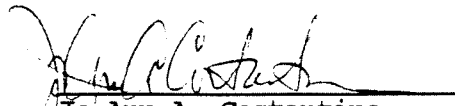
TO: Local District Commissioners

SUBJECT: List of Outstanding Hospital Rate Appeals

ATTACHMENTS: List of Outstanding Hospital Rate Appeals (not available on-line).

Pursuant to the Local Commissioner Memorandum of January 25, 1990, attached is the quarterly report entitled "List of Outstanding Hospital Rate Appeals". As you will note, the report contains a listing of all such appeals for all hospitals in your county, presented in alphabetical sequence by hospital and chronological sequence by appeal number. The source of this information is the Bureau of Hospital Reimbursement, New York State Department of Health.

If you have any questions on the report, please call Larry Moss of my staff at 1-800-342-3715, extension 4-9238 (Userid OMB180).


Jo-Ann A. Costantino
Deputy Commissioner
Division of Medical Assistance