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)

Transmittal No: 92 LCM-146

Date: September 21, 1992

Division: Medical Assistance

TO:

Local District Commissioners

SUBJECT: Comprehensive Medicaid Case Management (CMCM) - Enrollment of

Office of Mental Retardation and Developmental Disabilities'

(OMRDD) Providers in MMIS.

ATTACHMENTS: There are no attachments to this ICM.

The statewide Office of Mental Retardation and Developmental Disabilities (CMRDD) Comprehensive Medicaid Case Management (CMCM) program was described in 90 LCM-36. This memorandum conveys specific information regarding the enrollment of the CMRDD providers listed below.

This provider information is required for completion of the individual client WMS registration/termination procedures described in 89 ADM-29 (IV)(L) and 90 LCM-16. Please note that the WMS registration date may be retroactive to cover services provided to Medicaid clients since the agency's start date.

The following providers have been enrolled in MMIS under category of service 0265, rate code 5221 at a fee of \$6.52 per quarter hour.

<u>Provider</u> <u>Name</u>	Provider ID #	Agency's Start Date	RMFO Responsible for IDSS Liaison	Client Residential Status Limitations
A Very Special Place	01343315	6/1/92	Manhattan (Maureen Koch-Franc	At-Home es)
Albany Co. Assoc. for Retarded Children	01336983	1/1/92	Albany (Peter Keegan)	VOCR

_	<u>Provider</u> Name	<u>Provider</u> <u>ID</u> #	Agency's Start Date	RMFO Responsible for LDSS Liaison	Client Residential Status Limitations
(Catholic Charities of Utica	01341868	4/1/92	Rome (Thomas J. Thomas)	VOCR
I	Disabled Persons Action Organization	01336992	5/1/92	Rome (Thomas J. Thomas)	At-Home
]	Learning Disabilities Assoc. of Genesee Valley	01331713	4/1/92	Rochester (Karen Desso)	VOCR
V	Western NY Assoc. for the Learning Disabled	01334129	4/1/92	West Seneca (Sharon Wall)	VOCR

Any questions concerning this transmittal may be directed to Barbara Pukis at (518) 474-0519, UserID #89D359.

Additional information will be conveyed as other OMRDD CMCM providers are enrolled in MMIS.

Jo-Ann A. Costantino Deputy Commissioner

Division of Medical Assistance