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LOCAL COMMISSIONERS MEMORANDUM |

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DSS-4037EL (Rev. 9/89)

Transmittal No: 94 LCM-71

Date: June 22, 1994

Division: Health and Long Term

Care

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 LCM.

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

| Provider Name | Provider ID # | Agency's Start Date | RSFO Responsible for LDSS Liaison | Client Residential Status Limitations |
|----------------------------|---------------|------------------------|-----------------------------------|--|
| New Hope Community, Inc | 01439096 | 10/1/93 | Letchworth (Gary O'Loughlin) | VOCR |

| <u>Provider</u> <u>Name</u> | Provider ID # | Agency's Start Date | RSFO Responsible for LDSS Liaison | Client Residential Status Limitations |
|---|----------------------|------------------------|-----------------------------------|---------------------------------------|
| Westchester Co. Dept. of Co. Mental Health- Disabilities O | -Developmen | 9/1/93 tal | Letchworth (Gary O'Loughlin) | At Home |
| Just Kids Diagnostic and Treatment Cent | | 3/1/93 | Long Island (Denis Zadorecki) | At Home |
| Suffolk County Dept. of Healt Physically Hand Childrens Prog | h dicapped | 4/1/93 | Long Island (Denis Zadorecki) | At Home |
| Bedford- Stuyvesant Com Mental Health | _ | 10/18/93 | NYC (Walter Steffen) | VOCR |
| Early Childhood Development Proof Schneider Cong Island Je | ogram hildrens Ho | - | NYC (Walter Steffen) | At Home |
| Highbridge Advisory Counc | 01458346 il | 4/1/93 | NYC (Walter Steffen) | At Home |
| Independent Living Associa | 01436460 tion | 4/1/93 | NYC (Walter Steffen) | At Home |
| Miriam DeSoyza Learning Cente | | 10/1/93 | NYC (Mitchell Kevy) | At Home |
| The Lexington Center, Inc. dba: Vocation Services Center | al | 4/1/93 | NYC (Walter Steffen) | At Home |
| Urban Health Plan | 01458355 | 4/1/93 | NYC (Walter Steffen) | At Home |
| Urban Resource Institute | 01437521 | 4/1/93 | NYC (Walter Steffen) | At Home |

Trans. No. 94 LCM-71 Page No. 3

| Provider | Provider | Agency's | RSFO Responsible | Client |
|--|-------------|------------|--------------------------------|--------------------------------|
| <u>Name</u> | <u>ID #</u> | Start Date | for LDSS Liaison | Residential Status Limitations |
| Syracuse Model Neighborhood Fa | | | Newark D.C. (Philip Dodd) | At Home |
| Buffalo Coali- tion for Adole Pregnancy Prev | scent | 8/1/93 | West Seneca D.C. (Sharon Wall) | At Home |

Any questions concerning this transmittal may be directed to Paul Weinstein at (518) 473-6209, User ID AZ3200.

Additional information will be conveyed as other ${\tt OMRDD}$ CMCM providers are enrolled in MMIS.

Sue Kelly
Deputy Commissioner
Division of Health & Long Term Care