



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

CHRISTINE TODD WHITMAN
Governor

WILLIAM WALDMAN
Commissioner

VELVET G. MILLER
Director

MEDICAID COMMUNICATION NO. 96-7

DATE: February 27, 1996

TO: County Welfare Agency Directors
Institutional Services Section Area Supervisors

SUBJECT: Supplemental Security Income (SSI) to Medicaid Only LTC
Conversion Report

As you know, a significant number of individuals who are eligible for Supplemental Security Income (SSI) in the community lose SSI eligibility upon admission to a nursing facility. In almost all cases, this is due to income which is above the SSI institutional standard (\$60) but which is below the Medicaid Only special income "cap" (\$1,410). Accordingly, although responsibility for the cases shifts from the Social Security Administration to the county welfare agencies, Medicaid eligibility should continue without interruption. To ensure this continuity of medical coverage during the transition, the Medicaid eligibility system continues these records in an active status until the counties complete the eligibility determination.

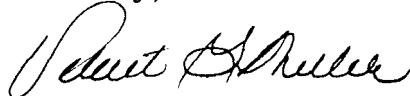
Despite the requirement for facilities to notify the CWA upon the admission of a potential Medicaid beneficiary, many of these conversion cases are lost in the process. Accordingly, to ensure that each case is identified, Medicaid supervisors requested that a report be developed which identifies converted cases. The report is an adjunct to the existing notification process, i.e., the transmission of form MCNH-33 by the facility. It provides the resident's name, Social Security number, date of birth, unearned income, and the address on the State Data Exchange (SDX) record. This address is usually the representative payee's which in some instances is the nursing facility. A copy of the report is attached for your reference.

If an individual listed on the report is not known to your agency and there is no record on the file, your agency should initiate an outreach and application, as appropriate.

The report is sorted by county in ascending order by Medicaid identification number and will be distributed weekly. I would appreciate your forwarding it to appropriate staff for their action.

Questions concerning the report may be directed to Douglas Eide, Office of Beneficiary and Provider Services, Technical Services Unit at (609) 588-2936.

Sincerely,

A handwritten signature in cursive script, appearing to read "Velvet G. Miller".

Velvet G. Miller
Director

VGM:Em

Attachment

c Karen Highsmith, Acting Director
Division of Family Development

Patricia Balasco-Barr, Director
Division of Youth and Family Services