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GENERAL INFORMATION SYSTEM
DIVISION: Office of Medicaid Management

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PAGE 1

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TO: Local Commissioners, Medicaid Directors, Temporary Assistance
Directors
FROM: Betty Rice, Director, Division of Consumer & Local District Relations
SUBJECT: Request for Newborn Project Liaison

EFFECTIVE DATE: Immediately

CONTACT PERSON: David Bacheldor at (518)402-3750

The purpose of this GIS is to request that local districts provide the State Department of Health (SDOH) with the name, phone number, and address of a local district contact person to act as a liaison with SDOH for the Newborn Enrollment Project.

Recently passed legislation (Chapter 412 of the Laws of 1999, Section 366-g) requires SDOH to establish a new process to ensure Medicaid eligibility for newborns whose mothers are receiving Medicaid on the date of the birth of the newborn. Provisions of this statute become effective July 1, 2000.

With the implementation date so near, it will be helpful to have a point of contact in each district so that information may be readily disseminated as it becomes available.

Please send the name, address, phone number, fax number, and e-mail address (if available) of the appropriate person to:

David Bacheldor
New York State Department of Health
Office of Medicaid Management
Division of Consumer and Local District Relations
7th Floor, Room 727
1 Commerce Plaza
Albany, New York, 12260

This information may also be e-mailed to: deb05@health.state.ny.us or faxed to the attention of David Bacheldor at (518) 473-0601.