

WGIUPD

GENERAL INFORMATION SYSTEM
DIVISION: Office of Health Insurance Programs

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TO: Local District Commissioners, Medicaid and Temporary Assistance Directors

FROM: Jonathan Bick, Director
Division of Health Plan Contracting and Oversight

SUBJECT: Change of Enrollee Address - Template Letter for Plans

EFFECTIVE DATE: Immediately

CONTACT PERSON: Local District Support Unit:
Upstate (518) 474-8887; New York City (212) 417-4500

The purpose of this General Information System (GIS) message is to inform local departments of social services (LDSS) of recent guidance from the New York State Department of Health (NYS DOH) to Medicaid Managed Care Plans (MMCP). In an effort to obtain more accurate residential and/or mailing address information for Medicaid recipients, the NYS DOH is working with MMCPs to provide this information to the LDSS so it may update NYS Welfare Management System (WMS) Medicaid systems.

The guidance provided to plans allows MMCPs to send a form letter to current enrollees, requesting the enrollee to verify or update his or her residential and mailing addresses. This letter may be sent to enrollees the plan has identified as having an incorrect or undeliverable address on file. Attached for your reference is a copy of the template letter that plans may use for this purpose. Each plan may adapt this template for its own use, including addition of plan letterhead and telephone number.

The letter asks the MMCP enrollee to verify or make changes to the address information provided, and sign and date the letter. The enrollee is instructed to mail the updated information to the appropriate LDSS, using the postage paid, pre-addressed envelope provided by the plan.

Upon receipt of the signed letter, the LDSS must accept this as a request by the Medicaid recipient to update the Medicaid case in WMS if the address information is different from that listed on the case record. The LDSS should retain the letter in the case record as proof of residence.

Separate instructions are being issued to plans for Medicaid enrollees whose coverage is provided through New York State of Health.

Please direct any questions to your Local District Support Liaison.