

LK Alert

March 2012

Large Firm Service,
Small Firm Attention

655 Third Avenue
New York, NY 10017
Phone: 212-490-2020
Fax: 212-490-2990

399 Knollwood Road
White Plains, NY 10603
Phone: 914-684-2100
Fax: 914-684-9865

300 Westage Business
Center Drive
Fishkill, NY 12524
Phone: 845-896-1106
Fax: 845-896-1107

The New York Health Care Proxy form must be Provided to all Interested Medicaid Applicants

Effective November 22, 2011, all local departments of social services (LDSS) must provide the New York State Department of Health (DOH) model Health Care Proxy form (DOH publication #1430) to all interested individuals applying for Medicaid.

This new requirement is set forth in Chapter 512 of the Laws of 2011, which provides that every person who applies for Medicaid, and every person on whose behalf an application is made, if interested, must be given the New York Health Care Proxy form (DOH publication #1430) by the person taking the application, *except where doing so would impede the immediate provision of health care services.*

This requirement must be followed regardless of how the Medicaid application is submitted. For example, if you mail the application to DSS, you will receive a message attached to a CNS acceptance or a denial notice with information about the Health Care Proxy form, including the DOH website address where you can access and print the form, as well as the telephone number to request a paper copy of the form if you so desire.

Likewise, if you personally walk into the LDSS to submit the Medicaid application, or you apply through a facilitated enroller (such as a nursing home Medicaid coordinator), the LDSS worker or facilitated enroller must inform the applicant of the Health Care Proxy form and offer to assist interested applicants in obtaining a copy of the form. This can be accomplished by providing the applicant with copy of the form and related information from the DOH website, or by providing the applicant with the DOH website address where they can print a copy for themselves. If the LDSS or facility enroller cannot provide a hard copy of the form to an interested applicant, they must give the applicant the New York Health Options telephone number (1-800-541-2831) where the applicant can request that a copy be mailed to them. If necessary, the LDSS worker or facility enroller must assist the applicant with making this

telephone call.

Important Note: Applicants are not being asked to submit a copy of their Health Care Proxy form with their Medicaid application. In fact, applicants should not do this. If a Health Care Proxy form is submitted to LDSS with the Medicaid application, the Health Care Proxy form will be returned to the Medicaid applicant.

Littman Krooks LLP encourages you to share this LK Alert with anyone interested in the issues discussed herein. Please contact Nicole Garcia at (212) 490-2020 or (914) 684-2100 if you are interested in having an attorney from Littman Krooks LLP speak at your facility. Littman Krooks LLP offers legal services in several areas of law, including Accounts Receivable Management, Medicaid, Health Care, Guardianship, Elder law, Estate and Tax planning, Public Benefits, Estate Administration/Probate, and Trusts and Estates.

This publication does not constitute the rendering of legal or other professional services by Littman Krooks LLP. While care is taken to present the material accurately, Littman Krooks LLP disclaims any implied or actual warranties as to the accuracy of the material and any liability with respect thereto.

Copyright © 2012 by Littman Krooks LLP