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| LOCAL COMMISSIONERS MEMORANDUM |  
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DSS-4037EL (Rev. 9/89)

Transmittal No: 92 LCM-152

Date: September 30, 1992

Division: Medical Assistance

TO: Local District Commissioners

SUBJECT: Local Social Services Districts Designated to Develop Managed  
Care Plans in 1992

ATTACHMENTS: None

Chapter 165 of the Laws of 1991 requires the Department to designate, based on certain selection criteria, up to twenty (20) social services districts to develop managed care plans in 1992. The following districts have been selected to develop and submit managed care plans in 1992:

Albany	Madison
Allegany	Montgomery
Broome	Otsego
Cattaraugus	Rensselaer
Chautauqua	Saratoga
Clinton	Schenectady
Delaware	Schoharie
Franklin	St. Lawrence
Fulton	Tioga
Genesee	Westchester

Specific guidelines on submission of your district plan are outlined in 91 ADM-47 "Statewide Managed Care Program: Social Services District Guidelines and Procedures". In addition, correspondence indicating designation of the counties and availability of technical assistance from this department has been forwarded to the County Executive or other ranking county official for each district involved.

During the selection process, the Department used both the criteria required by the Statewide Managed Care Act (Chapter 165 of the Laws of 1991) and other criteria relating to provider availability, geographic accessibility, implementation potential and cost-effectiveness to prioritize districts.

The following method was used to prioritize districts:

1. Two data sources were used: a) 1990 U.S. Census county statistics; and b) the Medicaid Management Information System (MMIS) On-line Annual File for Federal Fiscal Year 1991.
2. Data obtained from these sources for all counties in New York State were converted to measurable units: a) percentage of county population receiving Medicaid; b) percentage of Medicaid eligibles in managed care; c) number of physician visits per eligible month; d) number of clinic visits per eligible month; e) number of emergency room visits per eligible month; f) number of hospital admissions per eligible month; and g) inpatient length of stay per eligible month.

In addition, a value was assigned (by county) to the non-mandated criteria, based on known provider resources and networks, local district characteristics, and MA expenditure patterns.

3. A weighting scheme was developed to compute a possible score for each of the criterion.
4. The scores for each criterion were computed, and a total score for each county was calculated.
5. Counties were then ranked by total score.
6. The highest ranked counties, listed previously, were designated to submit managed care plans.

Any district which has not been designated but wishes to participate in the Managed Care Program is encouraged to develop and submit a managed care plan. In the third program year, which begins in October, 1993, all remaining districts will be designated.

Any questions regarding the above should be directed to Jennifer Dean at 1-800-342-3715, extension 3-5615.

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Executive Deputy Commissioner