

OFFICE OF TEMPORARY AND DISABILITY SERVICES

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| INFORMATIONAL LETTER |  
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TRANSMITTAL: 99 INF-4

DIVISION: Temporary Assistance

TO: Commissioners of  
Social Services

DATE: March 4, 1999

SUBJECT: Public Assistance Eligibility: Clarification of  
Drug and/or Alcohol Issues

SUGGESTED

DISTRIBUTION: Income Maintenance Staff  
Medical Assistance Staff  
CAP Coordinators  
Staff Development Coordinators  
Employment Staff

CONTACT PERSON: Regional Representatives: Region I (518-473-0332);  
Region II (518-474-9344); Region III (518-474-9307);  
Region IV (518-474-9300); Region V (518-473-1469);  
Region VI (212-383-1658)

Claiming Issues: Roland Levie - Regions I-IV (518-474-7549) Marvin Gold - Regions V & VI (212-383-1733)

ATTACHMENTS: NONE

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
97 ADM-23		351.2(i)			
97 INF-16					

Questions and Answers on Drug and Alcohol Policy

Several questions have come from local districts requiring clarification on drug and/or alcohol policy. The following questions and answers are provided to clarify these policy issues.

Court Ordered Treatment

1. Q. Must clients participating in court ordered treatment be assessed under the drug and/or alcohol provisions?  
  
A. Yes, such clients must be assessed to determine if they are able to work and, if so, if work can be coordinated with the treatment.\*
2. Q. If a court has ordered a client into a treatment program that does not meet the definition of appropriate treatment found in 18 NYCRR 351.2(i), is this treatment acceptable for public assistance purposes?  
  
A. Yes, since the court ordered the treatment. The district can pursue a modification of the court order.
3. Q. Is an individual required to attend court ordered treatment if the assessment determines that the individual is not mandated to participate in treatment?  
  
A. Yes, court ordered treatment takes precedence.
4. Q. If the assessment determines a different level of treatment care than has been ordered by the court or parole, to what treatment should the client be referred?  
  
A. Court ordered treatment takes precedence. The district can pursue a modification of the court order.
5. Q. If the assessment determines that a client court ordered to treatment can work, can the client be required to attend the court ordered treatment and comply with work rules?  
  
A. If the district is able to coordinate the treatment and work requirements, the client can be required to comply with both treatment and work requirements.\*
6. Q. For a client court ordered to treatment, who is assessed as able to work and only required to attend treatment because of the court order, is noncompliance with treatment a sanction under the drug and/or alcohol treatment requirements, or would failure to comply with treatment in this instance only be sanctionable if treatment had been part of the individual's employment plan and, therefore, a work rules violation?

- A. If the client is not mandated into treatment via the Welfare Reform assessment process, the client cannot be sanctioned for drug and/or alcohol treatment. If the client's employment plan requires drug and/or alcohol treatment and the client fails to comply, it is an employment sanction.\*
7. Q. Should we handle parole ordered treatment the same as court ordered treatment?
- A. Yes.

\*Note: There are no employment requirements for Medicaid-only applicants or recipients. However, if an individual is subject to the screening and assessment requirement, and is determined through the substance abuse assessment process to be unable to work, the individual must comply with treatment as a condition of Medicaid eligibility. If a PA case is closed due to a substance abuse sanction, the individual's Medicaid authorization must continue if the individual is in a Medicaid category that does not require screening, assessment or treatment as a condition of Medicaid eligibility. Please see the Department of Health releases (not in ELIB) OMM/ADM 97-2 and OMM/INF 98-2 for more information.

#### Assessment - Dual Diagnosis

- Q. Consider an individual who is assessed as unable to work as a result of drug and/or alcohol abuse, and who also is determined to have one or more other medical or psychological conditions that also would make the individual unable to work. Is that individual mandated to drug and/or alcohol treatment?
- A. Yes. Whenever an individual who is required to be assessed, is assessed as having drug and/or alcohol abuse that makes the individual unable to work, the individual is mandated to treatment. This is true whether or not other disabling conditions co-exist. The district should, however, pursue SSI eligibility for anyone who reasonably appears to qualify, or otherwise appears to be eligible.

The screening, assessment and treatment requirements are not a condition of eligibility for disabled Medicaid-only applicants. Individuals who have a potentially disabling physical or mental impairment (other than substance abuse) should be referred to the Medicaid disability review team for a disability determination.

#### Administrative Costs

1. Q. How are assessments completed for clients receiving treatment out of district, and who is responsible for the cost of the assessment?

- A. For clients receiving treatment outside of a district, the district where the client is receiving the assessment (host district) may pay for the assessment and bill back the entire cost of the assessment to the responsible district. The host district would not claim any of the costs, since the responsible district is fully reimbursing the cost. The responsible district would claim the cost for reimbursement.

For Medicaid-only cases, the responsible district may require an assessment or may choose to allow the treatment to continue and evaluate any further need for care after the completion of the out-of-district care.

2. Q. Are administrative costs for drug and/or alcohol screening separately identified to claim against drug and alcohol allocations?

- A. No. Screening is subject to normal reimbursement as part of the Eligibility Income Maintenance or Medicaid function.

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Patricia A. Stevens  
Deputy Commissioner  
Division of Temporary Assistance