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Dear Family Member:

This letter is to notify you of your right to be informed about Liability of Services. Arc Herkimer is required by the New York State's OPWDD to inform you of this notice if you are currently receiving services in Arc Herkimer's Residential or Day Habilitation programs. Additionally, Arc Herkimer (as a best practice), informs all people receiving services and their families about Liability of Services on an annual basis.

In summary, the purpose of the attached notice(s) is to inform the individual/family member of OPWDD's intent to strictly enforce the responsibility for individuals to maintain their Medicaid status. However, it is important that you continue to work with your Care Manager to ensure that all necessary requirements (re-certifications, asset levels, etc.) for your Medicaid status are fulfilled.

Please be aware that if your current Medicaid eligibility was to change, you must do everything in your power to reinstate your Medicaid. There may be instances when your situation may not enable you to become Medicaid eligible. In those rare cases, you would either become a private pay individual or you could request a waiver from OPWDD for payment for your service.

Should you have any questions regarding the attached notice, please contact your Care Manager or Kristy Evans, Benefits Coordinator at (315) 574-7652 if you need additional assistance with accessing, or verbally would like to receive this information.

Empowering people with disabilities and enriching lives throughout our community.



Description			Code	Code	Rate
760	31760	Community DH Supplemental Day Habilitation		4456	
Site Based PreVoc					
422	31700	4th Ave Waiver Income - Pre Voc		4464	162.35
422	31700	4th Ave Waiver Income - Pre Voc		4465	81.17
621	31700	4th Ave Waiver Income - Pre Voc		4464	162.35
621	31700	4th Ave Waiver Income - Pre Voc		4465	81.17
Prevoc Transportation					
Community Based PreVoc					
422	31705	Community PreVoc-Individual		4781	11.82
422	31705	Community PreVoc-group of 2		4782	7.39
422	31705	Community PreVoc-Group of 3+		4783	5.91
628	31705	Mall Community PreVoc-Individual		4781	11.82
628	31705	Mall Community PreVoc-group of 2		4782	7.39
628	31705	Mall Community PreVoc-Group of 3+		4783	5.91
SEMP					
421	31072	Medicaid Supported Employment Intensive(II) -1		4790	21.29
421	31072	Medicaid Supported Employment Extended(EI) -1		4792	21.29
421	31072	Medicaid Supported Employment Intensive(IG) -2+		4791	6.04
421	31072	Medicaid Supported Employment Extended(EG) -2+		4793	6.04
Billable Days					
Unit report					
421	33056	OPWDD Supported Employment Extended(EI) -1		4792	21.29
421	33056	OPWDD Supported Employment Extended(EG) -2+		4793	6.04
421	33056	OPWDD Supported Employment Intensive(IG) -2+		4791	6.04
421	32245	HCBS Children Caregiver		8003	24.28
421	32250	HCBS Children Respite		8023	12.28
421		HCBS Children Staff Travel			104.39
421	32480	OMH HCBC Educational Support		7805	0.52
421	32038	OMH HCBC Staff Transportation		A0160	26.10

421 32470	OMH	HCBC Intensive Supportive Employment		7803	
421 32465		HCBS Prevocational		7801	
422 31075		Pathway to Employment-Individual		4444	
422 31075		Pathway to Employment-Group		4445	
Hourly Respite					
770 31770		Hourly Respite- Site Based		7422	6.30
770 31771		Respite - Recreation		7423	5.74
770 31772		Respite - In Home		7421	6.44
770 33770	OPWDD	Hourly Respite - Site Based		7422	6.30
770 33771	OPWDD	Respite - Recreation		7423	5.74
770 33772	OPWDD	Respite - In Home		7421	6.44
Community Habilitation					
780 31782		Community Habilitation-IRA		4757	10.67
780 31782		Community Hab Group of 2-IRA as of 7/1/19 1: group		4758	6.67
780 31780		Community Habilitation		4722	10.67
780 31780		Community Hab Group of 2		4723	6.67
780 31780		Community Hab Group of 3		4724	5.04
780 31781		Comm Hab AS		4755	10.67
780 31781		Comm Hab AS Group		4756	6.67