

# Medicaid Contacts in New York City (NYC Human Resources Administration - MICSA)

cAugust 5, 2024 - address for main NYC Medicaid Office - called the Brooklyn South Medicaid office - has been changed to **495 Clermont Avenue, Brooklyn, NY 11238**. **This is around the corner from the previous address on Atlantic Avenue since 2013** see [2024-08-02 Change of address for Brooklyn\\_South \)Main\) Medicaid office](#)

Sources of information in table below - [click here](#)

NYC HRA MEDICAID PROGRAM CONTACTS		
<b>1. Medicaid depts. (not Home Care)</b> <ul style="list-style-type: none"> <li>• (Undercare, Applications, Renewals, Eligibility Information Services, Reimbursement, Surplus Transportation)</li> <li>• <b>Fair Hearing Division</b></li> <li>• <b>Nursing Home Eligibility Dept. (NHED)</b></li> </ul>		
<b>2. Home Care Services Program (includes CASA)(new fax number for Central intake 4/15/25)</b>		
MICSA Unit	Liaison Name/ Purpose	New Contact Info
<b>1. Medicaid Departments -- NOT Home Care (for home care see below)</b>		
NYC HRA Medicaid Helpline		1-888-692-6116  <b>Medicaid info</b> <a href="https://www.nyc.gov/site/hra/help/health-assist">https://www.nyc.gov/site/hra/help/health-assist</a>
Undercare Processing Division	Case action update requests  Case or Budgeting Changes	<a href="mailto:undercareproviderrelations@hra.nyc.gov">undercareproviderrelations@hra.nyc.gov</a> - use encrypted password-protected attachment.  or Fax <b>1-917-646-0837</b> . See this <a href="#">August 2024 Medicaid</a> <b>WHAT TO SUBMIT:</b> Attach either <ul style="list-style-type: none"> <li>• signed <b>MAP 751k form</b> required (encrypted)(copy or change date of birth, SSN, gender, change of phone number, ,transfer from county-to-county re write "LUBERTO")</li> <li>• <b>MAP 751W</b> (close case, add or remove someone case, report death, request budgeting changes in pooled trust, evaluate for MSP eligibility, report change immigration status, add or remove Third Party Health Insurance)</li> </ul>
See <a href="#">NYC Medicaid Alert: MAP Undercare Division - 9/8</a>		

Applications		<p><b>General Public -who are not authorized submitters</b></p> <ul style="list-style-type: none"> <li>• <b>E-FAX applications</b> to <b>917-639-0732</b> -- NOT for Immediate Need applications</li> <li>• <b>or MAIL</b> to HRA/MAP Initial Eligibility Unit PO BOX Brooklyn, NY 11202-9814</li> <li>• <b>MAKE CLEAR ON APPLICATION IF SEEKING TO ENROLL IN MLTC, or SEEKING MEDICAID ON</b></li> <li>• If applying with Immediate Need for Personal Care CDPAP- see <u>below</u>.</li> </ul> <p><b>Authorized Submitters (C-REPs) ONLY have THREE submit applications - use only ONE method on any</b></p> <ul style="list-style-type: none"> <li>• <b>fax</b> applications to <b>917-639-0731</b></li> <li>• <b>hand-deliver</b> applications in bulk to 4th floor, W 495 Clermont Ave.</li> <li>• <b>e-mail</b> applications to <a href="mailto:mapcrepreferrals@hra.nyc.gov">mapcrepreferrals@hra.nyc.gov</a> (announced in 8/)</li> <li>• 30 days after application submitted, C-reps may e-mail follow up inquiries to <a href="mailto:mapcedreferrals@h">mapcedreferrals@h</a></li> </ul> <p>Immediate Need - see <u>below</u>.</p>
Managed Care Client Services		212-273-0062 (phone)
Recipient Restriction Unit		929-221-0859/60 (phone)
Eligibility Information Services		929-221-0865 (phone) e-Fax (718) 636-7847 If down <b>use instead (718)-636-7852 or (718) 636-7846.</b>
<u>Medicaid Transportation</u>		929-221-0840/41 (phone)
Medicaid Assistance Program (MAP) Third Party Health Insurance (TPI) Unit		917-639-0675 (e-fax) e-mail: <a href="mailto:maptphi@hra.nyc.gov">maptphi@hra.nyc.gov</a>  Commercial Health Insurance <a href="mailto:hipp@hra.nyc.gov">hipp@hra.nyc.gov</a> - premed reimbursement
<u>Medicaid Reimbursement</u>	Evadne Duff (Homecare)	929-221-0845 (phone non-home care) 929-221-1193 (phone home care)  917-639-0674 E-FAX (both home care and medical)

		E-mail:: <a href="mailto:micsa.fiscal@hra.nyc.gov">micsa.fiscal@hra.nyc.gov</a> (both home care and
Renewals - Office of Mail Renewal		e-Fax 1-888-692-6116
Surplus Unit	Maria Rivera Graciela Mathews Angel Phifer-Brown (Fax Unit)	929-221-0833 (phone) 929-221-0838 (phone) 929-221-0835 (phone) 917-639-0645 ( <b>fax - submit bills to meet spend-down</b>
Pooled Trusts (not with home care)		(929) 221-0868 /69 Fax (718) 636-7847 <b>TEMPORARILY INOPERABLE as of 12-1-2024 - use instead (718)-636-7852 or (718) 636-7846.</b> For info on status of trust for client not receiving MLTC or MLTC in immediate need - email <a href="mailto:undercareproviderrelations@hra.nyc.gov">undercareproviderrelations@hra.nyc.gov</a>
MIPP program		E-MAIL: <a href="mailto:mipp@hra.nyc.gov">mipp@hra.nyc.gov</a> (see <a href="#">article</a> - not for people in program)
Replace Medicaid Card		<b><u>Replace a lost, stolen, or damaged Medicaid card. Information can be found here</u></b>  <b><u>Electronic Benefit Transfer (EBT) Card Assistance for Clients - scroll down to dropdown for Replace or Correct an EBT Card for Medicaid Clients</u></b>
Medicaid Offices		See list at <a href="https://www.nyc.gov/site/hra/locations/medicaid-locations">https://www.nyc.gov/site/hra/locations/medicaid-locations</a> (DO NOT use these offices if applying for or renewing Medicaid or other Home Care. See <a href="#">Home Care Services Program</a> for more information.)
<b>1.a. NYC MEDICAID FAIR HEARING DIVISION</b>		
<b>Medicaid Fair Hearings Record Requests Unit</b> (Request Evidence Packets)		MAIL: HRA Fair Hearings - Records Request Unit 250 Livingston St. 6th floor Brooklyn, New York 11201 <b>FAX: 917-639-9355 (New 12-2024)</b>
Conference Unit - Fair Hearings		505 Clermont Ave. 4th fl. Brooklyn NY 11238 TEL: (718) 637-2426 FAX: (718) 923-6452

Electronic Benefit Transfer (EBT) Card Assistance for Clients - scroll down to dropdown for Replace or Cor

Compliance & Aid to Continue Unit (manages compliance with hearing decisions and with OTDA Aid Continuing orders)		250 Livingston St., 6th floor, Brooklyn, NY 11201 TEL: (929) 221-4791 FAX (718) 923-7880
Fair Hearing Representation Unit (reps agency in OTDA hearings)		250 Livingston St., 6th floor, Brooklyn, NY 11201
<b>1.b. NURSING HOME ELIGIBILITY DEPT. NHED</b>		
Nursing Home Eligibility Dept. (NHED)	Provider Relations	TEL 718-557-1368 E-FAX (917) 639-0687 For inquiries: <a href="mailto:nhedproviderrelations@hra.nyc.gov">nhedproviderrelations@hra.nyc.gov</a>
	NHED Applications	E-Fax (917) 639-0735
	NHED Renewals	E-Fax 917-639-0643
	NHED Deferrals	E-Fax 917-639-0679
	Conversions & Undercare changes	E-Fax 917-639-0736
	Discharge	E-FAX 917-639-0687
<b>2. Home Care Services Program (HCSP) - 785 Atlantic Ave., 7th floor</b>		
Deputy Comm'r. Home Care	Randa Henry-Jenkins	(929) 221-0848
HCSP Central Intake		(929) 221-8851 or (929) 221-8889  FAX <b>718-230-0424 and 718-230-0841 (Changed per Alert 4/15/2025)</b>  email <a href="mailto:HCRequests@hra.nyc.gov">HCRequests@hra.nyc.gov</a>  785 Atlantic Ave., 7th fl, Brooklyn, NY 11238  <ul style="list-style-type: none"> <li>• submission of NYIA decision "OUTCOME" office applicants, if NYIA denied MLTC enrollment and to local district request HOUSEKEEPING service to 8 hours/week</li> <li>• M11Qs for applicants under 18,</li> <li>• change requests on active cases, and</li> <li>• reauthorizations of CASA cases.</li> </ul>
HCSP Centralized Medicaid Eligibility Unit	General Number	(929) 221-0849
	Charrise Andrews, Director	(929) 221-3257 <a href="mailto:andrewsc@dss.nyc.gov">andrewsc@dss.nyc.gov</a>  (929) 221-3224 (Deputy Director Cynthia Robinson)

		Inquire about case status - <a href="mailto:hcspinquiries@hra.nyc.gov">hcspinquiries@hra.nyc.gov</a> email)
<u>Immediate Need Unit</u>	Philomena Offurum	TEL (929) 221-2501 or (212) 274-5035 e-FAX (917) 639-0665 <a href="mailto:offurump@hra.nyc.gov">offurump@hra.nyc.gov</a> e-mail applications <a href="mailto:HCRequests@hra.nyc.gov">HCRequests@hra.nyc.gov</a>
Pooled Trusts for Home Care Cases	Yvette Poole-Brooks	TEL (929) 221-2493 <a href="mailto:poolebrooksy@hra.nyc.gov">poolebrooksy@hra.nyc.gov</a> Fax (718) 636-7848 Inquire about status of submitted trust - <a href="mailto:hcspinquiries@hra.nyc.gov">hcspinquiries@hra.nyc.gov</a> use encrypted mail or password-protected attachment.
HCSP MLTC Provider Relations Unit		TEL (929) 221-2427 FAX (718) 636-7848 MLTC plans - <a href="mailto:mltcproviderrelations@hra.nyc.gov">mltcproviderrelations@hra.nyc.gov</a> Assisted Living Programs <a href="mailto:alproviderrelations@hra.nyc.gov">alproviderrelations@hra.nyc.gov</a>
CASA offices		See list at <a href="https://www.nyc.gov/site/hra/locations/casa-locations">https://www.nyc.gov/site/hra/locations/casa-locations</a> Felix Rodriguez - Executive Director HCSP Field Operations (Citywide) and Director of CASA at Bronx, Manhattan and Staten Island. (212) 274-5044 <a href="mailto:rodriguezfe@hra.nyc.gov">rodriguezfe@hra.nyc.gov</a> Celeste Lewis - Director of CASA South (Queens and Brooklyn) <a href="mailto:lewisceleste@hra.nyc.gov">lewisceleste@hra.nyc.gov</a> 718-250-5640
Contact HCSP about pending Medicaid case transactions (demographic changes, address updates, pooled trust reviews, county-to-county transfer requests, Medicare Savings Program (MSP) and coverage updates - not for submitting applications		<a href="mailto:hcspinquiries@hra.nyc.gov">hcspinquiries@hra.nyc.gov</a> - use encrypted mail or password-protected attachment. Attach signed <u>MAP 751k form</u> required (encrypted)(complete or change date of birth, SSN, gender, change of address, phone number, transfer from county-to-county requests - write "LUBERTO") <u>MAP 751W</u> (close case, add or remove someone from case, death, request budgeting changes including pooled trust reviews for MSP eligibility, report change in immigration status, remove Third Party Health Insurance)

**This table is compiled from these Alerts issued by HRA:**

- [2025-04-15 New Fax numbers for Central Intake - Home Care Services Program](#)
- [2024-12-17 Medicaid Fair Hearing Move Update](#)
- [2024-08-02 Change of address for C-Rep and Brooklyn South Main Medicaid office](#)
- [2023-12-28 Contact Information Update for the Medical Assistance Program's Third-Party Health Insurance Unit](#)
- **See [HRA Fax/E-mail Submissions to HRA MAP and HCSP Program 8/30/2021](#)**
- **See [2021-07-22 NYC Medicaid Alert New Home Care Services Program \(HCSP\) Inquiry Address](#)** - Inquiries related to HCSP Medicaid case transactions (including demographic changes, address updates, pooled trust reviews, county-to-county transfer requests, Medicare Savings Program (MSP) and coverage updates) may be sent via email to [hcsplinquiries@hra.nyc.gov](mailto:hcsplinquiries@hra.nyc.gov). This email is NOT for submitting applications or documents related to an application. Encrypted email and information is required.
- **See [2021-07-21 NYC Medicaid Alert: MAP Undercare Division](#)** - Case action update requests (including demographic changes, change of address, transfer from county-to-county requests and coverage updates) may be sent via email to [undercareproviderrelations@hra.nyc.gov](mailto:undercareproviderrelations@hra.nyc.gov). Encrypted email with signed [MAP 751k form](#) required. This email is NOT for new applications.

## OLDER LISTS

- **See [HRA MICSA Medicaid Alert Dec. 31, 2018 "Department of Social Services HRA Medical Assistance Program \(MAP\) and Homecare Program" Medical Assistance Program Unit Contacts](#)**
- **See [department head contacts obtained 3/2014 - dated Dec. 2013](#)**
- **See [a detailed list of contacts](#) became available on August 14, 2013.**
- **See [detailed Lists - December 2018](#)**

[Visit our article on Medicaid Alerts.](#)

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<http://health.wnyc.com/health/entry/216/>