



Department
of Health

High Fidelity Wraparound (HFW) and Early Intervention (EI) Flags in MAPP HHTS

June 2023

High Fidelity Wraparound (HFW)

How will HFW information initially be added to MAPP HHTS?

HFW information will be pre-loaded into MAPP HHTS by DOH on/or about June 7, 2023, from the OMH provided list, inclusive of historically HFW enrollment.

When will providers be required to maintain the HFW information in MAPP HHTS?

After the information has been loaded into MAPP HHTS, the provider should review and verify the information in the system. Going forward, the providers will be responsible to maintain the HFW information in MAPP HHTS.

How often will providers be required to update HFW information in MAPP HHTS?

HFW information should be updated in MAPP HHTS on a weekly basis.

Early Intervention (EI)

How will EI information be added to MAPP HHTS?

EI information will not be pre-loaded into MAPP HHTS by DOH. Providers will need to enter the information regarding the current Early Intervention cases being served.

- Early Intervention cases to be flagged, are those cases whereas the child has been dually eligible for HH and EI and is being served by a dually designated care manager as an HHCM/EI OSC.

Those providers are found here [Approved Early Intervention Health Home Providers \(ny.gov\)](#)

When will providers be required to maintain the HFW information in MAPP HHTS?

The providers will be responsible to maintain the EI information in MAPP HHTS.

How often will providers be required to update HFW information in MAPP HHTS?

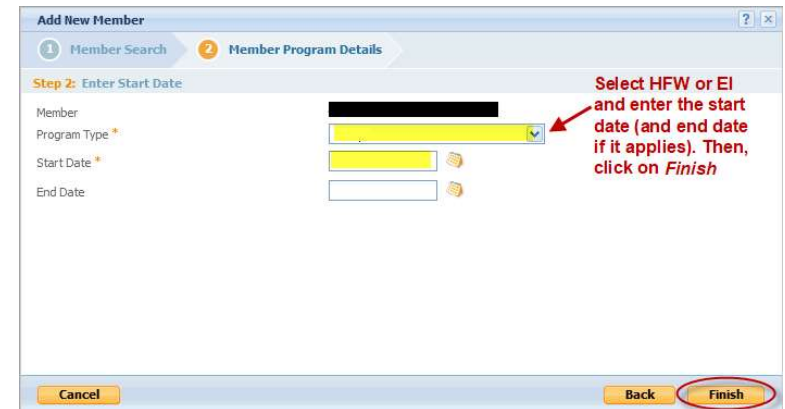
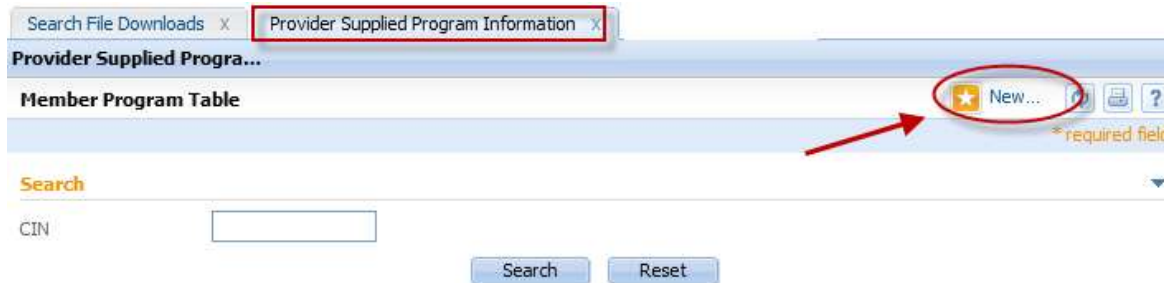
EI information should be updated in MAPP HHTS on a weekly basis.

Updating HFW/EI Information in MAPP HHTS on Screen

1. Click on “Provider Supplied Program Information”



2. Click on “New” to add a new status or “?” to edit a Member Program Status



Updating HFW/EI Information in MAPP HHTS by File

- Upload the **Consent and Member Program Status Upload File**

Format

Consent and Member Program Status Upload						
Field #	Field	Start Pos	Length	End Pos	Req'd	Format
1	Record Type	1	1	1	Y	Alpha (C, M, W, P, D, A, U, R)
2	Member ID	2	8	9	Y	AA11111A, Alphanumeric
3	HH MMIS Provider ID	10	8	17	Y	Numeric
4	Existing Start Date	18	8	25	C	MMDDYYYY, Numeric
5	New Start Date	26	8	33	C	MMDDYYYY, Numeric
6	End Date	34	8	41	C	MMDDYYYY, Numeric
7	Consenter	42	2	43	C	Numeric (01, 02, 03, 04, 05, 06)
8	Existing Consent Type	44	2	45	C	Numeric (01, 02, 03, 04)
9	New Consent Type	46	2	47	C	Numeric (01, 02, 03, 04)
10	Plan of Care Date	48	8	55	C	MMDDYYYY, Numeric
11	Member Program Type	56	2	57	C	Numeric (01, 02)
12	Member Program Start Date	58	8	65	C	MMDDYYYY, Numeric
13	Member Program End Date	66	8	73	C	MMDDYYYY, Numeric

Fields Required on the Consent and Member Program Status Upload Field

When Record Type is 'A' (Add a provider-supplied member program record), the following fields should be used:

- a. **Record Type** (field #1) - Required
- b. **Member ID** (field #2) - Required
- c. **Member Program Type** (field #11) - Required
- d. **Member Program Start Date** (field #12) - Required
- e. **Member Program End Date** (field #13) – Optional, please upload if applicable

When Record Type is 'U' (Modify the end date of a provider-supplied member program record), the following fields are required:

- a. **Record Type** (field #1) - Required
- b. **Member ID** (field #2) - Required
- c. **Member Program Type** (field #11) - Required
- d. **Member Program Start Date** (field #12) - Required
- e. **Member Program End Date** (field #13) – Optional, please upload if applicable

When Record Type is 'R' (Delete a provider supplied member program record), the following fields are required:

- a. **Record Type** (field #1) - Required
- b. **Member ID** (field #2) - Required
- c. **Member Program Type** (field #11) - Required
- d. **Member Program Start Date** (field #12) - Required
- e. **Member Program End Date** (field #13) – Optional, please upload if applicable

HFW Information: The My Members Screen

My Members

Search is restricted to Members assigned to Department of Health.

Managed Care Plans

- None
- 03458546 - AETNA BETTER HEALTH - 03458546
- 03885701 - AETNA BETTER HEALTH FIDA PLAN - 03885701
- 02802899 - AFFINITY HEALTH PLAN M/M - 02802899
- 05572692 - AGE WELL NEW YORK MAP LLC - 05572692
- 03864495 - AGEWELL NEW YORK FIDA - 03864495
- 03481927 - AGEWELL NEW YORK LLC - 03481927

Health Homes

- 03449974 - ADIRONDACK HEALTH INSTITUTE INC - 03449974
- 00689703 - ALCOHOL & DRUG DEPENDENCY - 00689703
- 03005323 - BESTSELF BEHAVIORAL HEALTH INC - 03005323
- 00476022 - BRONXCARE HOSPITAL CENTER - 00476022
- 03520990 - CHAUTAUQUA COUNTY DEPARTMENT OF MH - 03520990
- 04277941 - CHHJNY LLC - 04277941
- 04587495 - CHILDREN'S HEALTH HOME OF WNY INC. - 04587495

Care Management Agencies

- 07527728 - A BETTER LIFE TOGETHER INC - 07527728
- 02996490 - ABBOTT HOUSE INC - 02996490
- 01189019 - ACCESS: SUPPORTS FOR LIVING - 01189019
- 00635112 - ADDICTION CTR OF BROOME CNTY - 00635112
- 05436342 - ADIRONDACK HEALTH INSTITUTE INC - 05436342
- 06320965 - AHIVIM INC - 06320965
- 01225456 - AIDS CENTER QUEENS CNTY AI - 01225456

First Name: Last Name:

Min. Age (Years): Max. Age (Years): Language:

County: Zip Code: Program:

Member Status: Consent: Consenter:

Segment: Segment Status: Segment End Date:

Reason: Segment Begin Date: Record Last Updated:

Network Type: Children's Waiver Services:

Program dropdown menu:

- ACT
- Adult Home
- AOT
- CYES
- Early Intervention
- HARP Eligible
- HARP Enrolled
- HFW**

EI Information: The My Members Screen

My Members

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Managed Care Plans

- None
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Min. Age (Years): Max. Age (Years): Language:

County: Zip Code: Program:

Member Status: Consent: Consenter:

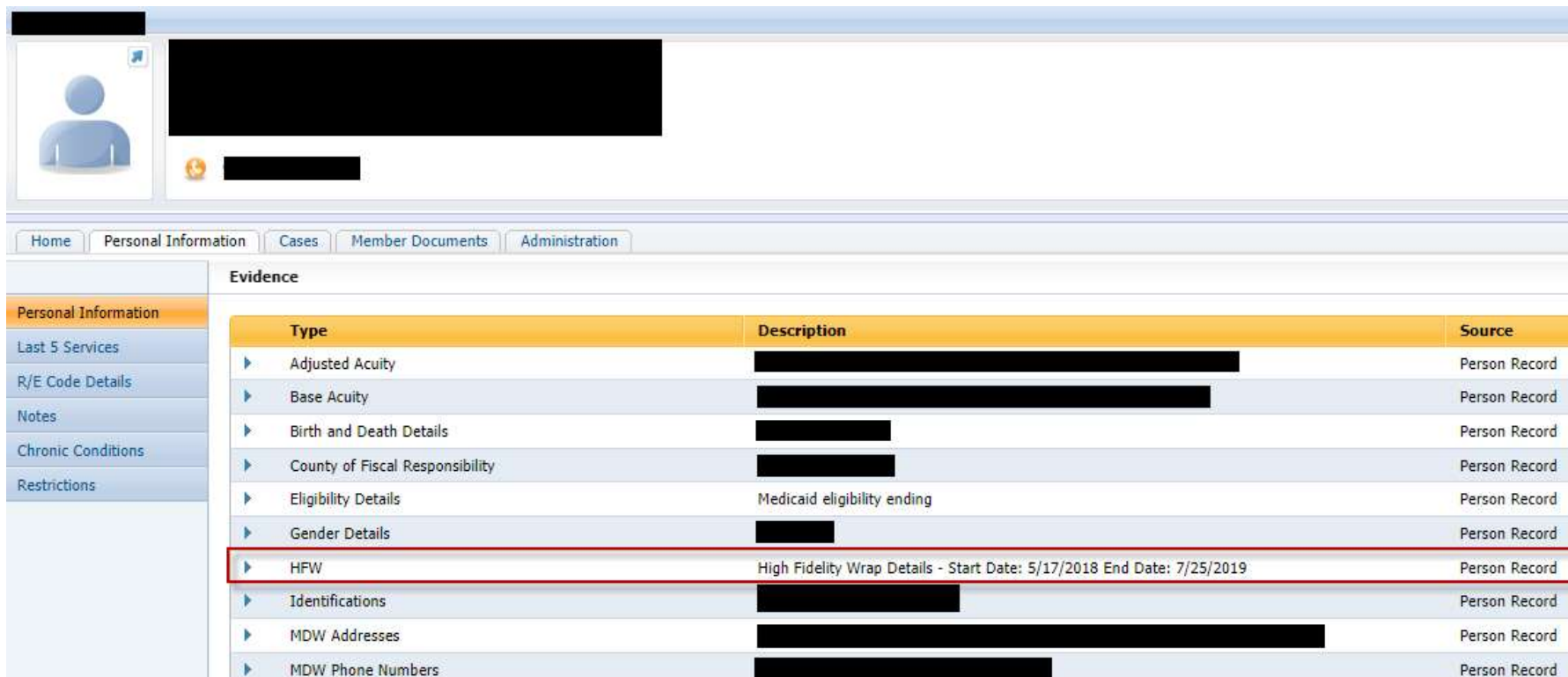
Segment: Segment Status:

Reason: Segment Begin Date: Segment End Date:

Network Type: Children's Waiver Services: Record Last Updated:

Program dropdown options: ACT, Adult Home, AOT, CYES, **Early Intervention**, HARP Eligible, HARP Enrolled, HFW

HFW Information in the Member's Case

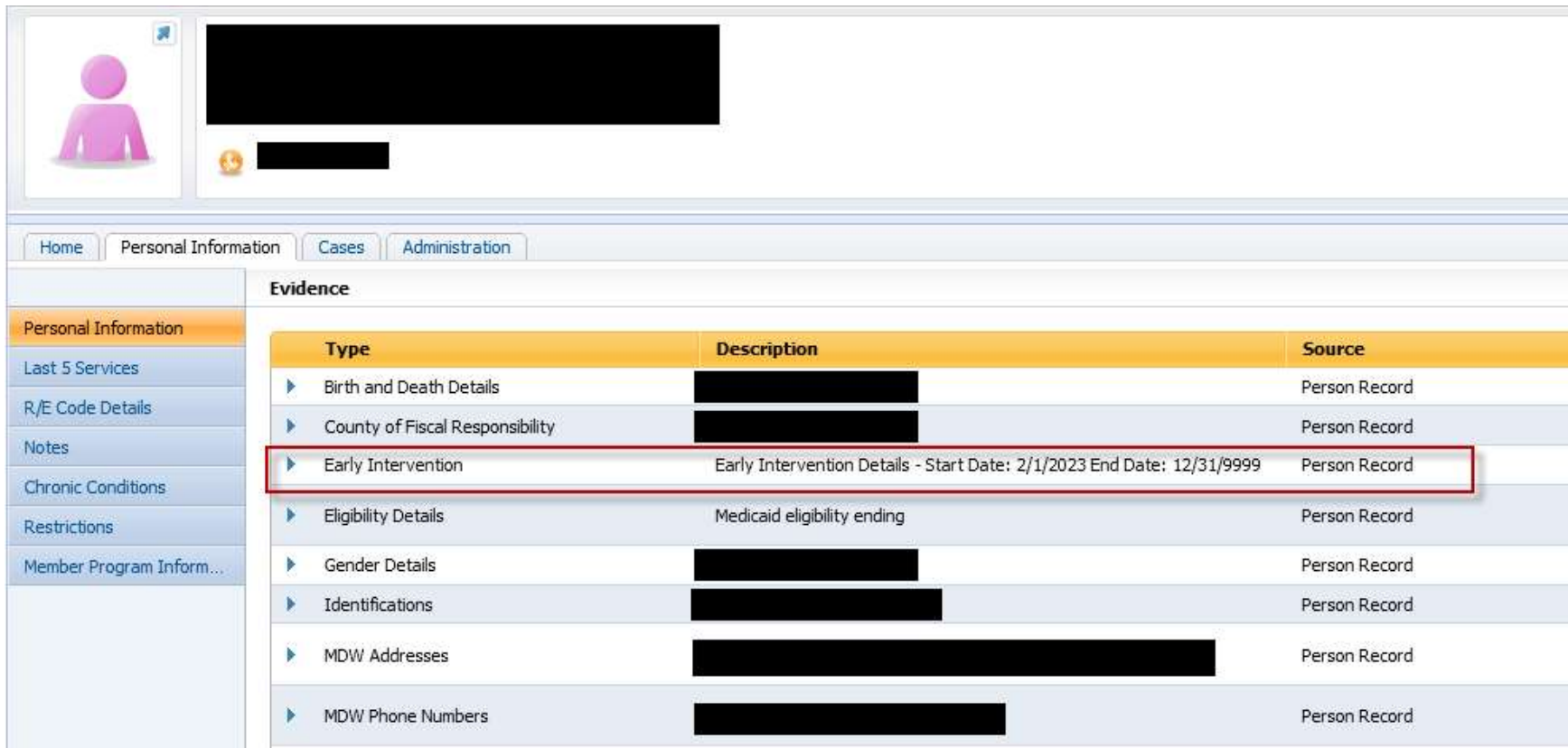


Home Personal Information Cases Member Documents Administration

Evidence

Type	Description	Source
▶ Adjusted Acuity	[REDACTED]	Person Record
▶ Base Acuity	[REDACTED]	Person Record
▶ Birth and Death Details	[REDACTED]	Person Record
▶ County of Fiscal Responsibility	[REDACTED]	Person Record
▶ Eligibility Details	Medicaid eligibility ending	Person Record
▶ Gender Details	[REDACTED]	Person Record
▶ HFW	High Fidelity Wrap Details - Start Date: 5/17/2018 End Date: 7/25/2019	Person Record
▶ Identifications	[REDACTED]	Person Record
▶ MDW Addresses	[REDACTED]	Person Record
▶ MDW Phone Numbers	[REDACTED]	Person Record

EI Information in the Member's Case



The screenshot shows a user interface for a member's case. At the top, there is a profile section with a pink person icon and a blacked-out name. Below this are navigation tabs: Home, Personal Information, Cases, and Administration. A left sidebar contains a menu with items like Personal Information, Last 5 Services, R/E Code Details, Notes, Chronic Conditions, Restrictions, and Member Program Inform... The main content area is titled 'Evidence' and contains a table with three columns: Type, Description, and Source. The 'Early Intervention' row is highlighted with a red border.

Type	Description	Source
▶ Birth and Death Details	[Redacted]	Person Record
▶ County of Fiscal Responsibility	[Redacted]	Person Record
▶ Early Intervention	Early Intervention Details - Start Date: 2/1/2023 End Date: 12/31/9999	Person Record
▶ Eligibility Details	Medicaid eligibility ending	Person Record
▶ Gender Details	[Redacted]	Person Record
▶ Identifications	[Redacted]	Person Record
▶ MDW Addresses	[Redacted]	Person Record
▶ MDW Phone Numbers	[Redacted]	Person Record

Downloads containing HFW/EI Information

- **Enrolled Members Detail Download File**
- **My Members Download File**
- **Member Summary Report (.pdf)**
- **Enrollment Download File** (added in Release 4.1)
- **CIN Search Download File** (added in Release 4.1)
- **Health Home Assignment File** (added in Release 4.1)

Please review the updated File Specifications Document located here:

https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/mapp/index.htm

(under the heading 'Tracking System Updates and File Formats')