

Policy Title: **Health Home Redesignation**

Policy number: HH0014

Effective Date: January 2019

Last Revised: February 2023; July 2023 - effective date August 1, 2023

Applicability

This policy pertains to Health Homes Serving Adults and Health Homes Serving Children.

Purpose

The New York State Department of Health (Department) is responsible for designation, redesignation, and oversight of Lead Health Homes (HH).

This policy replaces any information previously provided in Medicaid updates and guidance webinars posted on the Department of Health's Health Home website related to this subject matter.

Policy

This policy establishes the three-part process for Health Home redesignation. The Department initiates and facilitates redesignation, which is an audit of the Health Home. The NYS Department of Health (Department) is required to audit Health Homes to ensure their compliance with federal and state statutory, regulatory and policy requirements. This audit consists of a review of the Health Home which is conducted collaboratively by the Department's Office of Health Insurance Programs and AIDS Institute, as well as the Office of Mental Health (OMH), the Office of Alcoholism and Substance Abuse Services (OASAS), and the Office of Children and Family Services (OCFS), Bureau of Child Health Division of Family Health (collectively referred to as the State). Redesignation reviews commenced after each Health Home's initial three-year designation period and have continued based on outcomes from subsequent reviews to ensure that Health Homes across the state remain in compliance. The State reserves the right to modify the process contingent on individual Health Home performance and statewide aggregate data and performance.

NOTE: Information regarding the Redesignation Process and Tools addressed in this policy can be found on the Department's Health Home Performance webpage at: https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/performance/index.htm - under: *Health Home Re-Designation Site Visit Standards and Chart Review Tools*

Redesignation Process

The redesignation process consists of three steps: I. Pre-Review Activities, II. Review Activities and, III. Post-Review Activities.

The Health Home's redesignation score consists of three areas: Domain 1, Administrative Review Management; Domain 2, Performance and Process Measures; and Domain 3, Chart

Review Analysis. The three domains are weighted as follows: Domain 1: 30 percent; Domain 2: 20 percent; and Domain 3: 50 percent.

I. Pre-Review Activities

The primary focus of the pre-review activities includes:

A. Scheduling

The Department will notify the Health Home that a redesignation review will be performed during the upcoming quarter. Health Home reviews will occur within six months prior to or following the expiration of the Health Home's current redesignation period.

B. Entrance Packet

The Department will send entrance packet materials to the Health Home approximately six weeks prior to the review. The Health Home is required to complete and return the following entrance packet materials to the Department **2 weeks prior to the review**:

- Completion of the Domain 1 tab (see below E. *Domain 1: Administrative Review Management*).
- Completion of questions provided by Aids Institute.
- Submission of any performance improvement plans (PIPs) and corrective action plans (CAPs) imposed by the Health Home on contracted care management agencies (CMAs) within the *six months prior* to the redesignation review date.
- Temporary login information for the Health Home's electronic health record (EHR) system for each reviewer identified on the *reviewer list*.
- The name, email address and phone number for one point of contact from each CMA in the Health Home's network submitted to HHRedesignation@health.ny.gov. If the Health Home serves both adults and children, a point of contact is needed for each Health Home Serving Adults and Health Home Serving Children CMA. This information is needed for the CMA survey (see below D: *Care Management Agency (CMA) Survey*)

C. Chart Review Selection

The Department will provide the Health Home a list of Client Identification Numbers (CINs) of member charts selected for the chart review at the time the entrance packet is provided. The Department will provide the CINs separately via the Health Commerce System (HCS).

D. Care Management Agency (CMA) Survey

The Department will send an electronic survey to the CMAs prior to the review. The survey is voluntary and will address the Health Home's quality and oversight of the network. Results of the survey are not incorporated into the Health Home's final score. The Department will share a summary of the results of the survey with the Health Home

during the exit conference (see II: Review Activities)

E. Domain 1: Administrative Review Management

Select portions of Domain 1 are scored as outlined in the redesignation scoring tool. Select questions on Domain 1 require the submission of supporting documentation by the Health Home. The Department will review the submitted supporting documentation and provide feedback to the Health Home during the exit conference process.

F. Domain 2: Performance and Process Measures

The Department will review Domain 2 performance data which includes performance, quality and process measures along with the aggregate score from the Health Home's last redesignation review.

II. Review Activities

A. Entrance Conference

The Department will schedule and hold an Entrance Conference during which it will provide an overview of the redesignation review process.

In addition, the Department will require the Health Home to conduct an EHR Tutorial, in which the Health Home will explain to the Department how the Department can access the Health Home's EHR and locate the required elements necessary for the Department reviewers to complete the chart review tool.

B. AIDS Institute (AI) Breakout Session

On the scheduled date/time, the AI will review with the Health Home Leadership the Performance Measures for AI members and discuss the Health Home's oversight of its HH+ program. In addition, the AI will review responses from the Health Home questionnaire, sent to the Health Home in the entrance packet.

C. Office of Mental Health (OMH) Breakout Session

On the scheduled date/time, OMH will review with Health Home leadership the performance measures for OMH members and discuss the Health Home's oversight of specialty mental health care management agencies (SMH CMA).

D. Domain 3: Chart Review Analysis

Throughout the "Review-Activities" period, reviewers will conduct chart reviews of the records identified in the pre-review activities described above, via access to the Health Home's EHR. Please refer to the redesignation chart review tool.

E. Exit Conference

The Department will schedule and conduct an Exit Conference during which time the Department will review its preliminary findings, chart review trends, CMA survey feedback, and potential areas of concern for each domain. The Department will also explain to the Health Home the third step in the redesignation review process, which is “Post-Review Activities”.

III. Post-Review Activities

The Health Home will receive a completed Redesignation scoring tool via email that summarizes the Department’s findings and the weighted numeric scores calculated for each of the three domains. The numeric scores for each of the domains are then aggregated to determine the total aggregate score. The Department will grant the Health Home redesignation for a duration period corresponding to the total aggregate score. The chart below details the scoring levels’ corresponding redesignation duration.

SCORING LEVEL	REDESIGNATION DURATION
95% and above	HH will receive a 4-year designation
90%-94%	HH will receive a 3-year designation
85%-89%	HH will receive a 2-year designation
80%-84%	HH will receive a 1-year provisional designation*
70%-79%	HH will receive a 6-month provisional designation*
Below 70%	HH will automatically be de-designated

*a maximum of one 1-year provisional designation period will be allowed (one single 1-year provisional period, or two 6-month provisional periods, approved by the Department) to allow a Health Home to reach 85%.

Provisional Redesignation

Any Health Home with a total aggregate score between 70%-79% and 80%-84% will be placed in a provisional redesignation status of either a 6-month or 1-year duration, respectively, as outlined in the above chart. The Department will notify the Health Home in writing of its provisional status and schedule a meeting to ensure that the Health Home being placed in provisional redesignation status understands the scope of their deficiencies and the required corrective actions that must be taken by the Health Home to achieve full redesignation. During the provisional redesignation period, the Department will work closely with the Health Home to ensure that the required changes outlined in the approved Enhanced Oversight Plan (EOP) are made (refer to EOP section below for more detail).

At the end of the provisional redesignation period, the Department will conduct a Provisional Redesignation Review of the areas of concern identified in each of the three Domains as detailed in the EOP. Upon completion of this Provisional Redesignation Review, a total aggregate score will be calculated. The Health Home must receive a total aggregate score of 85%-100% in order to have the provisional redesignation status removed and full redesignation status granted. When the Health Home’s provisional status is removed, it will be granted full

redesignation for the duration corresponding to this total aggregate score, as outlined in the above chart (two, three or four years).

6-month Provisional Redesignation:

Upon conclusion of the Provisional Redesignation Review, if a Health Home which has been under 6-month provisional redesignation status does not achieve a total aggregate score of at least 85%; the Department will examine and evaluate the Health Home's compliance with the EOP, to determine whether there is sufficient basis to grant a second and final 6-month provisional redesignation period. If the Health Home has not sufficiently improved based upon evaluation of compliance with the EOP, the Department will not grant a second 6-month provisional redesignation period., The Department will deny redesignation, and move the Health Home into de-designation status (refer to the **Health Home De-designation** policy HH0015).

If the Department grants a Health Home a second and final 6-month provisional redesignation: at the end of the 6-month period, the Department will again examine and evaluate the Health Home's compliance with the EOP. The Health Home must achieve a total aggregate score of at least 85% in order to be granted redesignation. If the Health Home does not achieve a total aggregate score of at least 85%, the Department will deny redesignation and move the Health Home into de-designation status.

1-year Provisional Redesignation:

Upon conclusion of the Provisional Redesignation Review, if a Health Home in a 1-year provisional redesignation status does not achieve a total aggregate score of at least 85%, the Department will deny redesignation and move the Health Home into de-designation status.

Health Home Request for Reconsideration

Any Health Home may request reconsideration of any of their Domain 3 findings ONLY. The Health Home must submit to the Department a written request for reconsideration of the Domain 3 findings together with all supporting documentation, within **14 calendar days** of receiving its total aggregate score. Upon receipt, the Department will review the Health Home's submission of their request for reconsideration and issue a written determination within **90-calendar days**, either affirming the Department's Domain 3 findings or revoking them with applicable modifications made. This determination will be the Department's **final** decision.

Enhanced Oversight Plans

The Department will require Health Homes with a total aggregate score of 70% and above to complete and submit a written Enhanced Oversight Plan (EOP), for any domain elements marked "Not Met" by the Department, and any chart review findings of less than 90%. The EOP must detail the reason for the deficient finding(s), the remediation plan, and the target completion date for each finding,

The Health Home must complete and submit their EOP to the Department within **four weeks** of receipt of their total aggregate score. **NOTE:** if a Health Home submits a request for Domain 3

reconsideration, the four-week period begins at the time of receipt of Department's final decision. The Department will review the EOP and provide approval or schedule a meeting with the Health Home to further discuss the EOP to make any necessary revisions. Approval of the EOP concludes the review process.

References:

- [Health Home Standards and Requirements for Health Homes, Care Management Agencies, and Managed Care Organizations](#)
- [Requirements and Instructions For Using the Notification of Change Form](#)
See: #2. Corporate Structure Change [closure, merger, separation, governing board])
- Health Home De-designation policy HH0015 – effective August 1, 2023
https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/performance/docs/hh00015_redesignation_policy.pdf

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