



**Department  
of Health**

**Office of  
Health Insurance  
Programs**

# **Children and Youth Evaluation Service (C-YES): the State-designated Independent Entity (IE) for Children's HCBS**

Part I: An overview of the role of C-YES  
during the February 1, 2019 – March 31, 2019  
transition period

Archiving

January 31, 2019

# Purpose of this webinar

- This webinar covers the role of the Independent Entity between February 1, 2019 and March 31 2019.
- A separate webinar will be held to overview the role of the Independent Entity beginning April 1, 2019

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# Basis for an Independent Entity\*

- Today, children are transitioning from the care coordination provided through a 1915c waiver, to Health Home care management
  - This transition began on January 10 and will be completed by March 31
- Health Home care management is an optional benefit, but HCBS requires a Plan of Care (POC) and care coordination
- To permit a current 1915c waiver child to opt out of Health Home care management, but still receive aligned children's HCBS, the State designated an Independent Entity to develop and manage HCBS plans of care

# Who is the Independent Entity?

- Maximus is the State-designated Independent Entity.
- This program is being branded and marketed as “Children and Youth Evaluation Service (C-YES)”
- C-YES can be contacted at 1-833-333-CYES (1-833-333-2937);  
TTY: 1-888-329-1541
- Web site: [nymedicaidchoice.com/information-care-management-agencies](http://nymedicaidchoice.com/information-care-management-agencies)
- C-YES staff are regionally located; call for the location in your region



# Role of C-YES

- For children receiving HCBS who opt out of Health Home care management, C-YES will manage an HCBS plan of care. This may include:
  - Meet with the child/family and acquire signature to the POC
  - Adding new HCBS to the plan of care
  - Making referrals to HCBS providers
  - Updating the plan of care and communicating the plan of care to MMCPs (MMCP will monitor access to care indicated in the plan of care, for children enrolled in a plan)
- C-YES will conduct future HCBS eligibility assessments
- C-YES will only manage HCBS; families with other service needs, including CFTSS, may work with their providers or independently to obtain those services

# Children who may access C-YES

- Children who are referred to C-YES during the transition period (February 1, 2019 – March 31, 2019) must already be enrolled in a HCBS waiver for children and must have opted out of Health Home care management
- C-YES is accepting referrals from HCBS waiver care coordinators through a defined referral process
- Transitioning children must have a current Level of Care

# Level of Care determinations

- **CHANGE:** Transitioning Children need a current Level of Care (LOC) Determination
  - If a child's LOC recertification is due during the transition period, than the current waiver LOC process will continue to be completed
  - If a child's LOC recertification is due on or after April 1, 2019, than the new HCBS/LOC eligibility Determination will be completed during the month the recertification is due
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# Transitioning children's waivers

- Children enrolled in the following 1915(c) HCBS waivers are transitioning to Health Home or C-YES:
  - OMH Serious Emotional Disturbance (SED) waiver #NY.0296
  - DOH Care at Home (CAH) I/II waiver #NY.4125
  - OPWDD Care at Home waiver #40176
  - OCFS Bridges to Health (B2H) SED waiver #NY.0469
  - OCFS Bridges to Health B2H Developmental Disability (DD) waiver #NY.0470
  - OCFS Bridges to Health B2H Medically Fragile waiver #NY.0471



# Making a referral to C-YES

- Only a care management agency can make a referral to C-YES (during the January through March transition period)
- It is the responsibility of the CMAs to send a complete referral package using their secure email protocol to [CYESreferral@maximus.com](mailto:CYESreferral@maximus.com)
- The CMA should organize the documents into one package and send the package as **1 PDF attachment** to C-YES
- A completed C-YES referral packet **MUST** be ***Sent and Accepted by the C-YES***
- If the CMA has to make referrals for multiple children within the same family, the CMA must send **1 email per person** (for example, if a CMA has 4 children to refer to C-YES, the CMA would send 4 separate, secured emails for each child)

# C-YES referral packet elements

- A complete referral packet includes all of the following:
  - C-YES Referral form
  - Health Home Opt-Out form (DOH-5059)
  - Agency consent form to share information with C-YES
  - Current plan of care, with service names cross walked to new service names, and listing all services and providers
  - Historic clinical, treatment, and service information
  - Previous HCBS or Level of Care assessments, which indicate the due date for waiver eligibility re-assessment

# Complete referral packets

- CMAs are expected to send **complete** documents that include the child's demographic information and appropriate signatures. The following data elements should be double checked before sending in a referral:
  - First name, Last name
  - DOB
  - Social Security Number (SSN)
  - Medicaid Client Identification Number (CIN)
  - Gender
  - Address

# Making a referral to C-YES

- The Referral to C-YES form is posted on the C-YES website: [nymedicaidchoice.com/information-care-management-agencies](http://nymedicaidchoice.com/information-care-management-agencies)
- C-YES will communicate back to the CMA either “referral accepted” or “referral declined,” via secure email
- If the referral is declined, the notification will detail the reason (such as missing information)
- The CMA is responsible for the child and their plan of care until C-YES notifies the CMA that the referral has been accepted
- Once the referral has been accepted by C-YES, C-YES is responsible for the child and their plan of care
- Transitioning providers should notify their DOH Liaison whenever a child opts out of Health Home (DOH Liaisons are tracking all transitioning children)

# How children may access C-YES

- C-YES will meet the child in their home or a community setting to perform Plan of Care updates
- C-YES has a statewide presence and secured space in community settings in most counties
- Call 1-833-333-CYES (1-833-333-2937); TTY: 1-888-329-1541 to reach C-YES

# Provider interaction with C-YES

- C-YES is directly contracted with NYS DOH
- Providers do not need to take any action to establish a formal/contractual relationship with C-YES
- All referrals must be made via **secure email**
- C-YES cannot accept incomplete referrals; if an incomplete referral is submitted to C-YES, it will be rejected and returned to the referent (with an explanation)
  - All referrals must include a signed consent form; without a signed consent form, no information about the specific child can be sent to C-YES, under any circumstance
- C-YES may contact the referring CMA with questions

# MMCP interaction with C-YES

- C-YES is directly contracted with NYS DOH
- There is no need for MMCP to contract with C-YES
- MMCP must accept Plans of Care from C-YES
- C-YES will be collecting consents from children and families to share information with an MMCP

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# Expanding the role of C-YES on April 1, 2019

- Though March 31, 2019 – children are referred through the normal pathways to the existing HCBS waivers (including those using family of one budgeting methodology)
- Beginning April 1, 2019, C-YES will accept referrals to assess children who are not Medicaid-enrolled to determine eligibility for the consolidated children's HCBS waiver
  - C-YES will assist children who are determined HCBS-eligible and meet other specific criteria in applying for Medicaid with the LDSS (including those who use family of one budgeting methodology);
- C-YES will continue to be available to develop and manage plans of care for children who opt out of Health Home care management and are not enrolled in a Medicaid Managed Care Plan (MMCP)
- MCTAC will host another webinar detailing this process on **March 18, 2019**





# Contact Information

**Questions/Comments:**

[BH.Transition@health.ny.gov](mailto:BH.Transition@health.ny.gov)