



Department
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Office of
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Developmental Disabilities

State Discussion with Children's Waiver HCBS Providers

June 2021

Purpose

- To have an open dialogue between the State and HCBS Providers to communicate issues and concerns.
- HCBS providers to have the ability to discuss barriers and be a part of the problem-solving discussion.
- The State to have the ability to share upcoming changes, guidance, information, and to obtain feedback directly from the HCBS providers.

Agenda

- Children's HCBS Provider Designation
 - Designation/Re-designation policies
 - Provider Attestation
 - Review of De-designation policy
- HCBS Case Reviews & Training Survey
- Children's Waiver Updates
 - Amendment
 - Waiver Renewal
 - Enhanced FMAP
 - Building HCBS Access System
- IRAMS Q&A
- Future Meetings

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Children's HCBS Provider Designation

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Provider Designation/Re-Designation

- In compliance with the 1915(c) Children's Waiver requirements, NYS will initially verify provider designation status through the web-based online portal system, assuring providers are approved and active before they are authorized to deliver waiver services.
- Provider designation will be reverified at least every three years.
 - Requirement of the Children's Waiver
- Once all requirements have been met - the provider receives a Children's HCBS Designation Letter that indicates approved services by site.
- **The State will be issuing a policy outlining the process and required qualifications for providers interested in being designated for Children's HCBS**

Provider Attestation

- The Children's HCBS Designation Letter includes an attestation the provider agency signs
- The Attestation lays out the compliance requirements, policies, procedures, and standards Children's HCBS providers must adhere to as a condition of their designation
- The Attestation is being updated and will be issued to all current and future designated HCBS providers to meet all new Children's Waiver requirements – July 2021
- The updated Attestation includes:
 - Provider compliance requirements (such as Medicaid enrollment, EVV, and the HCBS Final Rule)
 - Policies and procedures providers must have in place
 - Reporting requirements of Critical Incidents, complaints, and grievances (including notifying the State of access issues)

Provider De-Designation Review

- **Provider-Initiated De-designation:** When an agency has decided to de-designate from a service, site, or county, a formal request must be submitted in writing to the NYS Children's Provider Designation Team: OMH-Childrens-Designation@omh.ny.gov
 - Without notification, the provider will remain on the public-facing designation list
 - A process within the outline [de-designation policy](#) how to transition children/youth currently being served, manage their POC with their care manager, and notify the MMCP
- **State-Initiated HCBS De-designations:** In order to reflect accurate service availability and access, the State monitors service utilization on an on-going basis. As outlined in the designation letter, providers who have not submitted claims for their designated service(s) and have not contacted the Provider Designation team to request de-designation will be de-designated from those services.
 - The State will be running claiming by HCBS providers and will be reaching out to those providers who are not actively providing services for which they were designated
 - De-designation will occur to have accurate reflection of active service providers
 - Re-designation can occur easily when the HCBS provider is ready to provide services

Children's HCBS Case Review & Training Survey

June 2021

HCBS Case Reviews

The Children's Waiver requires annual performance measure/metrics, case review, and fiscal audits. Required annual reporting to the Federal Government of Centers of Medicare and Medicaid (CMS).

- Training, Qualifications, and background check survey will be issued for HCBS providers, Health Homes care management, and C-YES to attest to meeting requirements. This survey attestation is being done to expedite the process. Next year, agencies' Human Resource records will be reviewed to verify requirements and the signed attestation.
- HCBS Case Reviews for Year 2 (April 1, 2020 through March 31, 2021) is starting at end of June 2021
 - Reviews will be at the Health Home/C-YES Level (as they were for Year 1)
 - There will be a fiscal audit of HCBS Providers
- Year 3 Case Reviews (2021-2022) will be at the HCBS Provider level
- **Watch your inbox!** Training survey coming soon end of June and have 2 weeks to respond

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Children's Waiver Updates

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Children's Waiver Amendment Update

Amendment is pending CMS review and would be **effective September 1, 2021**

Amendment includes:

- Respite rate right side/increase – already issued and posted
- Palliative Care rates increased to match qualification required and to be competitive with similar services i.e., hospice
 - Once approved the State will work with other potential providers to become designated for HCBS Children's Waiver
- Merging Caregiver/Family Supports and Services with Community Self-Advocacy Training and Supports as shared in previous discussions with HCBS providers

Children's Waiver Renewal

The HCBS Children's Waiver needs to be renewed with CMS every 5 years

- In 2022, the Children's Waiver needs to be renewed, as the first two years was the previous DOH CAH waiver and the last three years 2019, 2020, and 2021 was the new Children's Waiver.
- Development of the renewal will occur late summer/fall
- NYS DOH asking for thoughts, comments, ideas, and feedback from stakeholders and providers regarding changes and other needs children/youth/families have that should be developed within the waiver

Please share at BH.Transition@health.ny.gov

Enhanced FMAP

The American's Rescue Act allows States to receive additional funding for HCBS and other related services. These funds will increase federal fiscal match for the State to invest additional money in the system

- Each State agency has held listening sessions to solicit feedback and request
- Stakeholders, coalitions, advocacy groups, and providers have submitted request
- The State's Spending Plan is due early July 2021
- Children's Services of HCBS, CFTSS, 29I, and Health Homes will include funding in three-prong approach:
 - Adjustment to Rates
 - Impact to Workforce
 - Infrastructure/Administrative Assistance
- Additionally, HCBS rates are being examined and reviewed to be adjusted and rebased upon new assumptions supported by data and provider information

HCBS Access System

- The State has received requests for information regarding Children's HCBS Provider capacity/ability to accept referrals
- The State has also received feedback that it can be challenging for Providers to report capacity to multiple RPCs (via the current process in some regions)
- Therefore, the State is building a dashboard solution that will replace current RPC reporting and be accessed by all Children's HCBS Providers to report capacity and waitlist
- It is difficult to determine where and how capacity is needs to be built without this information

IRAMS

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IRAMS Overview

- HCBS providers are required to report **critical incidents** as outlined in the Children's Waiver and HCBS provider policy, effective April 1, 2021.
 - [HCBS Provider Reportable Incidents Policies and Procedures #CW0004](#)
- HCBS providers need to report **complaints and grievances** as outlined in the Children's Waiver and issued policies, effective April 1, 2021.
 - [Complaint and Grievance Policy HCBS Providers #CW0008](#)
- Webinars for IRAMS were held on March 31st and are available on the NYSDOH website – [for HH/CMAs](#) and for [HCBS Providers/C-YES](#)

IRAMS Q&A

Questions and requests for technical assistance regarding IRAMS can be sent to the **Email Health Homes webform**:

<https://apps.health.ny.gov/pubpal/builder/email-health-homes> **Select: IRAMS**

Questions only- No PHI

Future Meetings & Contact Information

June 2021

Future Agenda

Please submit your agenda requests, suggestions, or questions to BH.Transition@health.ny.gov

July and August meetings will be canceled due summer schedules

Meeting will continue monthly starting in September – please let the State know if a different cadence works better

September meeting agenda items needed

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All Children's Waiver HCBS questions and concerns, should be directed to the NYS Department of Health at BH.Transition@health.ny.gov mailbox or 518.473.5569

Questions regarding the HCBS Settings Final Rule can be directed to ChildrensWaiverHCBSFinalRule@health.ny.gov



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APPENDIX



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Upcoming HCBS Children’s Waiver Webinars

HCBS Overview

 Understanding Medicaid


 **Health Home Care Management Basics**

 **HCBS Provider Requirements for Designation**


 Medicaid and the Children’s Waiver

LOC/ Eligibility Determination

 **CANS-NY/ Eligibility Assessment**

 NODs, Fair Hearing, Critical Incident Reporting, Grievances and Complaints

 **C-YES – the Role of the Independent Entity**

 LCED for Children’s Waiver Participants

Waiver Enrollment

 **Capacity Management**


 Participant Rights and Protections

 Conflict Free Care Management

POC Development/ Referral

 Plan of Care/Person-Centered Planning Requirements


Service Delivery and Definitions


 **HCBS POC Workflow and MMCP Authorization**

Waiver Operations

 IRAMS User Intro for HHCM

 IRAMS User Intro for HCBS Providers

 **Modifications (E/V) and Assistive Technology Updated Process for HHCM/C-YES**

 **Modifications (E/V) and Assistive Technology Updated Process for LDSS**

Maintaining Waiver Enrollment / Service Delivery

 **Care Management Requirements for HCBS**

Service Delivery Requirements

Required for only Health Home Care Managers


Required for only HCBS Providers

Required for Both

Optional for Both

Transfer / Disenroll

 Waiver Disenrollment

 **Transferring to Adult Services (aging out) or OPWDD waiver**

To see **both** the recordings and PDFs of the completed webinars, refer to this link: https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/care_management.htm

Policies for Children's HCBS Providers

Policy Title	Link	Posted Date	Effective Date	Applicable to Health Homes	Applicable to HCBS Providers
Children's HCBS Plan of Care (POC) Workflow Policy	Link	9/1/2019	10/1/2019	Yes	Yes
HH POC Policy (<i>Note: includes a section specific to Children's Waiver</i>)	Link	7/30/2019	10/1/2019	Yes	No
Conflict Free Care Management (CFCM) Policy	Link	Revised 5/1/2020	2/1/2020	Yes	No
HH Reportable Incidents Policies and Procedures (<i>Note: section specific to Children's Waiver</i>)	Link	Revised 10/7/2019	7/14/2017	Yes	No
Children's HCBS Plan of Care (POC) Workflow Policy	Link	9/1/2019	10/1/2019	Yes	Yes
HH POC Policy (<i>Note: includes a section specific to Children's Waiver</i>)	Link	7/30/2019	10/1/2019	Yes	No
Conflict Free Care Management (CFCM) Policy	Link	Revised 5/1/2020	2/1/2020	Yes	No
HH Reportable Incidents Policies and Procedures (<i>Note: section specific to Children's Waiver</i>)	Link	Revised 10/7/2019	7/14/2017	Yes	No
HCBS Provider Incident Reporting Policy	Link	12/31/2020	4/1/2021	No	Yes
HHSC Grievances and Complaints Policy	Link	2/9/2021	4/1/2021	Yes	No
HCBS Provider Grievances and Complaints Policy	Link	2/9/2021	4/1/2021	No	Yes
HH Background Check Requirements	Link	4/1/2018	4/1/2018	Yes	No
HCBS Provider Background Check Policy	Link	12/31/2020	4/1/2021	No	Yes
HCBS Documentation Policy		TBD		Yes	Yes
HCBS Provider Designation and Re-designation Policy		TBD		No	Yes
HCBS Provider De-designation Policy	Link	9/1/2020	9/1/2020	No	Yes
Children's HCBS Enrollment Policy	Link	1/26/2021	4/1/2021	Yes	Yes
Children's HCBS Disenrollment Policy	Link	1/26/2021	4/1/2021	Yes	Yes
HCBS Notice of Decision Policy		TBD		Yes	Yes
HHSC Transitional Age Youth Policy		TBD		Yes	No
HCBS Provider Transitional Age Youth Policy		TBD		No	Yes
Health Home/C-YES Transfer Policy	Link	2/1/2021	2/1/2021	Yes	No

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Reporting Issues to DOH

- Per recent guidance: [HCBS Provider Directive to Continue Services to Participants and Seek DOH Assistance](#), providers should notify DOH of any issues causing disruption to service delivery
- Notification to the State must occur *prior* to disenrolling a child/youth from HCBS due to any administrative, billing, or care coordination issues
- HCBS providers experiencing administrative, billing, or care coordination issues must work to resolve those issues with the MMCP, Health Homes, care management agencies, C-YES, and/or the State to ensure they are not causing a disruption of services
- Providers can seek assistance in resolving FFS billing and claims issues by calling eMedNY at 1-800-343-9000
- Providers can contact MMCPs directly to resolve issues. MMCP contacts can be found using the MCTAC MMCP Contact Matrix, located here: <https://matrix.ctacny.org/>
- If providers are unable to resolve issues, they should contact the State [_BH.Transition@health.ny.gov](mailto:BH.Transition@health.ny.gov)

