



**Department
of Health**

**Medicaid
Redesign Team**

MAPP HHTS

Release 2.2 Updates

September 19, 2017



Agenda

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Timing of Release

Release 2.2 is scheduled for October 1, 2017

- The system will be updated with Release 2.2 changes during the regular system blackout period between 2 am and 6 am on the morning of October 1st 2017
- A notification will be sent to all MAPP HHTS users if there is any delay in this release



Outreach Changes effective 10/1/2017

- For outreach segments with a begin date on/after October 1, 2017, the system will:
 - End date the outreach segment with the end date of the second consecutive month.
 - Provide the user with an error message if the outreach segment exceeds two months.
 - No longer create **outreach hiatus segments**.
- Users can still enter their own outreach segment end date as long as they provide an end date reason and answer the “End HH assignment” question.



Outreach Changes effective 10/1/2017

- All **existing outreach hiatus segments** in the system will end after the outreach hiatus segment end date has passed. The system will **NOT** create subsequent Health Home and CMA assignments after the outreach hiatus segments end.
- MAPP HHTS will no longer create **outreach hiatus segments** for newly entered segments.



Outreach Changes effective 10/1/2017

- The system will require the provider to answer the “End HH Assignment” question for outreach segments with a begin date on/after October 1, 2017 and:
 - will use the response to the “End HH Assignment” question to determine whether or not to create an assignment for the member after the outreach segment ends
 - will not create a HH assignment if the response to the “End HH Assignment” is “Yes”
 - will create a HH assignment if the response to the “End HH Assignment” is “No”



Outreach Changes effective 10/1/2017

For Outreach segments submitted to the system on/after 10/1/17 with a segment **begin date prior to** October 1, 2017 and **no segment end date**, the system will:

- Calculate the appropriate end date.
- Set the response to the “End HH Assignment” question to “Yes” (as long as the end date is not modified). For example: an outreach segment with a begin date of August 1, 2017 and no end date is entered into MAPP HHTS on October 4, 2017. Assuming the member does not have any active outreach months within the past six months, the system will set the outreach segment end date to October 31, 2017. At end of the segment end date (10/31/17), the system will:
 - Mark the segment as Active to Closed
 - Set the “End HH Assignment” to “Yes”. As a result, the member will not appear on the Health Home Assignment file.



Outreach Changes effective 10/1/2017

For Outreach segments submitted to the system on/after 10/1/17 with a **segment begin date prior to October 1, 2017** and a **user entered segment end date**, the system will:

- Check the user entered segment end date and provide the user with an error if the outreach months exceed the three months of active outreach in six months limit (in effect prior to October 1, 2017)
- **NOT** create the subsequent outreach hiatus segment
- Use the provider's response to the "End HH Assignment" question to determine if the system should create a new HH assignment



Outreach Scenario #1

Scenario: HH A uploads an outreach segment to MAPP HHTS for Member A with a begin date of Oct 1, 2017 and no end date. Member is contacted in the first month but not in the second month.

Guidance: HH A should end date the outreach segment in MAPP HHTS as of October 31, 2017.



Outreach Scenario #2

Scenario: Member B is enrolled in Plan B and had an outreach segment with HH B/CMA B from November 1, 2017 to December 31, 2017; face to face was provided in Dec. 2017 but the outreach efforts did not result in HH enrollment. HH B did not end the HH assignment so member B remains assigned to HH B. Plan B provides HH B with actionable information in February 2018 that the member is in the hospital and notifies HH B; can HH B create another outreach segment in February 2018?

Guidance: Since HH B has actionable information, HH B may create an outreach segment for the February 1, 2018 to March 31, 2018 period. If a face to face is not provided in March the outreach segment should be ended on February 28, 2018. Should the member consent to enroll the outreach segment should be ended and an enrollment segment created with the appropriate begin date.



Outreach Scenario #3

Scenario: Member C is enrolled in Plan C and had an outreach segment with HH C/CMA C from November 1, 2017 to December 31, 2017; face to face was provided in Dec. 2017 but the outreach efforts did not result in HH enrollment. HH C ended the HH assignment in MAPP HHTS. What should the plan do with Member C's assignment?

Guidance: Plan C should pend the member's assignment in MAPP HHTS until such time that there is actionable information for Member C.



Outreach Scenario #4

Scenario: Member C is enrolled in Plan C and had an outreach segment with HH C/CMA C from November 1, 2017 to December 31, 2017; face to face was provided in Dec. 2017 but the outreach efforts did not result in HH enrollment. HH C ended the HH assignment in MAPP HHTS. Plan C pends the member's assignment in MAPP HHTS in January 2018. Plan C receives actionable information in February 2018 and assigns Member C to HH D in February 2018. Can HH D perform outreach to member C in February 2018?

Guidance: Since HH D was provided actionable information, HH D may create an outreach segment for the February 1, 2018 to March 31, 2018 period. If a face to face is not provided in March the outreach segment should be ended on February 28, 2018. Should the member consent to enroll the outreach segment should be ended and an enrollment segment created with the appropriate begin date.



Outreach Scenario #5

Scenario: In December 2017, HH D receives an actionable community referral for Member D. HH D looks up the member in MAPP HHTS and sees that the member had an outreach segment for the August 2017 to October 2017 period. Can HH D perform outreach in December 2017?

Guidance: Since HH D was provided actionable information, HH D may create an outreach segment for the December 1, 2017 to January 31, 2018 period. If a face to face is not provided in January the outreach segment should be ended on December 31, 2017. Should the member consent to enroll the outreach segment should be ended and an enrollment segment created with the appropriate begin date.



File Download Naming Convention Changes

File names of files downloaded from the system on/after October 1, 2017 will:

- Include the file name acronym, file id, the provider MMIS provider ID and the date and time (in military time) of the file download
- For the Billing Support Download file, the file name will include the filter criteria and the corresponding dates – **SD** for Service Date and **LT** for Last Transaction Date



Acronyms Used in the File Download Naming Convention

Acronym Used in File Naming Convention	MAPP HHTS File Download
A	Acuity Download
MMD	My Members Download
BSD	Billing Support Download
PND	Partner Network Download
BSE	Billing Support Error
PNE	Partner Network Error
CSD	CIN Search Download
PAD	Past Assignments Download
ED	Enrollment Download
EFA	Error Report: MCP Final HH Assignment
TFE	Tracking File Error
MAD	Manage Assignments Download
CRD	Child Referral Download
CF	Consent File
MAF	MCP Assignment File Download
HAF	H Assignment File Download



Examples of the Names of File Downloads

- CMA 01234567 downloads the Enrollment Download file with file ID 10000027 on 10/5/17 at 4:52 p.m. The name of the file download is ED_10000027_01234567_10052017_1652
- HH 07654321 downloads a Billing Support Download file with file ID 10000030 on 10/5/2017 at 4:52 p.m. filtered to service dates between 1/1/16 to 3/31/16. The name of the file download is BSD_10000030_07654321_SD_010116-033116_10052017_1652.
- HH 07654321 downloads a Billing Support Download file with file ID 10000031 on 10/5/2017 at 4:52 p.m. filtered to last transaction dates between 1/1/16 to 3/31/16. The name of the file download is BSD_10000031_07654321_LT_010116-033116_10052017_1652.



Children's HH Referral Portal Updates

The Children's HH Referral Portal has been updated to:

- Display the member's MCP on the Referral summary screen
- Allow MCPs to refer members to the HH program that are not enrolled in their plan.
- Display error messages on the screen where data is requested instead of at the end of the process which results in the user having to reenter the information (applies to creation of a segment)
- Reflect corrected/more precise error messages associated with the Children's HH Referral Portal.



Children's HH Referral Portal Error Messages

- When all the check boxes are left blank on the chronic conditions screen in the Children's HH Referral Portal, the user will now receive the following two error messages:
 - "You have not provided required information regarding the child's chronic conditions. If the individual does not have chronic conditions, the individual may not be eligible for Health Home care management. Please refer to the DOH website (http://www.health.ny.gov/health_care/medicaid//program/medicaid_health_homes/health_homes_and_children.htm)
 - "You did not indicate that the individual is appropriate for the Health Home program. If the individual does not meet the appropriateness criteria, the individual may not be eligible for Health Home care management. Please refer to the DOH website (http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/health_homes_and_children.htm) to contact your local Health Home for additional information."



Billing Support Download (BSD) Corrections

- The system will now populate the 'Insert Date' on the BSD file with the date that the billing instance was first created (original segment creation date). Prior to this correction, the system was incorrectly populating the 'Insert Date' with the segment update date whenever the segment was modified in the system.
- The system will now use the appropriate 'Last Transaction Date' when applying the 'Last Transaction Date' filter on the BSD file search criteria. Prior to this correction, the system was using the last transaction date of the superseded segment that the system created "behind the scenes" when a segment was modified in the system.



Other Release 2.2 Updates

The system will have added logic which takes into account a member's principal provider codes. Upon release of 2.2, the system will not create potential billing instances for members that have an active principal provider code of NH as of the member's Health Home service date. With the exception of Adult Home class members, the system will not create potential billing instances for members that have an active principal provider code of AL as of the member's Health Home service date. Additionally, the system:

- Will provide the user with the "Invalid RE Code found" error message if the Billing Instance Upload file included service dates when the member had an active principal provider code and did not create a billing instance in the system.
- Will not allow the creation of a segment with a begin date that falls between the NH begin date and end date (User will see "The member's RE Code "NH is not compatible with the Health Home Program" error message on screen and "Invalid RE Code found" on segment file upload)



Other Release 2.2 Updates

- The system will populate new fields on a subset of MAPP HHTS file downloads. The new fields are highlighted in red on the linked [MAPP HHTS File Formats Version 3.0 spreadsheet](#).
- MCP, HH and CMA Read Only roles have access to the Upload Screen to view files uploaded by users within their same organization.
- Provide the user with an error message if a segment is uploaded to MAPP HHTS and the member's MCP is not in MAPP HHTS.



Other Release 2.2 Updates

- The CIN Search Results will now reflect the member's Managed Care Plan whether or not the member is known to the Health Home Tracking System. Previously, if the member was not known to the HHTS, the member's current plan did not display on the CIN Search Results. Users would have to open the Member CIN Search Report to see the member's current plan.
- The recent care management activity section on the Member CIN Search Report has been updated to claims with the new Health Home rate codes as well as other care management rate codes such as OPWDD Medicaid Service Coordination, CMCM (Comprehensive Medicaid Case Management) Early Intervention Services and NFP Targeted Case Management.



Webinar Q & A

Question #1: Member C has an outreach segment for the September 2017 to November 2017 period. Does the face to face requirement apply to the October 2017 outreach month?

Answer #1: In this example, the face to face requirement does not apply to the both the October 2017 and November 2017 outreach month because the outreach segment began prior to October 1, 2017.



Webinar Q & A

Question #2: Does the two months of outreach limit apply to community referrals, not just DOH assignments?

Answer #2: The two months of outreach limit applies to all Health Home members regardless of how they entered the Health Home program (community referrals, DOH assigned or MCP assigned).

Question #3: If a member is enrolled and after two months of no contact and is placed in Outreach, how many months of Outreach will be allowed?

Answer #3: The two months of outreach within twelve months per member limitation (post October 1, 2017) applies to all Health Home members. There will be policy guidance issued on how to report enrolled members that are lost to services.



Additional Information

- This PowerPoint went through the major changes in Release 2.2. Should you have questions about what additional changes are in Release 2.2. please refer to the [Complete List of MAPP HHTS System Issues](#) located on the Health Home Tracking System Section of the MAPP portion of the HH website. Upon opening list of the system issues, filter column H to Release 2.2.
- For MAPP HHTS issues or suggestions for future MAPP HHTS webinar topics, contact: MAPP Customer Care (518) 649-4335 or email MAPP-CustomerCareCenter@cma.com
- For HH policy questions, contact the DOH Health Home Provider Line (518) 473-5569 or submit an email using the HH email web form: https://apps.health.ny.gov/pubdoh/health_care/medicaid/program/medicaid_health_homes/emailHealthHome.action
- Please contact the DOH Health Home Provider Line (518) 473-5569 to set up provider time to address MAPP HHTS navigation issues/concerns.