

## **Release 3.2 Updates**

- Release 3.2 is scheduled to be deployed on November 15<sup>th</sup> 2019.
- A draft schedule of 2019 Releases can be found:  
[https://www.health.ny.gov/health\\_care/medicaid/program/medicaid\\_health\\_homes/mapp/docs/mapp\\_hhts\\_release\\_sched.pdf](https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/mapp/docs/mapp_hhts_release_sched.pdf)

## **Release 3.2 Changes**

1. Changes to how limited HML responses are displayed on the BSD file.
  - a. Currently, when a limited HML is responded to the BSD file only displays the responses to the questions the provider uploaded. With this system change, the other responses to non-required questions will be brought forward from month 1 and displayed on the download for the limited HML months.
2. The chronic conditions/pre-conditions of the member will be required for all HML responses, both full and limited, for all DOS.
3. Changes to Opt-out
  - a. Add logic to automatically end an opt-out based on opt out reason codes.
4. Modify Assignment Purge logic
  - a. Members will be purged after 3 months of inactivity for both adults and children.
  - b. Exclude members that have pended MCP assignments based on pend reason code.
5. Add additional values to engagement-optimization plan
6. Add logic surrounding Plan of Care dates
  - a. Prevent billing after 60 days of enrollment if there is no plan of care date (although this logic will be added to the system, it will be turned on at a later date, giving providers time to upload POC for previously entered segments)
7. Display additional RE codes on screen and in files
8. Add an addition field to MCP final assignment file and HH/CMA assignment file to allow the MCP to indicate why they have found the member HH eligible