

State Discussion with Children's Waiver HCBS Providers

June 26, 2024

Purpose

- For the Department of Health (DOH) to share updates, guidance, and policy changes, and obtain feedback from Home and Community Based Services (HCBS) providers.
- Provide an opportunity for HCBS providers to discuss barriers and be a part of the problem-solving discussion.
- Have an open dialogue to communicate issues and concerns.

Agenda

- ✓ Documentation Policy Update
- ✓HCBS 4% Cost of Living Adjustment (COLA) Increase
- ✓HCBS Non-Risk Payments Moving to Capitation
- ✓ Summer Programming for HCBS
- ✓ Palliative Care Guidance
- ✓Incident Reporting and Management System (IRAMS) & Submitting Staff Qualification Information
- ✓HCBS Electronic Referral/Authorization Portal

Documentation Policy Update

Documentation Policy

DOH will be releasing the HCBS Documentation Policy shortly, which will outline the HCBS provider's documentation requirements. Contents of the policy have been drafted and updated based on completed HCBS Case Reviews and feedback from providers.

The HCBS Documentation Policy includes clarifications on documentation expectations and will not include a substantial amount of new information.

Newly established requirements (i.e., definitive due dates for Service Note completion, etc.) will be effective 60 days from issuance of the policy to give an opportunity for HCBS Providers to update their policies and train staff. Upon release of the policy, **DOH will host a webinar** to discuss the contents of the Documentation Policy. This meeting will be recorded so that providers can share this information with staff.

Information about this webinar will be released from the Children's HCBS Distribution List. Request to join the Distribution List here: <u>BH.Transition@health.ny.gov</u>

HCBS 4% COLA Increase

HCBS COLA – 4% Rate Increase

DOH has received approval from CMS and the NYS Department of Budget to **implement a 4% Cost of Living** Adjustment (COLA) increase for Children's HCBS rates retroactive to November 1, 2023.

Children's HCBS Providers will receive retroactive adjustments on Fee-for-Service (FFS) Medicaid claims already submitted/paid with dates of service on or after November 1, 2023. MMCPs must configure their systems with the updated rates and issue retroactive payment adjustments to HCBS providers for dates of service on or after November 1, 2023; no later than 90 days from the notice circulated on May 28, 2024.

| Rate Increase | Waiver Approval Process | Link to Rate Notification |
|---|---|---|
| Children's Home and Community Based Services (HCBS) Cost of Living Adjustment (COLA) | This adjustment was part of the 23-24 NYS Budget. Waivers cannot be retroactive similar to State Plan Amendment therefore, CMS approval was needed. Moving forward, language has been added to the Waiver that separate CMS approval will not be needed for approved State budget items. | <u>2024-05-24_hcbs_rate_inc.pdf</u> (ny.gov) |

HCBS Non-Risk Payments Moving to Capitation

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HCBS Non-Risk Payments Moving to Capitation

DOH recently <u>announced</u> that Children's HCBS is planned to go into capitation on **October 1**, 2024.

Since October 1, 2019 (the date Children's HCBS were included in the Medicaid Managed Care benefit package), MMCPs have received non-risk payments for Children's HCBS outside of the capitation rate. MMCPs will continue to be reimbursed via nonrisk payments for Children's HCBS and MMCPs should continue to submit claims for Children's HCBS with dates of service on or before September 30, 2024, to eMedNY via the established process.

Effective **October 1, 2024**, capitation rates will be adjusted to include Children's HCBS, excluding Environmental/Vehicle Modifications and Assistive/Adaptive Technology, which will be carved out on July 1, 2024. MMCPs are required to pay, at minimum, government rates for Children's HCBS.

Further information on adjustments to capitation rates will be provided.

Questions related to this notification can be sent to <u>BH.Transition@health.ny.</u> <u>gov</u>.

Summer Programming for HCBS

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Summer Programming for HCBS

DOH has encouraged HCBS providers to **connect with Care Managers and MMCPs** if they have concerns about a participant needing additional supports during summer months.

Out of State Services

Only providers **located in New York State** are eligible to become designated HCBS providers. Children/youth must be enrolled in New York State Medicaid to receive Children's HCBS, and the **services must be provided in the state in which the Medicaid recipient is enrolled in Medicaid**. As such, while an individual HCBS staff member may reside in a neighboring state, the HCBS must be provided in New York State by an HCBS provider that is located in and designated in New York State.

For more information, visit the HCBS Provider Manual

Additional Service Reminders

Provider designation occurs by service, site, and county location; **providers can request additional designation** for services **and/or location**. HCBS providers are expected to serve members in the counties **where they are designated**.

Designation for certain time periods (i.e., summer months only) is **not permissible**.

Provision of HCBS via **telehealth is not permissible**. HCBS are ancillary services, and not the only supports available. Families should be connected to other supports as needed/appropriate (CFTSS, CDPAS, etc.)

Any summer programming and/or service needed for the member should be determined by the member/family and their care manager, not the HCBS provider.

Palliative Care Guidance

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Palliative Care Guidance

Prior authorization is NOT required for HCBS Palliative Care

(language currently in the <u>HCBS Manual</u> is being updated to clarify this expectation)

The NYS DOH Children's team has been working diligently to obtain Palliative Care Providers and to build capacity. The HCBS Manual indicates Prior Authorization is needed, which is not consistent with the Children's Waiver, as **NO HCBS need prior authorization**. This is causing issues with Palliative Care providers.

Palliative Care Limits:

Expressive Therapy: 4 appointments/month or 48 units/calendar year.

Massage Therapy:

12 appointments/month or 72 units/calendar year.

Counseling & Support:

10 units/month or 120 units/calendar year.

Clarifications:

The Initial Service Period does apply to Palliative Care services.

HCBS Palliative Care Providers must be diligent to ensure the 1st appt. date is shared with the MMCP.

Submission of an **Authorization Form** and/or **Letter of Medical Necessity** <u>prior</u> to any Palliative Care Service delivery is <u>NOT</u> required or appropriate.

*Initial Service units count towards the annual soft limit, and all authorization and supporting documentation processes need to be followed if more than the Initial Service Period will be utilized.

When submitting Authorization Forms for Palliative Care Services, MMCPs would like information on units provided during the initial service period.

IRAMS & Submitting Staff Qualification Information

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IRAMS & Submitting Staff Qualification Information

DOH will outreach to providers who have staff that are out of compliance with training and background check requirements. Staff without the proper background checks, as required, **CANNOT SERVE CHILDREN**.

HCBS providers were required to submit their HCBS Staff Qualification Information into IRAMS by June 14, 2024. All staff who provided services and/or supervised staff providing services during the 2023-2024 Waiver year should have been submitted into IRAMS.

DOH released an announcement May 2024 providing additional detail about this requirement.

Additional Resources: Staff Compliance Tracker (PDF), (<u>Recording – YouTube</u>); IRAMS Staff Qualification Webinar Q&A on June 28, 2023 (<u>Web</u>), (<u>PDF</u>)

IRAMS & Submitting Staff Qualification Information

Both HHCM/C-YES and HCBS providers must provide information applicable to their provider type which may include, but is not limited to, dates of completion for the following requirements:

| Clinical Health Record Check (CHRC) Criminal Background Check | Mandated Reporting Training | Suicide Prevention Training |
|---|---|---|
| Statewide Central Register (SCR) Eligibility Verification | Personal Safety/Safety in the Community Training | Domestic Violence Signs & Basic Interventions Training |
| Staff Exclusion List (SEL) Check | Trauma-Informed Care Training | Strength-Based Approaches Training |

For more information, please visit the <u>HCBS Provider Manual</u>

HCBS Electronic Referral/Authorization Portal

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HCBS Referral & Authorization Portal Implementation

The HCBS Referral and Authorization Portal has been developed within the Incident Reporting and Management System known as IRAMS. The Referral and Authorization Portal was developed to:

- Streamline the HCBS referral and authorization process,
- Provide up to date information, status of referrals, and services,
- Track service delivery, and
- Track potential waitlist

Overview webinars for Health Homes, Care Managers, and HCBS Providers were held on 5/29/24 and 6/3/24 regarding the implementation of the HCBS Referral Portal.

With the launch of the Portal on **June 17, 2024**, all new HCBS referrals on or after June 17, 2024, must be submitted and managed electronically through the Referral Portal. An updated **HCBS Referral and Authorization Portal User Guide and FAQ** will be provided detailing how HHCM/C-YES, HHs, and HCBS providers navigate the system.

HCBS Referral & Authorization Portal Next Steps

In response to stakeholder and provider feedback, the development and implementation of the Referral and Authorization Portal has been broken up into four phases:

1. New referrals for HCBS members – Launched June 17, 2024

Children/youth who are not currently receiving services, even if they have been previously referred to HCBS Providers, must be referred through the Referral Portal with a new referral.

2. Referrals for members currently receiving services:

Current members receiving HCBS must be entered into the Referral and Authorization Portal. A short, streamlined confirmation referral is being developed to be launched by the end of July. Care managers and HCBS providers will work together to confirm children/youth already enrolled and receiving services.

3. Authorization Process:

The Authorization Form will be integrated into the Referral and Authorization Portal by late summer/fall. HCBS providers will document their service authorization request and then enter the MMCP response.

4. MMCP Access to the Referral and Authorization Portal:

MMCP will obtain access to the Portal to view member's complete referral, authorization, and those waiting for services. Other integration with MMCP's systems needs further discussion.

HCBS Referral and Authorization Portal

 What questions and/or feedback do you have for DOH regarding the HCBS Referral and Authorization Portal?



- HCBS Referral and Authorization Portal User Guide (ny.gov) – to be released shortly
- HCBS Referral and Authorization Portal FAQ (ny.gov) – to be released shortly
- HCBS Referral and Authorization Portal Overview Webinar Slides (ny.gov)
- For additional questions on the HCBS Referral and Authorization Portal, please reach out to <u>Health Homes</u> with a subject line of "IRAMS Questions only- No PHI"

Future Meetings & Contact Information

Future Meetings & Contact Information

- Next Scheduled Monthly Meetings:
 - July 17th, 2024, from 1:00 PM 2:30 PM
 - Registration Link:
 - <u>https://meetny.webex.com/weblink/register/rec597de9253eadc7de2de487a182092e</u>
 - August 21st, 2024, from 1:00 PM 2:30 PM
 - Registration Link:
 - https://meetny.webex.com/weblink/register/ree8f48e3d741f4ce7328e9cc74385234
 - September 18th, 2024, from 1:00 PM 2:30 PM
 - Registration Link:
 - <u>https://meetny.webex.com/weblink/register/rb818e19e2da8930a3d5aff99c5657786</u>
- DOH would like to discuss topics of interest to the HCBS providers and hear suggestions and ideas for improvement.
- Please submit your agenda requests, suggestions, or questions to <u>BH.Transition@health.ny.gov</u>.

All Children's Waiver HCBS questions and concerns, should be directed to the NYS Department of Health at <u>BH.Transition@health.ny.gov</u> mailbox or (518) 473-5569.

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

New York State Department of Health Managed Care Complaint Line 1-800-206-8125 or <u>managedcarecomplaint@health.ny.gov</u>.

