

## Guide to Edits Included in the New York Medicaid Program 29-I Health Facility Licensing Guidance- Version December 2023

Update Made	Updated Text	Location
Refreshed Hyper link	Managed Care Organization (MCO) Directory by Plan (ny.gov)	Pg. 4
<b>Updated</b> HCB Service Names for alignment	Caregiver Family Support Services,	p. 23
with current HCBS Manual	Community Self-advocacy Training and Support	
	Caregiver/Family Advocacy and Support Services	
	Palliative Care: Bereavement	
	Palliative Care: Counseling and Support Services	
Updated allowable practitioner type	Creative arts <del>counselor</del> therapist	Pg. 28
Revised list of children Excluded from	Youth placed in the care and custody of the Office of Children and	Pg. 54
Medicaid Managed Care	Family Services (except those on aftercare or "Trial Discharge" status)	
	Persons in receipt of Medicaid/Medicare (Often referred to as dual	
	eligible)	
	<ul> <li>Individuals with access to comprehensive private health insurance,</li> </ul>	
	Third Party Health Insurance (TPHI)	
	Residents of state operated psychiatric facilities	
	Residents of state certified or voluntary operated treatment	
	facilities for children (often referred to as residential treatment	
	<del>facilities)</del>	
	Medicaid eligible infants living with incarcerated mothers in state	
	or local correctional facilities	



- Individuals who are expected to be MA eligible for less than six months (except pregnant women)
- Blind or disabled children living separate from their parents for 30 days or more
- Permanent residents, under age 21, of residential health care facilities and temporary residents of RHCFs at the time of enrollment
- Adolescents admitted to Residential Rehabilitation Services for Youth
- Individuals receiving hospice services at time of enrollment
- Spend-down medically needy
- Individuals receiving family planning services only
- Individuals receiving assistance through an assisted living program
- District 97, fiscal responsibility of NYS OMH
- District 98, fiscal responsibility of NYS OPWDD
  - Persons in receipt of Medicaid/Medicare are excluded from MMC but can enroll in an Integrated Benefits for Dually Eligible Enrollees Program (IB-Dual) or Managed Long Term Care (MLTC). Individual is excluded from MMC and Health and Recovery Plan (HARP) unless enrolled in a qualified Managed Care Organization's D-SNP product; as long as consumer does not opt out of the D-SNP, they can remain enrolled in MMC/HARP.
  - Individuals enrolled in comprehensive private health insurance, Third-Party Health Insurance (TPHI)
  - Residents of state-operated psychiatric facilities
  - Residents of state-certified or voluntary-operated treatment facilities for children (often referred to as residential treatment facilities)



- Residents of Office of Mental Health (OMH) State Operated Psychiatric Center Community Residences or Family Care Homes
- Medicaid eligible infants living with incarcerated mothers in state or local correctional facilities
- Individuals who are expected to be Medicaid (MA) eligible for less than six months (except pregnant women)
- Blind or disabled children living separate from their parents for 30 days or more.
- Long term care residents, under age 21, of residential health care facilities (RHCF)s and temporary residents of RHCF's at the time of enrollment
- Adolescents admitted to Residential Rehabilitation Services for Youth (RRSY)
- Individuals receiving hospice services at time of enrollment
- Spend-down medically needy
- District 97, fiscal responsibility of New York State (NYS)
   OMH
- District 98, fiscal responsibility of NYS Office for People with Developmental Disabilities (OPWDD)
- Individuals under 65 years of age, who have been determined eligible by the Medicaid Cancer Treatment Program: Breast, Cervical, Colorectal, Prostate Cancer; Medicaid eligibility through District 99
- Individuals receiving assistance through an Assisted Living Program (ALP)



Revised list of Children Exempt from	<ul> <li>Residents of intermediate care facilities for the developmentally</li> </ul>	Pg. 55
Medicaid Managed Care	disabled	
	<ul> <li>Developmentally or physically disabled individuals receiving</li> </ul>	
	services through a Home and Community-Based Services (HCBS)	
	WaiverAn individual who has a developmental disability, is eligible for	
	an ICF/DD level of care and has chosen OPWDD HCBS 1915(c) waiver	
	services over institutional care.	
	<ul> <li>Individuals who are eligible to receive program services through</li> </ul>	
	OPWDDOPWDD-waivered services	
	<ul> <li>Individuals with chronic medical conditions being treated by a</li> </ul>	
	specialist not participating in any MA managed care plan in the	
	service area (exemption limited to six months)	
	<ul> <li>Residents of Chemical Dependence Long Term Residential Program</li> </ul>	
	Native Americans	
	<ul> <li>Nursing Home Transition and Diversion Medicaid waiver (NHTD)</li> </ul>	
	<ul> <li>Traumatic Brain Injury waiver (TBI)</li> </ul>	
	<ul> <li>Residents of Intermediate Care Facilities (ICF) for the</li> </ul>	
	developmentally disabled	
	<ul> <li>An individual who has a developmental disability, is eligible</li> </ul>	
	for an Intermediate Care Facility/Developmental Disability	
	(ICF/DD) level of care and has chosen OPWDD HCBS 1915(c)	
	waiver services over institutional care	
	<ul> <li>Individuals who are qualified and identified by OPWDD to</li> </ul>	
	receive program services through OPWDD	
	<ul> <li>Individuals with chronic medical conditions being treated by</li> </ul>	
	a specialist not participating in any MA managed care plan in	
	the service area	
	(exemption limited to six months)	



	<ul> <li>Residents of Chemical Dependence Long Term Residential Program</li> <li>Native Americans (NA) or Alaskan Native (AN)</li> <li>Nursing Home Transition and Diversion Medicaid waiver (NHTD)</li> <li>Traumatic Brain Injury Medicaid Waiver (TBI)</li> <li>Youth placed in the care and custody of the Office of Children and Family Services (OCFS) (except those on aftercare or "Trial Discharge" status)</li> </ul>	
Added Medical Nutrition Therapy to	Medical Nutrition Therapy Added to the Article 29-I VFCA Health Facilities	p.72
Appendix B – Web Links	Other Limited Health Related Service Fee Schedule (ny.gov)	