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Attachment A – Hospital Requirements for Making Referrals to Health Homes: Referral Procedures and Determining if a Medicaid Member is Currently Eligible or Enrolled in a Health Home

The State included language in the Health Home State Plan Amendment (SPA) for Individuals with Chronic Behavioral and Medical Health Conditions (SPA #NY-13-0018) regarding the requirement for Hospitals to refer eligible individuals to Health Homes. To further strengthen the expectation of States with regard to hospital referrals, CMS then required the State to submit the following SPA assurance: “The State provides assurance that hospitals participating under the State Plan or a waiver of such plan will be instructed to establish procedures for referring eligible individuals with chronic conditions who seek or need treatment in a hospital emergency department to designated Health Home providers”. The New York State Department of Health (The Department) developed the following guidance to assist hospitals in complying with this requirement.

Establishing Referral Procedures and Determining Health Home Eligibility

Hospitals must have procedures in place for making referrals to Health Homes and should follow their own protocols for obtaining permission from an individual to make such referrals. Recognizing that qualified providers and protocols may involve different approaches for children as compared to adults for the specific Health Home activities, hospitals may develop provider standards and protocols that serve different age groups.

Hospital staff must use their best judgment to identify individuals who appear to meet eligibility criteria for Health Home enrollment and make timely referrals. With a focus on reducing preventable hospitalizations, emergency room visits, and unnecessary care it is imperative that referrals of individuals to Health Homes occur while the individual is under the care of emergency room or inpatient hospital staff when at all possible. This will also serve to support the safe transition of individuals to needed post discharge services and care. The Health Home can work with Managed Care Plans and providers to confirm Medicaid eligibility, qualifying condition(s), and risk factors.

Determining Health Home Enrollment

To determine if an individual (adult or child) is already enrolled in a Health Home, the hospital staff can ask the individual or responsible adult/guardian if s/he is enrolled in a Health Home or has a care manager. If the individual or responsible adult/guardian is uncertain, the hospital is required to take the following steps.

Note: The information described in Step 1 below is ‘in progress’ and will be available in ePACES-eMedNY:

Step 1: Verify whether the individual is Medicaid Managed Care Plan enrolled or Medicaid Fee-for-Service (FFS) through ePACES-eMedNY.

The ePACES-eMedNY system will maintain two new Client Restriction Exception (RE) Codes to identify Health Home members as follows:

- 'A1' Care Management Agency - Identifies the name of the Care Management Agency and Provider NPI an individual is assigned to, in outreach or enrollment, for notification;
- 'A2' Health Home - Identifies the name of the Health Home the individual is assigned to, in outreach or enrollment, for notification.

If A1 or A2 RE Code is identified, hospital staff must contact the Health Home or Care Management Agency. If A1 or A2 RE Code is not identified, proceed to Step 2.

A list of NYS Health Homes can be found on the DOH Health Home website at:

https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_contacts.htm

Step 2: The ePACES-eMedNY system now maintains Restriction Exception (RE) Codes to identify Health Home members as HARP Plan enrolled (H1-H9). A HARP member is automatically eligible for Health Home enrollment.

If a HARP Restriction Exception (RE) Code is identified, notify the Managed Care Plan. If no HARP RE Code is identified, proceed to Step 3.

A list of HARP Restriction Exception (RE) Codes can be found on the DOH Health Home website at:

http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/health_home_policy.htm Health Home Policy – May 2016 Restriction Exception (R/E) Codes

Step 3: In the absence of both a HARP RE Code and a Health Home RE Code, the hospital must use best judgement to determine whether the individual meets one of the following eligibility criteria, and based on that judgement make referrals to Health Home:

- Two or more chronic conditions (e.g., Substance Use Disorder, Asthma, Diabetes, Heart Disease, etc.) or,
- One single qualifying condition – (either HIV/AIDS or a Serious Mental Illness (SMI))

Step 4: Provide information to the individual about the benefits of Health Home care management services.

The New York State Health Home Program brochure is available at the following link for hospital staff to access and share with individuals:

https://www.health.ny.gov/publications/1123/hh_brochure.pdf

Step 5: If an individual is not already enrolled in a Health Home, obtain the individual's consent to make a Health Home referral, and contact the individual's Managed Care Plan where applicable, who will assist with referral to Health Homes in the plan's provider network; OR in the absence of a Managed Care Plan, the individual may request a care management agency or any Health Home in your region or within the region where the individual resides, or a Health Home affiliate with your hospital system.

A listing of Managed Care Plan Contacts for Health Homes and Care Management Agencies can be found on the DOH Health Home website at:
http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/managed_care.htm - Managed Care Information - Managed Care Organization Contacts for Health Home.

Thank you for your anticipated support of our Health Homes program. We look forward to partnering with you to create a healthier population in New York State. For more information, please visit the NYS Department of Health Medicaid Health Homes website at:
https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/