



**Department
of Health**

Medicaid
Redesign Team

Health Home/ Managed Care Organization Workgroup Meeting Notes and Next Steps

May 17, 2016

Proposed Agenda

- Welcome- Introductions
- Updates on Children's Health Home
- MAPP-HHTS
- Billing/Payment
- Updates on Revised Workflow – Feedback and Problem Solving Session
- Updates on Enrollment
- HCBS Provider Readiness
- Next Steps

Hot Topics

- HARP BH HCBS WORKFLOW- POC EXCHANGE ETC
 - Updates
- BILLING
 - HML-UPDATE- time permitting
 - MAPP-HHTS [Todays topic](#)
- ENROLLMENT- [updates](#)
- PERFORMANCE MEASUREMENT and QUALITY IMPROVEMENT
- PERSON CENTERED CARE PLANNING– COMMUNICATION BTWN MCO AND CMA'S
- Incidents and Complaints
- ACT Intersection of DOH/OMH regulation
- REDESIGNATION- Site visit follow-up what feedback to expect and when

Health Home Serving Children

Readiness Activities	Dates and Timeframes
<p>Health Homes Contingently Designated to Serve Children Second Round of Applications Due and in January 2016 as a result of changes to Governance Structure of Applications reviewed in 2015</p>	<p>June 15, 2015 (13) March 17, 2016 (3)</p>
<p>Health Homes Signed Letters Accepting Designation and Agreement to Address Contingencies Due date for Second Round of Contingency Letters</p>	<p>June 30, 2015 (13) April 15, 2016 (3)</p>
<p>Other Readiness Activities of Contingently Designated HHs Serving Children (DEAAs, BAAs, CMA Network Lists, Provider Network Lists, Billing Readiness, HIT Requirements)</p>	<p>Ongoing</p>
<p>Various Training Webinars (Currently Available and New Trainings Schedule for the Spring/Summer) and MAPP Modifications for Children</p>	<p>Began in Early 2015 and Ongoing</p>
<p>Begin Enrolling Children in Health Home</p>	<p>October 2016</p>

Key Features of Children's Medicaid Redesign Initiative

- **The State continues to develop many details of the Design**
- **Expanding access to care management** for children with chronic conditions under the Health Home program, or for children with lesser needs through Managed Care plans or other vehicles – a key to integrating care planning and service provision – October 2016
- **Creating New State Plan Services** – January 2017
- **Transitioning existing children's behavioral health benefits** from fee-for-service to managed care – a key to integrating behavioral health and physical health - January/July 2017
- **Providing greater access to an aligned array of Home and Community Based Services, 2017**

Status of State Plan Amendment

- The State Plan Amendment – APPROVED by CMS
- Effective October 1, 2016, the SPA authorizes the following:
 - ✓ Use of modified CANS-NY Assessment (will be used to determine Health Home PMPM Rate)
 - ✓ Approval of High, Medium, Low PMPM Rates and Outreach and Assessment Rates
 - At CMS request, rates are approved under the SPA for the period October 1, 2016 to September 30, 2018 to provide opportunity to review rates
 - Will require State to submit amendment to extend/make permanent/modify

Per Member Per Month HH Care Management Rates for Children under 21 (non-Legacy Providers)

Acuity (CANS Algorithm)	Upstate	Downstate
High	\$750	\$799
Medium	450	479
Low	225	240
Outreach	135	135
Assessment	185	185

Status of State Plan Amendment

- The SPA authorizes the following:
 - ✓ Conversion of OMH TCM providers to Health Home, Approval of Rate Reconciliation Process for these Legacy Providers
 - Rate methodology discussed in June 8, August 25, and September 16, 2015 Webinars
 - DOH and OMH will be scheduling additional Webinars with OMH TCM providers to ensure smooth transition to Health Home
 - ✓ Referral, rather than assignment list, process for enrollment
 - ✓ Modifications to Health Home eligibility criteria for children: Serious Emotional Disturbance (SED) (Health Home definition) and Complex Trauma (CMA/SAMHSA definition) as single qualifying conditions for Health Home eligibility (will be discussed in more detail later in this presentation)
 - State requested Federal Match at 90% for SED and Complex Trauma and new conditions under the Health Home program
 - CMS authorized 90% for Complex Trauma only
 - To maximize the 8 quarters the State agreed to shift the effective date for enrollment to October 1, 2016 (with September date state would have lost two months of 90% Match)

Overview and Status of Readiness Activities of Contingently Designated Health Homes Serving Children (CD-HHSC)

- Since December 2015, CD-HHSC have made substantial progress in moving towards readiness
- State has had periodic meetings with some of the CD-HHSC, including “new” HH that currently do not serve adults
 - ✓ State is in process of scheduling monthly readiness check in meetings with HHSC
- For most CD-HHSC, outstanding readiness activities primarily revolve around:
 - ✓ HIT Compliance – Updated written HIT policies, care management software
 - ✓ Billing Readiness – Billing software, Billing Certifications
 - Due date for submitting Billing Certifications is May 1, 2016 (adult and children Health Homes have to submit separate attestations)
 - ✓ BAAs – with a particular focus on BAAs with:
 - OMH TCM providers that will transition to Health Homes – need 100% linkage to ensure smooth transition.
 - Voluntary Foster Care Agencies that will be care managers for children that may be eligible for and enrolled in HH and also in foster care
 - ✓ Administrative Service Agreements (revised as January 2016) with Managed Care Plans
 - Due date for entering into revised ASAs for Health Homes that now serve adults July 1, 2016

Health Home	Designated to Serve Children Pending the Acceptance and Implementation of Contingencies*
Catholic Charities of Broome County	<p>Encompass Catholic Charities Children’s Health Home</p> <p>Albany, Allegany, Broome, Cattaraugus, Chautauqua, Cayuga, Chemung, Chenango, Clinton, Columbia, Cortland, Delaware, Erie, Essex, Franklin, Fulton, Genesee, Greene, Hamilton, Herkimer, Jefferson, Lewis, Livingston, Madison, Monroe, Montgomery, Niagara, Oneida, Onondaga, Ontario, Orleans, Oswego, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Schuyler, Seneca, St. Lawrence, Steuben, Tioga, Tompkins, Wayne, Warren, Washington, Wyoming, Yates</p>
Greater Rochester Health Home Network LLC	Cayuga, Chemung, Livingston, Monroe, Ontario, Seneca, Steuben, Wayne, Yates, Allegany, Genesee, Orleans, Wyoming
Central New York Health Home Network (CNYHHN Inc.)	Albany, Rensselaer, Schenectady, Cayuga, Herkimer, Jefferson, Lewis, Madison, Oneida, St. Lawrence
North Shore LIJ Health Home	Queens, Nassau, Suffolk
Coordinated Behavioral Care, Inc. dba Pathways to Wellness Health Home	Bronx, Brooklyn, Manhattan, Queens, Staten Island
St. Mary’s Healthcare	Fulton, Montgomery
Niagara Falls Memorial Medical Center	Niagara
Hudson River HealthCare, Inc. (HRHCare) and Open Door Family Medical Centers dba Hudson Valley	Columbia, Dutchess, Greene, Orange, Putnam, Rockland, Sullivan, Westchester, Nassau, Suffolk



Health Home	Designated to Serve Children Pending the Acceptance and Implementation of Contingencies*
St. Luke's-Roosevelt Hospital Center dba Mount Sinai Health Home	Bronx, Brooklyn, Manhattan, Queens, Staten Island
VNS- Community Care Management Partners, LLC (CCMP)	Bronx, Brooklyn, Manhattan, Queens, Staten Island
Adirondack Health Institute, Inc.	Clinton, Essex, Franklin, Hamilton, St. Lawrence, Warren, Washington
Institute for Family Health	Ulster
Montefiore Medical Center dba Bronx Accountable Healthcare Network Health Home	Bronx

Health Home	Designated to Serve Children Pending the Acceptance and Implementation of Contingencies*
Children’s Health Homes of Upstate New York, LLC (CHHUNY)	Albany, Allegany, Broome, Cattaraugus, Cayuga, Chautauqua, Chemung, Chenango, Clinton, Columbia, Cortland, Delaware, Dutchess, Erie, Essex, Franklin, Fulton, Genesee, Greene, Hamilton, Herkimer, Jefferson, Lewis, Livingston, Madison, Monroe, Montgomery, Niagara, Oneida, Onondaga, Ontario, Orange, Orleans, Oswego, Otsego, Putnam, Rensselaer, Rockland, Saratoga, Schenectady, Schoharie, Schuyler, Seneca, St. Lawrence, Steuben, Sullivan, Tioga, Tompkins, Ulster, Warren, Washington, Wayne, Wyoming, Yates
Collaborative for Children and Families	Bronx, Brooklyn, Manhattan, Nassau, Queens, Staten Island, Suffolk, Westchester
Kaleida Health-Women and Children’s Hospital of Buffalo	Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans, Wyoming



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MAPP- HHTS

May 17, 2016

MAPP-HHTS- Q&A

MAPP-HHTS- Health Home perspective

Key Questions

Key Concerns

CMA Perspective

Key Questions

Key Concerns: Payment lag; ending direct billing;

Plan Perspective

Key Questions

Key Concerns:

Phase 1: MAPP HHTS Features

- Identification of Health Home eligible population
- Assigning eligible individuals from MCP to HH to CMA
- Documenting when HH/CMA outreach potential members and enroll members in the Health Home program.
- Collects referrals of potential Health Home members
- Billing Support (MCO, HH, and CMA exchange information need for claims)
- Transfer of individuals between Health Homes
- Member Batch lookup and export
- Dashboards to evaluate the performance of the Health Home program

MAPP HHTS Use

- Users are encouraged to access the system daily
- Assignment information must be viewed/downloaded at least once a week
- Any changes to a member's assignment or segment information must be reported to the system within 24 hours
- MCPs, HHs, and CMAs must work together to figure out how they will work together within the system.
- For service dates on or after 4/1/16, providers must submit HML Assessment information to the system prior to submitting a Health Home claim to Medicaid
- In June 2016, Billing Support will be updated to include payment/denial information for a member's Health Home claim for a given month of service

MAPP HHTS Use

- Users are encouraged to access the system daily, but Assignment information must be viewed/downloaded at least once a week.
- Any changes to a member's assignment or segment information must be reported to the system within **24 hours**. **Assignment, segment, and billing information collected from CMAs MUST be submitted to MAPP HHTS within 24 hours.**
- MCPs, HHs, and CMAs must work together to figure out how they will work together within the system.
- For service dates on or after 4/1/16, providers must submit HML Assessment information to the system prior to submitting a Health Home claim to Medicaid.
- In June 2016, the Billing Support Download file will include payment/denial information for a member's Health Home claim for a given month of service

MAPP HHTS Access

- Currently, Mainstream (HARP, SNP, HMO, PHSP) MCPs, HHs, and CMAs have access
- Each provider has a gatekeeper, who is responsible for adding and removing users from their organization.
- If you are with an MCP, HH, or CMA and need access to the MAPP HHTS, please contact your organization's gatekeeper.
- If you don't know who your gatekeeper is, or have any other questions about MAPP HHTS access and use, please contact MAPP Customer Care Center:
 - mapp-customercenter@cma.com
 - (518) 649-0052

Next Steps

- Attend weekly webinar if not done so
- MAPP-HHTS one-to-one meetings are available to answer specific questions
- Major Concerns about getting HML assessment in the system by June 1, 2016
- Safety net for direct billers



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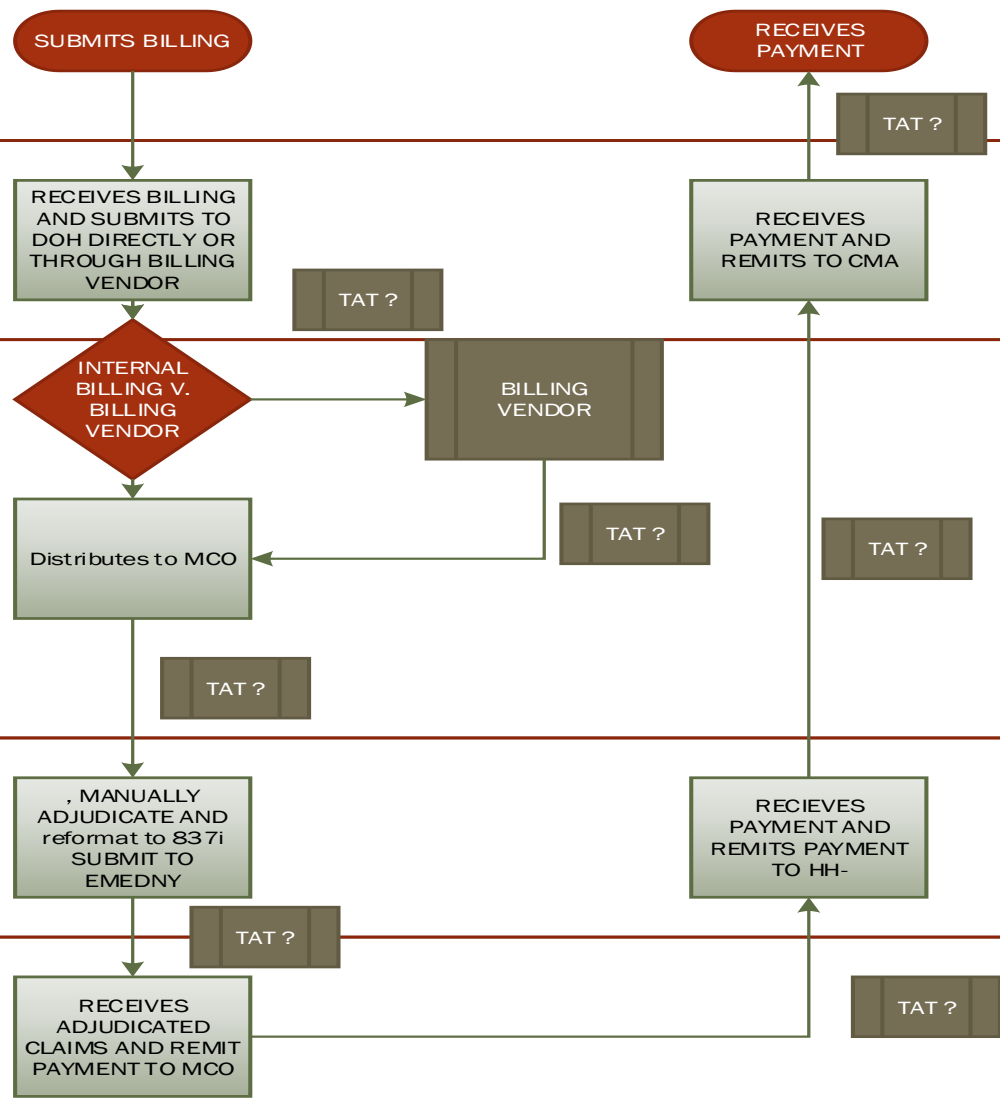
Billing and Payment

May 17, 2016

Health Home Billing

Phase

CMA
Health Home
DOH-HH
MCO
Emedny



Billing and Payment Lag

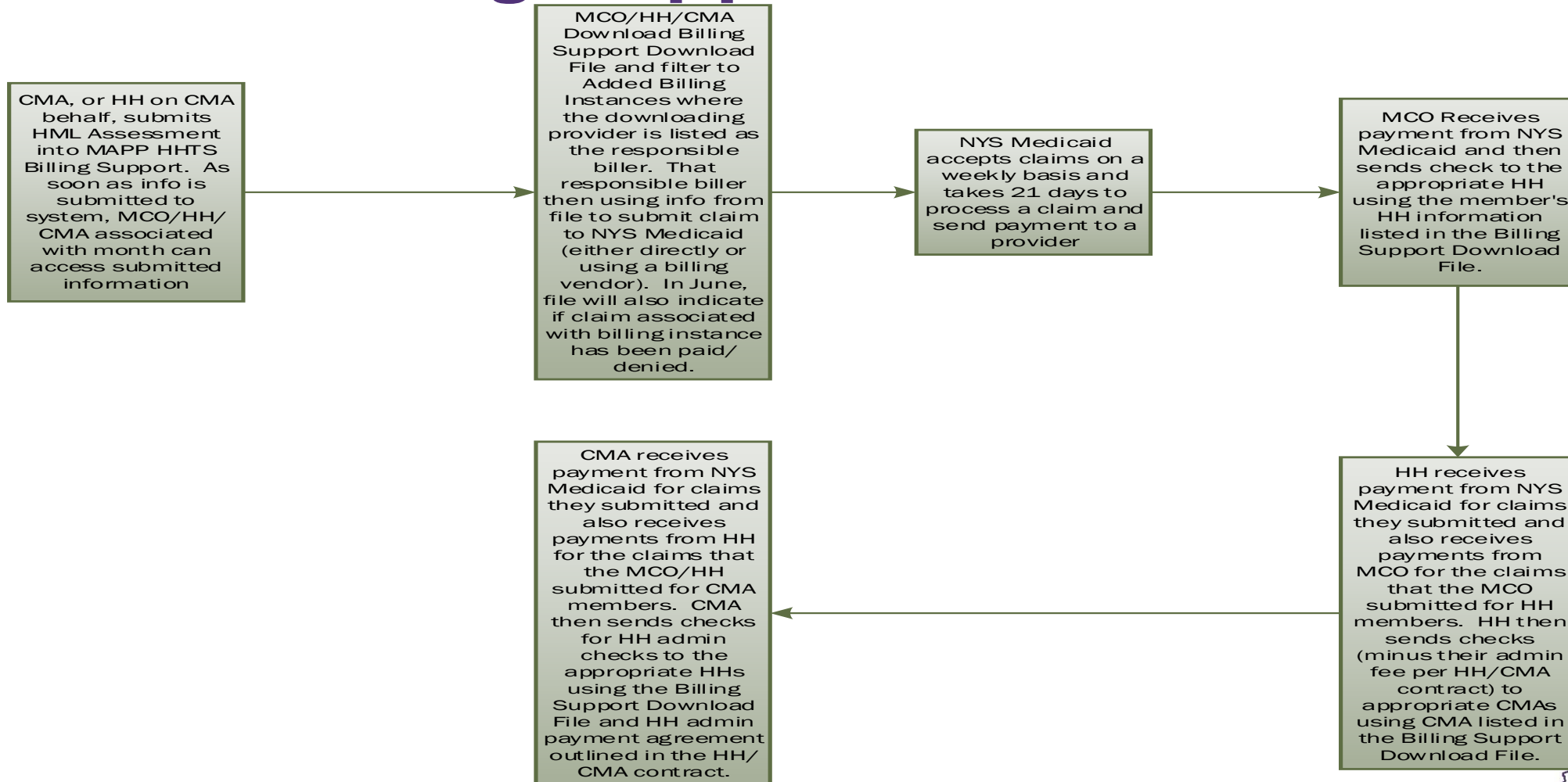
Key questions

How long does each sub process take now?

- CMA- HH= 35 days
- CMA billing monthly and Health Home ranging 3-5 business days to submit
- Billing vendor timeframe= not identified
- MCO= not identified
- Medicaid= 21business days

How will MAPP-HHTS change the current process

Health Home Payment Flow Using MAPP HHTS Billing Support



BH HCBS Plan of Care Updates

- Data total number of assessments
- Total number of POC submitted
- Total number of Approved services

Key Concerns: Tracking Completion of CMHA

- Incentives:
 - Offering Visa cards for completion of the CMHA
- Completing CMHA
 - Pros: excellent behavioral health tool can it replace HH Comprehensive -
 - Cons: lengthy and time consuming ; does not address physical health fully

Upstate Readiness Update

- What are the key lessons learned from NYC HH and BH Carve In?
- What are the key concerns?

BH HCBS Provider Readiness

- Update post MCTAC training
- HCBS authorization data?

- What are the key concerns?
- What is the MCO role in provider readiness
- How can the MCO assist the HHCM to access HCBS Providers for members?

Next Steps.....

Follow up items from today's workgroup

- Establish a billing payment sub committee to address barriers to timely payment and recommendations
- Consent and DOH 5055- review in Weekly webinar on 5/17/16
- Revise guidance document for DOH 5055 to support communication with provider service community