GUIDE TO RESTRICTION EXCEPTION (RE) CODES AND HEALTH HOME SERVICES

RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
02	**RRP Podiatry** These are codes to restrict recipient to specific podiatric providers.	**YES** **(See notes)**	
03	**RRP Dental** These are codes to restrict recipient to specific dental providers.	**YES** **(See notes)**	
04	**RRP Durable Medical Equipment** These are codes to restrict recipient to specific durable medical equipment providers.	**YES** **(See notes)**	
05	**RRP Pharmacy** These are codes to restrict recipient to specific pharmacy providers.	**YES** **(See notes)**	
06	**RRP Physician** These are codes to restrict recipient to specific physicians.	**YES** **(See notes)**	Individuals can be in a Restricted Recipient Program (RRP) and enrolled in Health Home, but the Care Manager should work with the recipient and contact their Managed Care Plan, if applicable, to ensure compliance with any restrictions.
08	**RRP Clinic** These are codes to restrict recipient to specific clinics.	**YES** **(See notes)**	
09	**RRP In-Patient Hospital** These are codes to restrict recipient to specific hospitals for inpatient services.	**YES** **(See notes)**	
10	**RRP Dental Clinic** These are codes to restrict recipient to specific dental clinics.	**YES** **(See notes)**	
11	**RRP Physician Group** These are codes to restrict recipient to specific physician groups.	**YES** **(See notes)**	
12	**RRP Physician Assistant/Nurse Practitioner** These are codes to restrict recipient to specific PA/NP providers.	**YES** **(See notes)**	
13	**RRP Alternative Pharmacy** These are codes to restrict recipient to specific alternative pharmacy providers.	**YES** **(See notes)**	

GUIDE TO RESTRICTION EXCEPTION (RE) CODES AND HEALTH HOME SERVICES

RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
20	**Enrollee in Special Needs MC Plan (HIV SNP)** This code is used to identify enrollees in Special Needs Plans.	YES (See notes)	Like mainstream plans, recipients can be members of HIV SNP and enrolled in a Health Home program.
21	**Enrollee in Special Needs MC Plan (HIV SNP)** This code is used to identify enrollees in Special Needs Plans.	YES (See notes)	
23	**OMH Children's Waiver** This code is used to identify recipients in the OMH Home & Community Based Services (HCBS) waiver for seriously emotionally disturbed (SED) children.	NO (See notes)	Children that received services through this previous waiver have been transitioned to the new Children Waiver with Health Home Care Management or Care Management through an Independent Entity. The use of this RRE Code has ended effective 3/31/2019.
25	**OPWDD - Sub-Chapter A Exception** This code is for individuals receiving OPWDD for a limited period of time with no local shares.	NO	
30	**LTHHCP - Long Term Home Health Care Program (Lombardi Waiver)** Code used for individuals authorized for long term care services who are eligible for nursing home level of care and are residing in the community. Services provided through a certified LTHHCP provider.	NO (See notes)	Individuals receiving services through this waiver can either be enrolled in a Health Home or in the waiver but cannot be in both as each provides care management services. Care managers should work with individuals to determine which service best meets their needs.
35	**Case Management Program; Medicaid Service Coordination/Case Management Program (Medicaid OMH, COBRA, AI TCM, OPWDD)** Comprehensive case management program.	YES (See notes)	Children receiving OMH TCM services are being transitioned and adults receiving HIV COBRA, OMH TCM and OPWDD care management have transitioned into Health Homes. Individuals receiving EI TCM services wil transition to Health Home enrollment at a later date. First Time Mothers/Newborns (NFP Targeted Case Management) will not transition and can not be enrolled in the Health Home program while enrolled in NFP. NFP Care Managers should refer individuals to the Health Home program upon disenrollment, i appropriate .

GUIDE TO RESTRICTION EXCEPTION (RE) CODES AND HEALTH HOME SERVICES

RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
38	**ICF/DD Res** Recipient is a resident of an ICF-DD Facility.	NO (See notes)	Individuals receiving services through this waiver can either be enrolled in a Health Home or in the waiver, but cannot be in both as each provides care management services. Care managers should work with individuals to determine which service best meets their needs.
39	**Aid Continuing** Recipient is subject to Utilization Threshold (UT) and exempt from copay.	YES (See notes)	The care managers must work within the individuals established UT. Limitations on services may apply.
44	**HCBS at Home Non-Intensive Residential Habilitation** Recipient is in a HCBS Non-Intensive AHRH to better serve consumers in their own homes and reduce demand for more costly residential placement.	NO (See notes)	At this time OPWDD waiver participants cannot be in a Health Home and the waiver. If waiver participants wish to receive care management through a Health Home they must dis-enroll from the waiver. Health Home care managers and OPWDD Medicaid Service Coordinator (MSC) managers should work with individuals to determine whether the waiver or Health Homes can best meet their needs.
45	**HCBS at Home Intensive Residential Habilitation** Recipient is in a HCBS IBS to better serve consumers in their own homes and reduce demand for more costly residential placement.	NO (See notes)	At this time OPWDD waiver participants cannot be in a Health Home and the waiver. If waiver participants wish to receive care management through a Health Home they must dis-enroll from the waiver. Health Home care managers and OPWDD Medicaid Service Coordinator (MSC) managers should work with individuals t determine whether the waiver or Health Homes can best meet their needs.
46	**OPWDD Home & Community Based Services Waiver - HCB (Pure Waiver)** Identifies a recipient in home & community based services waiver program (HCBS).	NO (See notes)	

GUIDE TO RESTRICTION EXCEPTION (RE) CODES AND HEALTH HOME SERVICES

RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
47	**OPWDD HCBS Community Habilitation Phase 2** Identifies a recipient in home & community based services waiver supervised CR or supervised IRA.	**NO** **(See notes)**	At this time OPWDD waiver participants cannot be in a Health Home and the waiver. If waiver participants wish to receive care management through a Health Home they must dis-enroll from the waiver. Health Home care managers and OPWDD Medicaid Service Coordinator (MSC) managers should work with individuals to determine whether the waiver or Health Homes can best meet their needs.
48	**OPWDD HCBS Supportive IRAs and CRs** Identifies a recipient in home & community based services waiver supportive IRA & CR.	**NO** **(See notes)**	
49	**OPWDD HCBS Supervised IRA** Identifies a recipient in home & community based services waiver supervised IRA & CR.	**NO** **(See notes)**	
55	**MCC Pharmacy** An HR recipient enrolled in the MCCP and receiving pharmacy services from the primary pharmacy.	**YES**	Individuals can be in a Managed Care Coordinator Program (MCCP) and enrolled in Health Home, but the care manager should work with the recipient and contact their Managed Care Plan to ensure compliance with any restrictions.
56	**MCC Physician** An HR recipient enrolled in the MCCP and assigned to a primary physician or a preferred provider. Non-emergent transportation must be ordered by a primary provider only. Ancillary services (pharmacy, DME & lab) must be ordered by primary or referred provider.	**YES**	Individuals can be in a Managed Care Coordinator Program (MCCP) and enrolled in Health Home, but the care manager should work with the recipient and contact their Managed Care Plan to ensure compliance with any restrictions.
58	**MCC Clinic** An HR recipient enrolled in the MCCP and assigned to a primary clinic where s/he must receive care or be referred for care. Ancillary services (pharmacy, DME & lab) must be ordered by primary only.	**YES** **(See notes)**	Individuals can be in a Managed Care Coordinator Program (MCCP) and enrolled in Health Home, but the care manager should work with the recipient and contact their Managed Care Plan to ensure compliance with any restrictions.

GUIDE TO RESTRICTION EXCEPTION (RE) CODES AND HEALTH HOME SERVICES

RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
59	**MCC Hospital** A recipient enrolled in the MCCP and assigned to a primary inpatient provider where s/he must receive care.	YES (See notes)	Individuals can be in a Managed Care Coordinator Program (MCCP) and enrolled in Health Home, but the care manager should work with the recipient and contact their Managed Care Plan to ensure compliance with any restrictions.
60	**Nursing Home Transition and Diversion Waiver** Recipient enrolled in Nursing Home Transition & Nursing Home Diversion waiver	NO (See notes)	Individuals receiving services through this waiver can either be enrolled in a Health Home or in the waiver but cannot be in both as each provides care management services. Care managers should work with individuals to determine which service best meets their needs.
62	**Care at Home (CAH) I (Administered by DOH)** The Medicaid-waiver CAH I program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	NO (See notes)	Children that received services through this previous waiver have been transitioned to the new Children's Waiver with Health Home Care Management or Care Management through an Independent Entity. The use of this RRE Code has ended effective 3/31/2019.
63	**Care at Home (CAH) II (Administered by DOH)** The Medicaid-waiver CAH II program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	NO (See notes)	
64	**Care at Home (CAH) III (OPWDD)** The Medicaid-waiver CAH III program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	NO (See notes)	Children that received services through this previous waiver have been transitioned to the new Children's Waiver with Health Home Care Management or Care Management through an Independent Entity. The use of this RRE Code has ended effective 3/31/2019.

GUIDE TO RESTRICTION EXCEPTION (RE) CODES AND HEALTH HOME SERVICES

RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
65	**Care at Home (CAH) IV (OPWDD)** The Medicaid-waiver CAH IV program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	**NO** **(See notes)**	Children that received services through this previous waiver have been transitioned to the new Children's Waiver with Health Home Care Management or Care Management through an Independent Entity. The use of this RRE Code has ended effective 3/31/2019.
67	**Care at Home (CAH) VI (OPWDD)** The Medicaid-waiver CAH IV program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	**NO** **(See notes)**	Children that received services through this previous waiver have been transitioned to the new Children Waiver with Health Home Care Management or Care Management through an Independent Entity. The use of this RRE Code has ended effective 3/31/2019.
72	**Bridges to Health (B2H) Seriously Emotionally Disturbed (SED)** Bridges to Health (B2H) Waiver services are tailored to meet the child's specific, presenting health care needs, and are not available through other programs these children attend.	**NO** **(See notes)**	Children that received services through this previous waiver have been transitioned to the new Children's Waiver with Health Home Care Management or Care Management through an Independent Entity. The use of this RRE Code has ended effective 3/31/2019.
73	**Bridges to Health (B2H) Developmentally Disabled** Bridges to Health (B2H) Waiver services are tailored to meet the child's specific, presenting health care needs, and are not available through other programs these children attend.	**NO** **(See notes)**	
74	**Bridges to Health (B2H) Medically Fragile (MedF)** Bridges to Health (B2H) Waiver services are tailored to meet the child's specific, presenting health care needs, and are not available through other programs these children attend.	**NO** **(See notes)**	

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RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
75	**LTC D/D Asset Protection** Recipients are those who receive resource exemptions in the amount of LTC insurance benefit dollars paid to date. The amount determines the amount of resources disregarded in the Medicaid Budget Logic (MBL) budget.	YES	
76	**LTC Total Asset Protection** Recipients are those who have complete disregard of resources in Medicaid Budget Logic (MBL).	YES	
77	**LTC Insurance-Non-Partnership** Recipients have LTC insurance but not through the Partnership for LTC.	YES	
81	**Traumatic Brain Injury (TBI)** HCBS/TBI waiver services include: service coordination, independent living skills training and development (ILST), structured day program services, substance abuse program services, positive behavioral interventions and support services (PBIS), community integration counseling (CIC), home and community support services (HCSS), environmental modifications (emods), respite services, assistive technology (AT), waiver transportation, and community transitional services (CTS).	NO (See notes)	Individuals receiving services through this waiver can either be enrolled in a Health Home or in the waiver, but cannot be in both as each provides care management services. Care managers should work with individuals to determine which service best meets their needs.
82	**Non-MMIS ID RRP Provider** This code returns an eligible message "Restricted recipient contact MC plan for provider information"	YES (See notes)	Individuals can be in a Restricted Recipient Program (RRP) and enrolled in Health Home, but the Care Managers should work with the individual and contact their Managed Care Plan to ensure compliance with any restrictions.

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RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
83	**Alcohol & Substance Abuse (ASA)** Recipient has been mandated to receive ASA services FFS in some instances. The recipient may also be in PCP where the plan is responsible for payment of some services.	YES (See notes)	The care manager should coordinate services within existing Fee-For-Services and Managed Care Plan eligibility requirements.
84	**OMH Base/Community Rehab & Support (CRS) with Clinical Treatment** Recipient is enrolled in an outpatient rehab program for mentally ill adults (OMH). Recipients are exempt from UT.	YES	
85	**OMH Base/Community Rehab & Support (CRS) without Clinical Treatment** Recipient is enrolled in an outpatient rehab program for mentally ill adults (OMH). Recipients are exempt from UT.	YES	
86	**OMH Intensive Rehab & Ongoing Rehab Services (IR/OR)** Recipient is enrolled in an outpatient rehab program for mentally ill adults (OMH). Recipients are exempt from UT.	YES	
89	**Money Follows the Person**	YES	
90	**Managed Care Excluded** Recipient is excluded from mandated managed care auto assignment of a plan	YES	
91	**Managed Care Exempt** Recipient is exempt from managed care enrollment	YES	

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RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
92	**DOH/ Managed Care Exempt** Recipient is exempt from managed care enrollment	YES	
93	**Managed LTC** Recipients are marked who are required to enroll in a managed LTC program	YES (See notes)	Individuals can be in both a Health Home and a MLTC plan. The Health Home and MLTC plan must have an administrative services agreement outlining their respective responsibilities.
94	**OMH Exempt** Recipient exempt from managed care enrollment	YES	
95	**OPWDD Waivered Services Look-Alikes** Recipient exempt from managed care enrollment	YES	
96	**Seriously & Persistently Mentally Ill Adults (SPMI) & Seriously Emotionally Disturbed Children (SED)** Recipient exempt from managed care enrollment	YES (See notes)	Children receiving services through this waiver can either be enrolled in a Health Home or in the waiver, but cannot be in both as each provides care management services. Care managers should work with individuals to determine which service best meets their needs.
A1	**Health Home Program - Care Management Agency** Member is in outreach or enrolled with a Care Management Agency	YES	Released 7/16/18.
A2	**Health Home Program - Health Home** Member is in outreach or enrolled with a Health Home	YES	Released 7/16/18.
AL	**Assisted Living** System generated based on claims for assisted living.	NO	

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RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
B7	Non EP BHP-Aliessa	YES	
C1	Copay Exempt (Hospice)	YES	
C2	Medicare or Medicaid Hospice Elected	YES (See Note)	HH/CMAs must work with Hospice provider/program to ensure delineation of care management services is not duplicative.
CF	Community First Choice Option	YES	
CH	Home and Community Based Services - CREPS	YES	
CM	Managed Long Term Care - CREPS	YES	
CO	Community First Choice Option OPWDD	YES	
D0	DSRIP Opt Out Undeliverable Mail	YES	
D1	DSRIP Opt Out of Data Sharing	YES	
D2	DSRIP Opt In To Data Sharing	YES	
E1	Primary Payer Documentation on file for Zero fill	YES	
G1	Transgender Male to Female	YES	
G2	Transgender Female to Male	YES	
H1	HARP Enrolled without HCBS Eligibility	YES	

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RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
H2	HARP Enrolled with Tier 1 HCBS Eligibility	YES	
H3	HARP Enrolled with Tier 2 HCBS Eligibility	YES	
H4	HIV SNP HARP Eligible without HCBS Eligibility	YES	
H5	HIV SNP HARP Eligible with Tier 1 HCBS Eligibility	YES	
H6	HIV SNP HARP Eligible with Tier 2 HCBS Eligibility	YES	
H7	Opted out of HARP	YES	
H8	State-Identified for HARP Assessment	YES	
H9	HARP Eligible- Pending Enrollment	YES	
I1	OPWDD MC Class 1	NO	
I2	OPWDD MC Class 2	NO	
I3	OPWDD MC Class 3	NO	
I4	OPWDD MC Willowbrook	NO	
I5	CCO/HH Enrollment Level 1	NO	
I6	CCO/HH Enrollment Level 2	NO	
I7	CCO/HH Enrollment Level 3	NO	
I8	CCO/HH Enrollment Level 4	NO	

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RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
I9	CCO/Basic HCBS Plan Support	NO	
K1	HCBS LOC HCBS At Level of Care Acuity	YES	
K2	HCBS LON HCBS at Level of Need Acuity	YES	
K3	HCBS SED HCBS Serious Emotional Disturbance	YES	
K4	HCBS MF HCBS Medical Fragility	YES	
K5	HCBS DDFC HCBS Developmental Disability & in Foster Care	YES	
K6	HCBS DDMF HCBS Developmentally Disabled & Medically Fragile	YES	
K7	HCBS CT HCBS Abuse Neglect Maltreatment Complex Trauma	YES	
K8	VFCA Child in Care of a Voluntary Foster Care Agency	YES	
K9	FC Child is in or Associated with Foster Care	YES	
KF	FC FC Child Must Remain in FFS	YES	
KK	FO1 Child is Eligible for Medicaid as Family of One	YES	
M1	MAGI Remains in WMS	YES	
N1	Regular SNF Rate - MC Enrollee Permanently placed in SNF	NO	These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral.

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RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
N2	**SNF AIDS - MC Enrollee** **Permanently placed in SNF**	**NO**	These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral.
N3	**SNF Neuro-Behavioral - MC Enrollee** Permanently placed in SNF	**NO**	These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral.
N4	**SNF Traumatic Brain Injury - MC Enrollee** Permanently placed in SNF	**NO**	These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral.
N5	**SNF Ventilator Dependent - MC Enrollee** Permanently placed in SNF	**NO**	These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral.
N6	**Partial Cap 21+ Nursing Home Certifiable** Permanently placed in SNF	**NO**	These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral.
N7	**NH Budgeting Approved** Permanently placed in SNF	**NO**	These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral.
N8	**Transfer Penalty Period DHPCO** Permanently placed in SNF	**NO**	These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral.
N9	**NH Resident Pending NH Eligibility Determination** Permanently placed in SNF	**NO**	These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral.
NH	**Nursing Home** System generated based on claims for nursing home.	**NO**	Care Managers must work with the Nursing Home to identify if the member is permanently placed. If the member becomes permanently place the member should be disenrolled from the Health Home Program. If a member is transitioning from the NH to the community the Care Manager should work with the NH to ensure a smooth transition for the member.
PL	**Pre-Release Upstate MC Ineligible**	**YES** **(See Note)**	Care manager can only work with member in the month this code is ended.
PR	**Pre-Release Downstate MC Ineligible**	**YES** **(See Note)**	Care manage can only work with member in the month this code is ended.

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RE CODE	RE CODE DESCRIPTION	COMPATIBLE WITH HEALTH HOME SERVICES	POLICY NOTES
S1	Surplus Client Not Eligible for Medicaid MC or Medicaid Advantage (NYC ONLY) _____	YES (See Note)	Care manager should work with the individual to maintain their Medicaid eligibility.
T1	Upstate Temporary Assistance Non-MAGI	YES	
T2	NYC Tax Claim	YES	
T3	NYC Enhanced Shelter Allowance	YES	

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
95	**OPWDD Waivered Services Look-Alikes** Recipient exempt from managed care enrollment	The Health Home Compatibility Changed from No to Yes with stipulations. Please see above.
A1	**Health Home Program - Care Management Agency** Member is assigned, in outreach, or enrolled with a Care Management Agency	Added
A2	**Health Home Program - Health Home** Member is assigned, in outreach, or enrolled with a Health Home	Added
AL	**Assisted Living** System generated based on claims for assisted living.	Added
B7	**Non EP BHP Aliessa**	Added
C1	**Copay Exempt (Hospice)**	Added
G1	**Transgender Male to Female**	Added
G2	**Transgender Female to Male**	Added
NH	**Nursing Home** System generated based on claims for nursing home.	Added
TR	**Transgender Individual**	Deleted as more specific codes were added. Please see G1 and G2.

Updated 1/25/2017

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
23	**OMH Children's Waiver** This code is used to identify recipients in the OMH Home & Community Based Services (HCBS) waiver for seriously emotionally disturbed (SED) children.	Changed policy notes to delete " (once Health Homes have been designated to serve children)"
35	**Case Management Program; Medicaid Service Coordination/Case Management Program (Medicaid OMH, COBRA, AI TCM, OPWDD)** Comprehensive case management program.	Changed policy notes to account for adults completion of transition and children transitioning into Health Homes.
62	**Care at Home (CAH) I (Administered by DOH)** The Medicaid-waiver CAH I program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed policy notes to delete " (once Health Homes have been designated to serve children)"
63	**Care at Home (CAH) II (Administered by DOH)** The Medicaid-waiver CAH II program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed policy notes to delete " (once Health Homes have been designated to serve children)"
64	**Care at Home (CAH) III (OPWDD)** The Medicaid-waiver CAH III program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed policy notes to delete " (once Health Homes have been designated to serve children)"
65	**Care at Home (CAH) IV (OPWDD)** The Medicaid-waiver CAH IV program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed policy notes to delete " (once Health Homes have been designated to serve children)"

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
67	**Care at Home (CAH) VI (OPWDD)** The Medicaid-waiver CAH IV program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed policy notes to delete " (once Health Homes have been designated to serve children)"
72	**Bridges to Health (B2H) Seriously Emotionally Disturbed (SED)** Bridges to Health (B2H) Waiver services are tailored to meet the child's specific, presenting health care needs, and are not available through other programs these children attend.	Changed policy notes to delete " (once Health Homes have been designated to serve children)"
73	**Bridges to Health (B2H) Developmentally Disabled** Bridges to Health (B2H) Waiver services are tailored to meet the child's specific, presenting health care needs, and are not available through other programs these children attend.	Changed policy notes to delete " (once Health Homes have been designated to serve children)"
74	**Bridges to Health (B2H) Medically Fragile (MedF)** Bridges to Health (B2H) Waiver services are tailored to meet the child's specific, presenting health care needs, and are not available through other programs these children attend.	Changed policy notes to delete " (once Health Homes have been designated to serve children)"
92	**DOH/ Managed Care Exempt** Recipient is exempt from managed care enrollment	Added
CO	**Community First Choice Option**	Added
CF	**Community First Choice Option OPWDD**	Added
I1	**OPWDD MC Class 1**	Added
I2	**OPWDD MC Class 2**	Added
I3	**OPWDD MC Class 3**	Added

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
I4	OPWDD MC Willowbrook	Added
M1	MAGI Remains in WMS	Added
N8	Transfer Penalty Period DHPCO	Added
N9	NH Resident Pending NH Eligibility Determination	Added

Updated
2/21/2017

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
95	OPWDD Waivered Services Look-Alikes Recipient exempt from managed care enrollment	DELETED: To find a Developmental Disability Regional Office copy and paste the following link in your web browser: https://opwdd.ny.gov/sites/default/files/documents/OPWDD-DDRO-Eligibilty-Coordinators.pdf ADDED: new instructions for inquiries.

Updated
5/9/17

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
CF	Community First Choice Option	Incorrectly labeled with OPWDD
CH	Home and Community Based Services - CREPS	Added
CM	Managed Lont Term Care - CREPS	Added
CO	Community First Choice Option OPWDD	Incorrectly labeled without OPWDD
D0	DSRIP Opt Out Undeliverable Mail	Added
D1	DSRIP Opt Out of Data Sharing	Added
D2	DSRIP Opt In To Data Sharing	Added

CODE	CODE DESCRIPTION	WHAT CHANGED
PL	Pre-Release Upstate MC Ineligible	Added
PR	Pre-Release Downstate MC Ineligible	Added
T1	Upstate Temporary Assistance Non-MAGI	Added
T2	NYC Tax Claim	Added
T3	NYC Enhanced Shelter Allowance	Added

Updated
3/2/2018

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
CF	Community First Choice Option	Compatibility Changed from No to Yes
CO	Community First Choice Option OPWDD	Compatibility Changed from No to Yes

Updated
4/23/2018

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
I5	CCO/HH Enrollment Level 1	Added
I6	CCO/HH Enrollment Level 2	Added
I7	CCO/HH Enrollment Level 3	Added
I8	CCO/HH Enrollment Level 4	Added
I9	CCO/Basic HCBS Plan Support	Added
35	Case Management Program; Medicaid Service Coordination/Case Management Program (Medicaid OMH, COBRA, AI TCM, OPWDD)	Changed description to add "OPWDD care management have transitioned into Health Homes." and "First Time Mothers/Newborns (NFP Targeted Case Management) will not transition and can not be enrolled in the Health Home program while enrolled in NFP. NFP Care

	Comprehensive case management program.	Managers should refer individuals to the Health Home program upon disenrollment, if appropriate."
A1	**Health Home Program - Care Management Agency** Member is assigned, in outreach, or enrolled with a Care Management Agency	Changed date
A2	**Health Home Program - Health Home** Member is assigned, in outreach, or enrolled with a Health Home	Changed date

Updated
7/11/18

CHANGE LOG		
CODE	CODE DESCRIPTION	WHAT CHANGED
A1	**Health Home Program - Care Management Agency** Member is assigned, in outreach, or enrolled with a Care Management Agency	Changed Description from "Tentative date of release is July 2018" to "Released 7/16/18".
A2	**Health Home Program - Health Home** Member is assigned, in outreach, or enrolled with a Health Home	Changed Description from "Tentative date of release is July 2018" to "Released 7/16/18".

Updated
7/16/18

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
23	**OMH Children's Waiver** This code is used to identify recipients in the OMH Home & Community Based Services (HCBS) waiver for seriously emotionally disturbed (SED) children.	Changed Compatibility with the Health Home Program and Description
62	**Care at Home (CAH) I (Administered by DOH)** The Medicaid-waiver CAH I program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed Compatibility with the Health Home Program and Description
63	**Care at Home (CAH) II (Administered by DOH)** The Medicaid-waiver CAH II program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed Compatibility with the Health Home Program and Description
64	**Care at Home (CAH) III (OPWDD)** The Medicaid-waiver CAH III program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed Compatibility with the Health Home Program and Description
65	**Care at Home (CAH) IV (OPWDD)** The Medicaid-waiver CAH IV program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed Compatibility with the Health Home Program and Description

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67	**Care at Home (CAH) VI (OPWDD)** The Medicaid-waiver CAH IV program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed Compatibility with the Health Home Program and Description
72	**Bridges to Health (B2H) Seriously Emotionally Disturbed (SED)** Bridges to Health (B2H) Waiver services are tailored to meet the child's specific, presenting health care needs, and are not available through other programs these children attend.	Changed Compatibility with the Health Home Program and Description
73	**Bridges to Health (B2H) Developmentally Disabled** Bridges to Health (B2H) Waiver services are tailored to meet the child's specific, presenting health care needs, and are not available through other programs these children attend.	Changed Compatibility with the Health Home Program and Description
74	**Bridges to Health (B2H) Medically Fragile (MedF)** Bridges to Health (B2H) Waiver services are tailored to meet the child's specific, presenting health care needs, and are not available through other programs these children attend.	Changed Compatibility with the Health Home Program and Description
K1	**HCBS LOC** HCBS At Level of Care Acuity	Added
K2	**HCBS LON** HCBS at Level of Need Acuity	Added
K3	**HCBS SED** HCBS Serious Emotional Disturbance	Added
K4	**HCBS MF** HCBS Medical Fragility	Added
K5	**HCBS DD** HCBS Developmentally Disabled	Added
K6	**HCBS DDMF** HCBS Developmentally Disabled & Medically Fragile	Added

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
K7	**HCBS CT** HCBS Abuse Neglect Maltreatment Complex Trauma	Added
K8	**VFCA** Child in Care of a Voluntary Foster Care Agency	Added
K9	**FC** Child is in or Associated with Foster Care	Added
KK	**FO1** Child is Eligible for Medicaid as Family of One	Added

Updated
1/3/2019

CHANGE LOG

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23	**OMH Children's Waiver** This code is used to identify recipients in the OMH Home & Community Based Services (HCBS) waiver for seriously emotionally disturbed (SED) children.	Changed "March 30, 2019" to "at a later date"
62	**Care at Home (CAH) I (Administered by DOH)** The Medicaid-waiver CAH I program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed "March 30, 2019" to "at a later date"
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65	**Care at Home (CAH) IV (OPWDD)** The Medicaid-waiver CAH IV program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed "March 30, 2019" to "at a later date"
67	**Care at Home (CAH) VI (OPWDD)** The Medicaid-waiver CAH IV program provides community-based services to physically disabled children who require hospital or skilled nursing home level of care, and allows the child to be at home instead of in an institutional setting.	Changed "March 30, 2019" to "at a later date"
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**Updated
2/1/2019**

CHANGE LOG

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23	**OMH Children's Waiver** This code is used to identify recipients in the OMH Home & Community Based Services (HCBS) waiver for seriously emotionally disturbed (SED) children.	Changed compatibility from "Yes" to "No" and description from "Children receiving services through this waiver will be transitioning to Health Home Care Management or Care Management through an Independent Entity January 2019-March 2019. This RRE Code is expected to end at a future date." To: "Children that received services through this previous waiver have been transitioned to the new Children's Waiver with Health Home Care Management or Care Management through an Independent Entity. The use of this RRE Code has ended effective 3/31/2019."
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N1	**Regular SNF Rate - MC Enrollee** Permanently placed in SNF	Added "Permanently placed in SNF" and "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."
N2	**SNF AIDS - MC Enrollee** Permanently placed in SNF	Added "Permanently placed in SNF" and "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."
N3	**SNF Neuro-Behavioral - MC Enrollee** Permanently placed in SNF	Added "Permanently placed in SNF" and "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."
N4	**SNF Traumatic Brain Injury - MC Enrollee** Permanently placed in SNF	Added "Permanently placed in SNF" and "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."
N5	**SNF Ventilator Dependent - MC Enrollee** Permanently placed in SNF	Added "Permanently placed in SNF" and "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
N6	**Partial Cap 21+ Nursing Home Certifiable** Permanently placed in SNF	Added "Permanently placed in SNF" and "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."
N7	**NH Budgeting Approved** Permanently placed in SNF	Added "Permanently placed in SNF" and "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."
N8	**Transfer Penalty Period DHPCO** Permanently placed in SNF	Added "Permanently placed in SNF" and "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."
N9	**NH Resident Pending NH Eligibility Determination** Permanently placed in SNF	Added "Permanently placed in SNF" and "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."
NH	**Nursing Home** System generated based on claims for nursing home.	Added "These members are not eligible for enrollment or continued enrollment in the Health Home Program while in the Skilled Nursing Facility. Care Managers should work with the Nursing Facility to transition members out when notified of referral."
K5	**HCBS DD** HCBS Developmentally Disabled	Changed "HCBS DD, HCBS Developmentally Disabled" to "HCBS DDFC, HCBS Developmentally Disability & in Foster Care" on February 17. 2021.

Updated
2/17/2021

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
95	**OPWDD Waivered Services Look-Alikes** Recipient exempt from managed care enrollment	Code 95 remains compatible with Health Home services. However, the *Policy Notes* regarding the steps Health Home Care Managers must take are outdated and no longer apply, and have been removed: Care Managers must check with OPWDD to ensure an individual is not receiving Care Management from OPWDD before they can be outreached or enrolled in the Health Home Program. The following steps MUST be taken to ensure there is not duplication of services: • Step 1 - Enter Member's Name, Date of Birth, and CIN number in an excel file. • Step 2 - Encrypt with password the excel file. • Step 3 - Send excel file with subject line "RRE Code 95 Check" to OPWDD's BML at: **fida-idd@opwdd.ny.gov** • Step 4 - Send the password to the same BML with the same subject line.

Updated
4/1/2022

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
C2	**Medicare or Medicaid Hospice Elected**	**Added**

Updated

4/29/2022

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
KF	**FC**	**Added**
	FC Child Must Remain in FFS	

Updated

7/11/2023

CHANGE LOG

CODE	CODE DESCRIPTION	WHAT CHANGED
E1	**Primary Payer Documentation on file for Zero fill**	**New Code Added**

Updated

11/16/2023