

<u>Guidance – Mandatory Process for Monitoring CANS-NY Errors</u>

Effective July 1, 2018, it is required that HH CMAs run a weekly UAS aggregate report as outlined in Attachment B

(https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_children/docs/attachment_b_verifying_correct_hh_and_assessment_choice_uas.pdf) to verify appropriate Health Home selection and Assessment Type has been chosen to ensure correct HHSC payment. If the incorrect Health Home or incorrect Assessment Type on a CANS-NY Assessment is not corrected within the same month the CANS-NY assessment was originally completed, accurate billing and data cannot be maintained. Additionally, the completion of multiple CANS-NY in different months has led to inaccurate data in the system, is not a clear depiction of the member's situation and history within the UAS-NY.

To have accurate data, proper billing and to accurately correct these CANS-NY errors, errors must be detected and corrected within the same month of the completed errored CANS-NY assessment.

For incorrect Health Home errors:

- If discovered within the same month as required, please follow the January 2017 guidance in attachment C.
 https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_children/guidance/approved_reasons_and_processes_correct_cans-ny_errors.htm
- If discovered later than the month the assessment was completed, an additional CANS-NY can be completed in the UAS-NY. However, CMAs should be aware that depending on how late the errored assessment is identified with the wrong Health Home, billing may be lost for the months the assessment did not appropriately transmit to the MAPP HHTS. In addition, the completion of a CANS-NY to correct a wrong Health Home error alters the timeline reassessment period. Attachment B outlines the process to run a weekly aggregate report to detect the CANS-NY errors and Attachment C, outlines the process guidance for fixing such errors.

For incorrect Assessment Type errors:

- If discovered within the same month as required <u>AND</u> "CANS-NY Upon Enrollment" was needed to receive the one-time only CANS-NY fee, an additional CANS-NY can be completed in the UAS-NY. Otherwise error in assessment types should not generate a new CANS-NY due to data integrity, as it does not impact billing.
- If discovered later than the month the assessment with the error was completed, an additional CANS-NY cannot be completed in the UAS-NY to correct the billing error.



Lead Health Homes Serving Children and Care Management Agencies have a responsibility in monitoring CANS-NY errors in the UAS-NY which may impact data accuracy and integrity as well as billing.

All CANS-NY errors detected and corrected, should have clear documentation in the member's case file of such error and corrections. Additionally, CMAs must also follow their lead Health Home's guidance for correcting CANS-NY errors.

Health Homes and Care Management Agencies are required to have an ongoing monitoring process in place which includes monitoring for CANS-NY Errors. When developing a mandatory monitoring process for reviewing CANS-NY errors, Health Homes and CMAs should review and report CANS-NY information for accuracy **at minimum, on a weekly basis** if assessments are completed throughout the entire month. So that your agency will not lose billing, CANS-NY must be reviewed at least weekly to allow your Care Management staff adequate time to correct the error using the approved DOH process by the end of the month. CMAs can monitor assessment errors by using the aggregate report function within the UAS-NY. Instructions on how to do this can be found in the attached document (Attachment B).