Health Home Implementation Webinars

Session #33– March 5, 2014
Program Updates



Agenda

- More on the Health Home Consent
- Managed Care Contracting
- Updates to Health Home Information
- HIT update

Health Home Consent

Health Home Patient Information Sharing Consent (DOH 5055)

- The ultimate goal of the Health Home consent form (DOH-Form 5055) is to allow the Health Home to share protected health information (PHI) on the member, with other downstream partners agreed upon by the member and identified in the consent form.
- When PHI is properly shared, services can be coordinated based on a reasonable understanding of the member's health care needs and medical history.

Health Home Patient Information Sharing Consent (DOH 5055) Update

- ► The revised consent (version 12/13) discussed at the February 19, 2104 Webinar has been removed from the Health Home website and replaced with the 11/12 version.
- ▶ A LISTSERV announcement went out February 20, 2014 informing everyone to continue using the 11/12 version until further notice by DOH.
- Further discussion with OMH on access to the PSYCKES system is needed before the 12/13 version is implemented.

Using the Health Home Patient Information Sharing Consent (DOH 5055)

- A DOH numbered form such as the <u>DOH 5055</u> consent, may not be altered in any way.
 - e.g., use of agency logo, changing original content, attaching forms and other pages, altering DOH form number or date, adding bar codes are prohibited.

Using the Health Home Patient Information Sharing Consent (DOH 5055)

- The consent must be reviewed with the member to assure understanding and level of comfort with completing and signing the consent.
- The member has the right to refuse to sign the consent. Care Managers need to work with members so they understand the importance of signing the consent.

Using the Health Home Patient Information Sharing Consent (DOH 5055)

- If the member limits access or sharing of PHI, this must be clearly indicated on the consent.
- The consent must be tailored to the needs of each member.
- Consent translations are in progress-the translations had to be redone to accommodate the PSYCKES language.

What to consider when completing page 3 of the DOH 5055 consent

- Health Homes and care management agencies may determine how page 3 will be completed.
- ▶ Tailoring the consent to the needs of the member should include consideration of his/her level of understanding and comfort with signing the consent.

What to consider when completing page 3 of the DOH 5055 consent

- Options for consideration:
 - write in only providers and others agreed upon by the member;
 - list all Health Home downstream providers and use clearly defined check marks for the member to designate providers they agree to;
 - list all downstream providers and have member cross out and initial those they do not want involved in his/her care.

Health Home Member and care manager sign/date p. 3 upon completion.

Managed Care Contracting

Health Homes and Managed Care Plans

- Analysis of Health Home contracts with MCP's by County has been done
 - A chart depicting this analysis will be posted to the health home website
 - Based on analysis, some gaps have been identified.
 - Health Homes should continue active conversations with MCP's to pursue contracts.
 - For an up to date list of MCP contacts go to Health Home website:
 - http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/managed_care.htm

Updates to Health Home Information

Requirements for Health Home Name Changes

- Health Homes changing their name and/or NPI number, and/or changing their partner network, as identified on the Health Home application must seek Department approval to change their NYS designated Health Home name.
- Operating under an assumed name other than the approved Health Home name can have legal implications such as:
 - Voided contracts and Data Exchange Application Agreements

The Notification Letter

- ▶ To request name change approval, a Notification Letter is required to be completed and signed attesting to the applicable revisions. A Notification Letter template is on the Health Home website.
- The Notification Letter allows the Department to update your file and your listing on the Health Home website and provide any needed guidance on additional provider enrollment requirements.
 - Includes options to report change in NPI number and changes in your partner network.

Change in Partner Network

- Changes in the Health Home partner network need to be reported to the Department using the Notification Letter if the change:
 - Results in the inability to offer full range of Health Home services as submitted in the original application,
 - Impacts the ability to remain compliant with Health Home standards and guidelines, or
 - Was a result of a failure of a partner to meet Health Home expectations.
- Routine updates (new network providers/partners etc) should be reported through the Health Commerce System (HCS) portal.

Other Changes Required

- Changes to your Health Home name, NPI number, care management agencies or other partners may require amendments to existing:
 - Data Exchange Applications Agreements (DEAAs)
 - Administrative Health Home Service Agreements
 - Consent Forms
 - Article Certifications (Article 28, 31 and/or 32)
- Contacts and additional information can be found at:

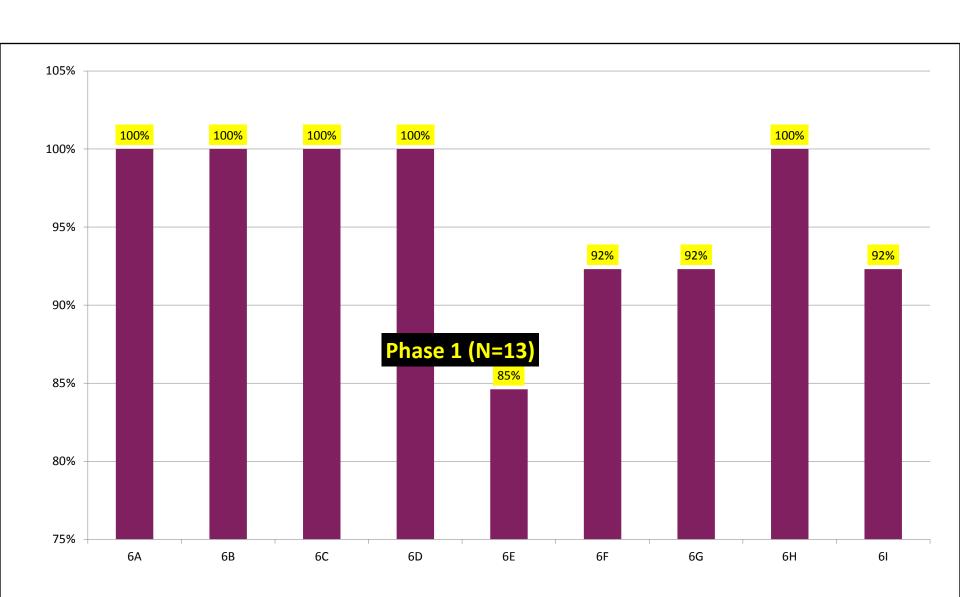
http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/medicaid_enroll_prov-led_hh_rev.htm

Other Changes Required

- Changes to your Health Home principal contacts, telephone number, etc should be reported to the Health Home Bureau Mail Log (BML).
- Click on the "Email NYS Health Home Program" tab on the Health Home website, and choose the "Organization Demographics/Contacts" tab.
- Quarterly requests for updates are sent to all Health Homes-please respond timely to these requests.
- MCOs should also report changes in key contacts, to ensure information on the Health Home website is upto-date.

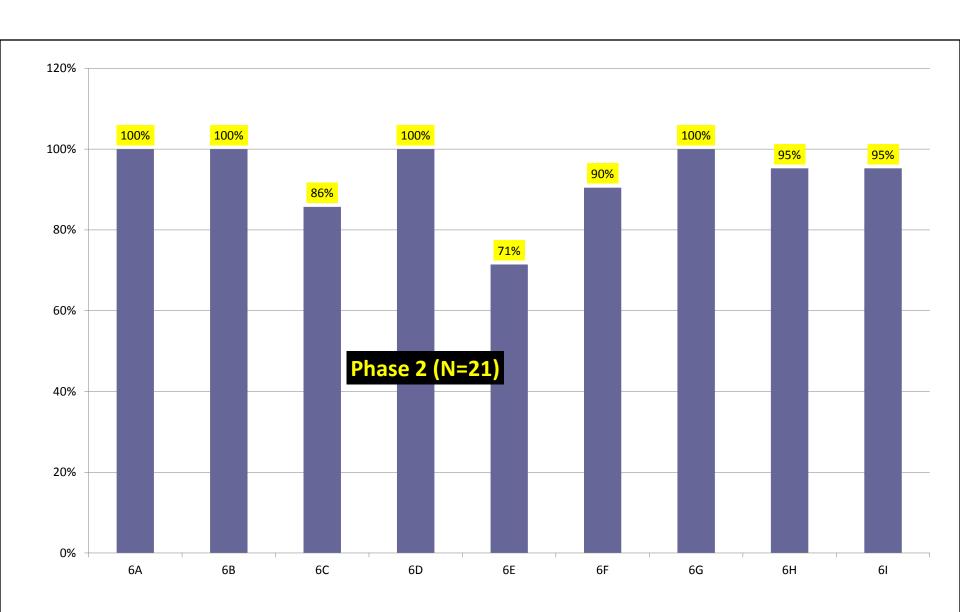
HIT Update

Phase I



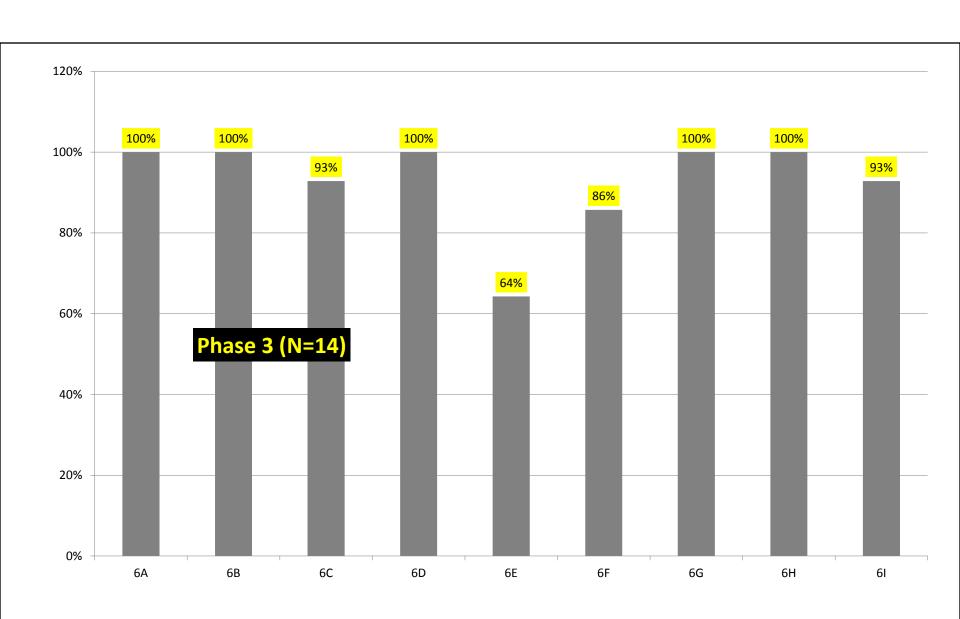
6A 6B 6C 6D 6E 6F 6G 6H 6I Totals % Std Co	ompleted
1 1 1 1 1 1 1 8 89	9%
1 1 1 1 1 1 1 1 9 10	00%
1 1 1 1 1 1 1 1 9 10	00%
1 1 1 1 1 1 1 1 9 10	00%
1 1 1 1 1 1 1 9 10	00%
1 1 1 1 1 1 1 1 9 10	00%
1 1 1 1 1 1 1 1 9 10	00%
1 1 1 1 1 1 6 6	7%
1 1 1 1 1 1 1 1 9 10	00%
1 1 1 1 1 1 1 1 9 10	00%
1 1 1 1 1 1 1 1 9 10	00%
1 1 1 1 1 1 1 8 89	9%
1 1 1 1 1 1 1 1 9 10	00%

# Health Homes at 100% (N=13)	% Health Homes at 100%	# Standards Completed (N=117)	% Standards Completed
10	77%	112	96%



6A	6B	6C	6D	6E	6F	6G	6H	61	Totals	% Std Completed
1	1	1	1		1	1	1	1	8	89%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1			1			5	56%
1	1		1		1	1	1	1	7	78%
1	1		1		1	1	1	1	7	78%
1	1	1	1		1	1	1	1	8	89%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1		1		1	1	1	1	7	78%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1		1	1	1	8	89%

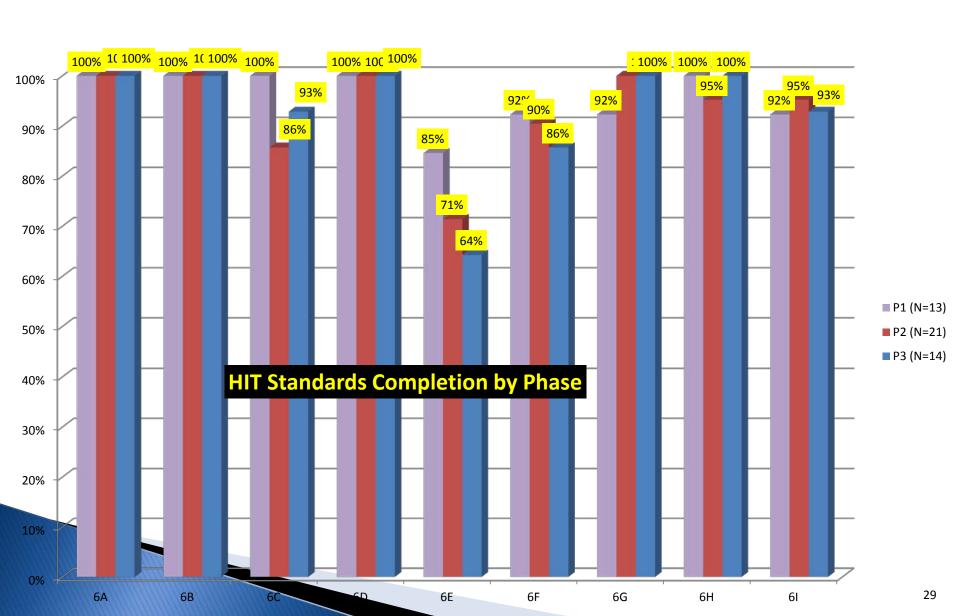
# Health Homes at 100% (N=21)	% Health Homes at 100%	# Standards Completed (N=189)	% Standards Completed
14	67%	176	93%



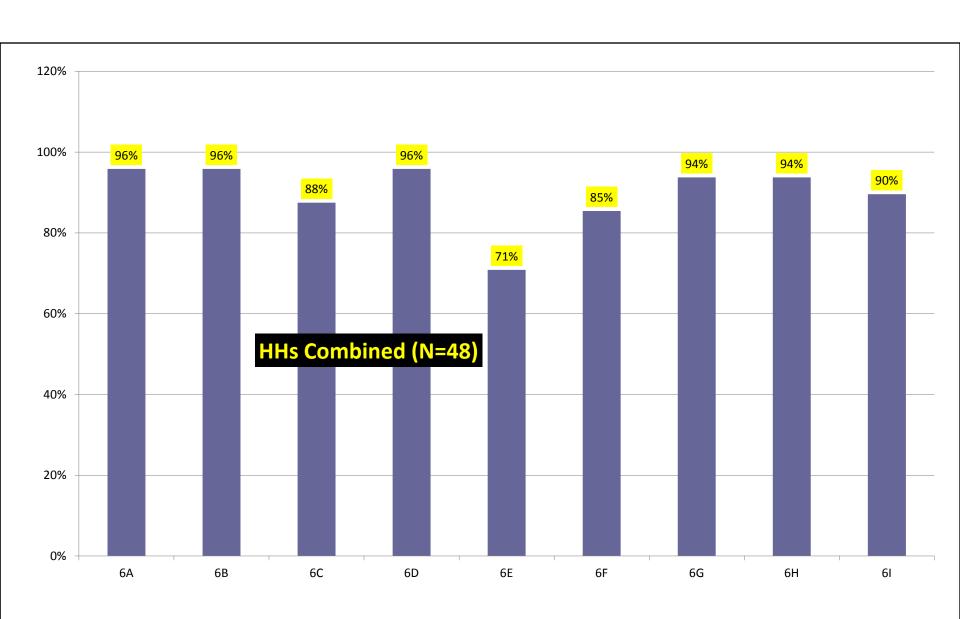
6A	6B	6C	6D	6E	6F	6G	6Н	61	Totals	% Std Completed
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1		1	1	1	1	8	89%
1	1	1	1	1	1	1	1	1	9	100%
1	1		1		1	1	1	1	7	78%
1	1	1	1		1	1	1	1	8	89%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1		1	1	1	1	8	89%
1	1	1	1	1		1	1		7	78%
1	1	1	1			1	1	1	7	78%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%
1	1	1	1	1	1	1	1	1	9	100%

# Health Homes at 100% (N=14)	% Health Homes at 100%	# Standards Completed (N=126)	% Standards Completed
8	57%	117	93%

HIT Status Comparison by Phase



Health Homes Combined



HIT Completion Information

# Health Homes at 100% (N=48)	% Health Homes at 100%
32	67%

Useful Contact Information

- Visit the Health Home website:
 http://www.health.ny.gov/health-care/medicaid/program/medicaid-health-homes/
 h homes/
 - Get updates from the Health Homes listserv. To subscribe send an email to: <u>listserv@listserv.health.state.ny.us</u> (In the body of the message, type SUBSCRIBE HHOMES-L YourFirstName YourLastName)
 - To email Health Homes, visit the Health Home Website and click on the tab "Email Health Homes"
 http://www.health.ny.gov/health-care/medicaid/program/medicaid-health-homes/
- Call the Health Home Provider Support Line: 518-473-5569