



**Department
of Health**

Medicaid
Redesign Team

Health Home Biweekly Webinar

Revised BH HCBS Workflow and
Performance Targets

April 27, 2016

Agenda

- Updates and announcements
- Final BH HCBS Plan Of Care workflow
- Managing Performance Targets
- Improving HARP Community Based Referral
- Clarification on Non Medical Transportation

NY HARP HCBS Eligibility and CMHA are BACK ONLINE !

New security enhancements include the following:

- 1) the addition of required fields for the member look up function to ensure the validation and authentication of members by date of birth and Client Identification Number (CIN)
- 2) an attestation that such information is the minimal necessary to support the role and job function of the user. Following the entry of the required search criteria and initiation of the search process, but before displaying any search results, the system will present an attestation confirmation message to the user.

“By clicking the attestation button below, I certify that I am an authorized user of this system acting in the ordinary course of business and that my organization has a legitimate need to view information related to {person’s name from search criteria} in connection with the provision or anticipated provision of services to that individual. I further understand that once I have entered this attestation, I and my organization will have access to confidential data that must be handled in accordance with either the individual’s consent or business associate agreement into which the organization has entered.”

New Access Requirements

All users will need to complete a multifactor authentication process. ***Please note, users will not be able to access the NY Eligibility Assessment and the Community Mental Health Assessment until this process is completed.***

After completing the multifactor authentication process , ***all users must go into the UAS-NY Training Environment and complete all updated and required training materials.***

Detailed step by step instructions have been sent to everyone with a system identified user role directly. In addition a message was sent out on the HH List Serve

Contacts to solve any access issues

- Questions regarding the UAS-NY Training Environment: 518-402-1021 or uasny@health.ny.gov
- Questions regarding the UA-Community Mental Health PILOT application: Center for Information Management (CIM) 734-930-0855 or helpstar@ciminc.com
- Questions regarding the assessment instruments: ua-cmh@omh.ny.gov

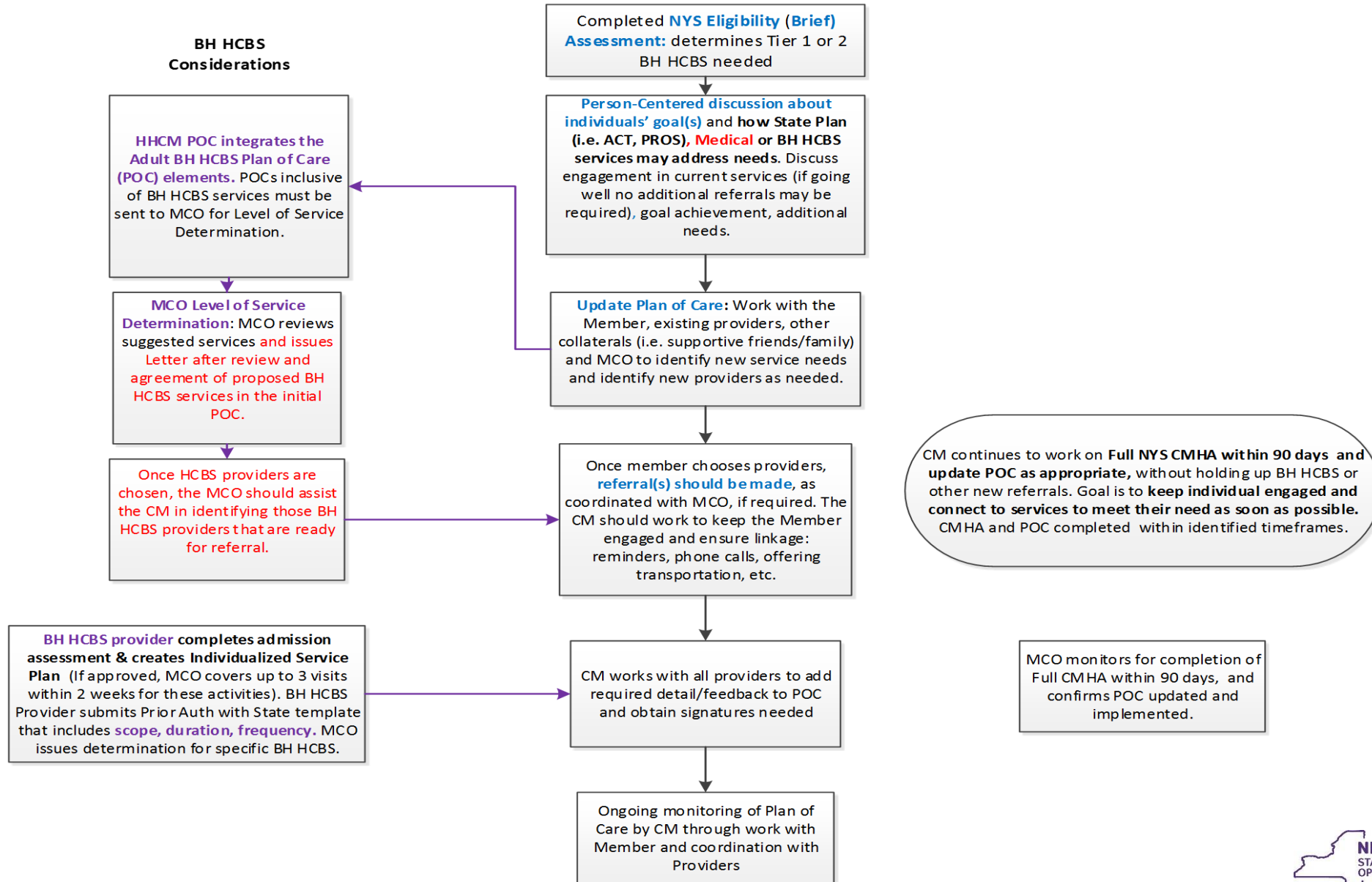
Meeting Frequency and Focus

- Increasing the frequency of this webinar to weekly
 - Streamline communication
 - Build operations agenda
 - Manage to performance targets
 - Provide rapid response to questions and information
 - Did I say manage to performance targets

Revised BH HCBS Workflow

Effective Immediately

From NYS Community Mental Health Assessment (CMHA) to Referral: Suggested Workflow Focused on Engagement for HARP members



Key Areas of Focus

Health Home- CMA

- Plan of Care should be shared as soon as the BH HCBS Eligibility is established
- Minimum requirements for Level of Service Determination in the POC are:
 - BH HCBS tier eligibility determination;
 - Goals identified related to the service type
 - Specific BH HCBS service recommendation

Managed Care HARP Plans

- Level of BH HCBS Service Determination can be approved prior to approval of the POC
- The HHCM and MCO will continue to work together to assure that the POC meets all Federal requirements
- BH HCBS services should not be delayed pending final approval of the POC- the Level of Service Determination is approved and therefore a BH HCBS service may be authorized if applicable

Opportunity

Health Home	HH Enrolled (HARP Enrolled) - Needs Assessment H1 or H4	HH Enrolled (HARP Enrolled) - Assessed	% HH and HARP Enrolled Brief Assessed (3/24 Report)
BRONX LEBANON HOSPITAL CENTER	1276	4	0.42%
COMMUNITY CARE MANAGEMENT PART	1639	40	2.34%
COMMUNITY HLTHCARE NETWORK AI	732	72	8.93%
COORDINATED BEHAVIORAL CARE IN	1844	317	14.69%
JACOBI MEDICAL CENTER	917	78	7.75%
MONTEFIORE MEDICAL CENTER	1445	100	6.62%
NORTH SHORE UNIVERSITY HOSPITA	274	11	3.74%
PRESBYTERIAN HSP CITY OF NY	55	1	1.79%
QUEENS COORDINATED CARE PARTNE	610	56	8.49%
SOUTHWEST BROOKLYN HEALTH HOME	1636	29	1.66%
ST LUKES ROOSEVELT HSP CTR	702	55	7.28%
Grand Total	11130	763	6.46%

Performance Targets

Increase POC exchange with MCOs

- Target: 10% of assessed HARP HH Enrolled Members by 5/9/16

NY HARP/HCBS Eligibility Assessment

- Target: Increase total assessed to 20% by 5/13/16

Technical Assistance

- Goal is to provide assistance to Health Homes in becoming High Performers - collaborative effort with State Partners, Health Homes, Care Managers and Plans
- Any issues questions or concerns should be communicated immediately to Health Home Team
- The Health Home Team will provide 1:1 information sessions with Health Homes and/or CMA's to address any further confusion and assist with problem solving
- Please do not hesitate to inform on any further issues that may impact this process
- Please call the ***Provider Line at 518 473-5569 if you wish*** to set a time to review data and targets
- Based on current data the Health Home Team will schedule time with specific Health Homes to establish clear performance targets

Enrollment

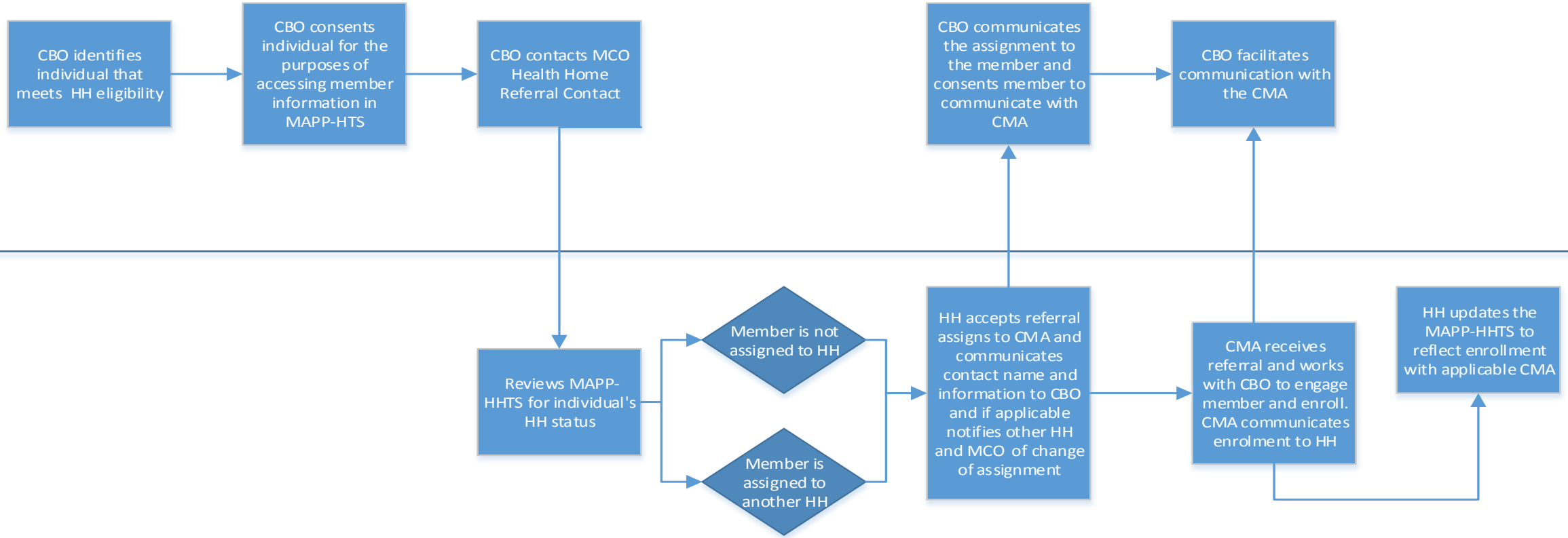
Community Based Referral Model

Community Based Referral to Health Home

Phase

CBO

Health Home



Leveraging Provider Support

- Where are members in Outreach and Hiatus ?
- What if there are opportunities to find members in Outpatient Clinics, PROS Programs, Community Residences?
- With MAPP-HHTS there is opportunity to search and identify assignment and HH segment detail with a consent- Health Homes and MCOs can assist in facilitating linkages from community to Health Home enrollment
- State Agency Partners have agreed to work with Community Based Providers to train on Health Home Eligibility and this proposed workflow

Proposing Scenarios

Provider talks with individual about the benefits of Health Home (HH)

Consent to contact the individual's Managed Care Organization (MCO) to determine whether the individual has already been assigned to a HH, or to obtain assistance from the MCO care manager about making a new HH referral.

AND/OR

- Send referral (with Consent) to any Health Home of individual's choice if assigned Health Home is not known.
- Once referral is accepted by the HH, the HH assigns individual to a Care Management Agency (CMA) or "downstream" care management provider.
- The CMA arranges for an intake with the individual / enrolls individual into the HH

OR

If the individual has a particular Care Management agency (CMA) in mind, consent to share referral with CMA. CMA can make referral to HH network internally

Feedback and Performance Targets

- Do you have a community based referral process that is working?
- Please consider how this process can work -
- How can this process be improved?
- Any volunteers to complete a PDSA ?
- Please submit feedback through the BML and select: Webinar Meeting in the subject line
- Enrollment Performance will continue to be managed within the Strategic Taskforce Meetings

Non-Medical Transportation for HARP Enrollees in NYC

General Designation Information

- **REMINDER:** To provide this service you must be or become a Medicaid transportation provider
- If you are NOT a Medicaid transportation vendor, you will be unable to provide Non-Medical Transportation
- In order to become certified by Medicaid, you must complete a New York State Medicaid Enrollment form at <https://www.emedny.org/info/ProviderEnrollment/transportation/index.aspx>

Non-Medical Transportation Services

- In addition to any medical transportation furnished under 42 CFR 440.17(a) in the State Plan, Non-Medical Transportation may be available to individuals receiving BH HCBS in HARPs and HIV SNPs
- Non-Medical Transportation will be paid Fee For Service (FFS), the same way regular Medicaid transportation is paid. Regular Medicaid transportation covers trips to and from Medicaid-covered medical appointments
- There are two types of Non-Medical Transportation:
 - Trips to and from BH HCBS that are included in the Plan of Care (POC)
 - Trips to and from non-HCBS destinations (e.g. job interview) that are time-limited/non-routine (with a start and end date) and specifically tied to a goal related to recovery from mental health or substance use disorders in the individual's POC (see the guidance manual for examples of qualifying trips)
- \$2,000 cost cap per individual per year – excludes public transportation and transportation to and from BH HCBS in the POC

Examples of Non-HCBS Locations Specifically Related to Goals in POC

Goal in Plan of Care	Non-Medical Location to Which Transportation May Be Requested
Obtain Employment	Job interview
Go back to school	College fair
Owning a pet	Go to a shelter to adopt an animal
Losing weight	Attend a wellness seminar
Get involved in the arts	Attend a play
Improve personal hygiene	Go to a barber/beauty shop for a hair cut
Be more physically active	Attend a dance class
Obtain High School equivalency certification	Attend a workshop to prepare for the GED test

- All goals are to be met within a specific timeframe. Requests for transportation to a service associated with the goal that are submitted outside the specified timeframe will not be considered.
- Non-Medical Transportation cannot be used for routine transportation to and from a job or school. For example, a participant may be transported to a job interview, but not to work on a daily basis. Similarly, a participant may be transported to a college fair, but not to classes on a regular basis. The frequency of these trips should be included in the plan of care with a specific timeframe defined including a start and end date.

Non-Medical Transportation Grid

- Health Home Care Managers are responsible for completing the “NYS Behavioral Health Home and Community Based Services (BH HCBS) Plan for Transportation Grid” (Grid) based on the BH HCBS and goals in an individual’s POC
- The Grid is only to be completed if an individual requires Non-Medicaid Transportation, and this grid should NOT include regular Medicaid transportation (i.e. trips to Medicaid-covered medical appointments)
- The care manager will send the completed Grid to the Managed Care Organization (MCO) along with the POC
- As soon as the POC is approved, the MCO is responsible for forwarding the Grid to the transportation manager (e.g. LogistiCare) to ensure that individuals’ non-medical trips (NMT) can be authorized. Note that the transportation manager also coordinates the transportation for other Medicaid covered transportation
- If the services or goals within the POC require NMT change, then the Grid needs to be re-submitted by the care manager to the MCO and from the MCO to the transportation manager

Non-Medical Transportation Grid

Attachment A: NYS Behavioral Health Home and Community Based Services (BH HCBS) Plan for Transportation Grid

1. Participant Information

Participant Name: _____ DOB: _____
 Care Management Program: _____ Medicaid ID: _____ Date of Plan: _____
 Address _____ City _____ County _____ Zip code _____

2. MCO Information

MCO _____ Telephone _____ Fax _____
 County _____ Address _____ City _____ State _____ Zip code _____

3. Transportation Provider Information

Transportation Provider _____ NPI _____ Telephone _____ Fax _____
 County _____ Address _____ City _____ State _____ Zip code _____
 Transportation Provider _____ NPI _____ Telephone _____ Fax _____
 County _____ Address _____ City _____ State _____ Zip code _____
 Transportation Provider _____ NPI _____ Telephone _____ Fax _____
 County _____ Address _____ City _____ State _____ Zip code _____

4. Non-Medical Transportation

Goal (from Plan of Care)	BH HCBS or Specific Activity/ Support/ Task	Type of Transportation Service Needed	Trip Destination/ Location	Start Date/ End Date	Frequency	Non-HCBS Trip?*
						Y / N
						Y / N
						Y / N

Date _____ Completed By _____ Telephone _____ Email _____ Fax _____

*Non-HCBS trips are subject to the \$2,000 per year per participant cap for Non-Medical Transportation. Trips to BH HCBS and trips using public transportation will not apply to the cost cap.

Which Mode of Transportation is Necessary?

- The same, appropriate mode of transportation used by the participant for standard medical trips should be used for non-medical transportation trips, and vice versa

Assessing the most cost effective and medically appropriate mode of transportation.

Medical Justification “2015” Form:

- Requires a medical professional to provide the mobility-related reason why the enrollee requires a specific mode of transportation
 - Reasons for decreased mobility could be that the enrollee is wheelchair-bound, underwent recent surgery to a limb, is blind, or has an unstable gate.
- Must be signed by a medical professional and sent to the transportation manager
- Reviewed, approved and filed by the transportation manager
- Audited by the Department and transportation manager
- Many individuals will already have this form on file if they are already receiving regular Medicaid transportation
- This form is not needed for public transit

Where to send completed grids

- **LogistiCare Solutions, LLC**

- Fax to (877) 564-5928, or
- Email to HARPNYC@logisticare.com
- Attn: HARP CARE PLAN GRID

Guidance for Non-Medical Transportation

- The “Guidance for Behavioral Health Home and Community Based Non-Medical Transportation Services for Adults in HARPs and HARP Eligibles in SNPs” can be found at the following link:
https://www.emedny.org/ProviderManuals/Transportation/PDFS/HARP_Guidelines_Non-Medical_Transportation.pdf
- The guidance document includes:
 - Definition of Non-Medical Transportation
 - Roles for Health Home Care Managers, MCOs and Transportation Managers
 - Guidelines for Non-Medical Transportation

Questions on Non-Medical Transportation in New York City

- Contact the State Transportation Team for general questions related to NMT:
MedTrans@health.ny.gov
- Contact LogisitiCare for specific questions in NYC:

Role	Name	Title	Email Address	Telephone Number
Primary Contact	Sofiya Samekhova	Utilization Review/RN Manager	Sofiya.samekhova@logisticare.com	(877) 564-5911 x2010
Secondary Contact	Allisha Rambharose	Healthcare Facilities Manager	Allisha.rambharose@logisticare.com	(877) 564-5911 x2008
Secondary Contact	Andrea Taiani	Director of Operations	andreat@logisticare.com	(877) 564-5911 x2002
Backup	Jennifer Halterman	Call Center Manager	Jennifer.halterman@logisticare.com	(877) 564-5911 x2006
Backup	Ricky Rodriguez	Transportation Network Manager	ricky.rodriquez@logisticare.com	(877) 564-5911 x2004
Backup	Eric Stein	General Manager	eric.stein@logisticare.com	(877) 564-5911 x2001