

Children and Youth Evaluation Service (C-YES) Program Overview

January 7, 2020



NYS Children's Waiver

- ➤NYS Children's Waiver began April 1, 2019 to provide a consolidated set of Home and Community Based Services (HCBS)
- ➤ Any child or youth under the age of 21 years old who wants or needs HCBS can be referred for HCBS eligibility determination
- Any child or youth can be referred for the Children's Waiver, whether they have Medicaid or not at the time of the referral
- Children and youth who become eligible and enrolled in the Children's Waiver must have care coordination as part of HCBS



HCBS Care Coordination

- Children and youth who are already enrolled in Medicaid who request or in need of HCBS, should be referred to Health Home for HCBS eligibility determination and care management
- Children and youth who are not already enrolled in Medicaid who request or in need of HCBS, <u>must</u> be referred to Children and Youth Evaluation Services (C-YES)
- ➤ Children and youth who do not want Health Home care management, can opt-out of Health Home and have C-YES provide their HCBS care coordination
 - Reminder: children and youth eligible and enrolled in HCBS must have care coordination from either Health Home or C-YES
- ➤ If a child or youth is receiving care management from Health Home and is at risk of losing their Medicaid, the child/youth **should not** be referred to C-YES. The Health Home care manager must assist the child/family with their Medicaid



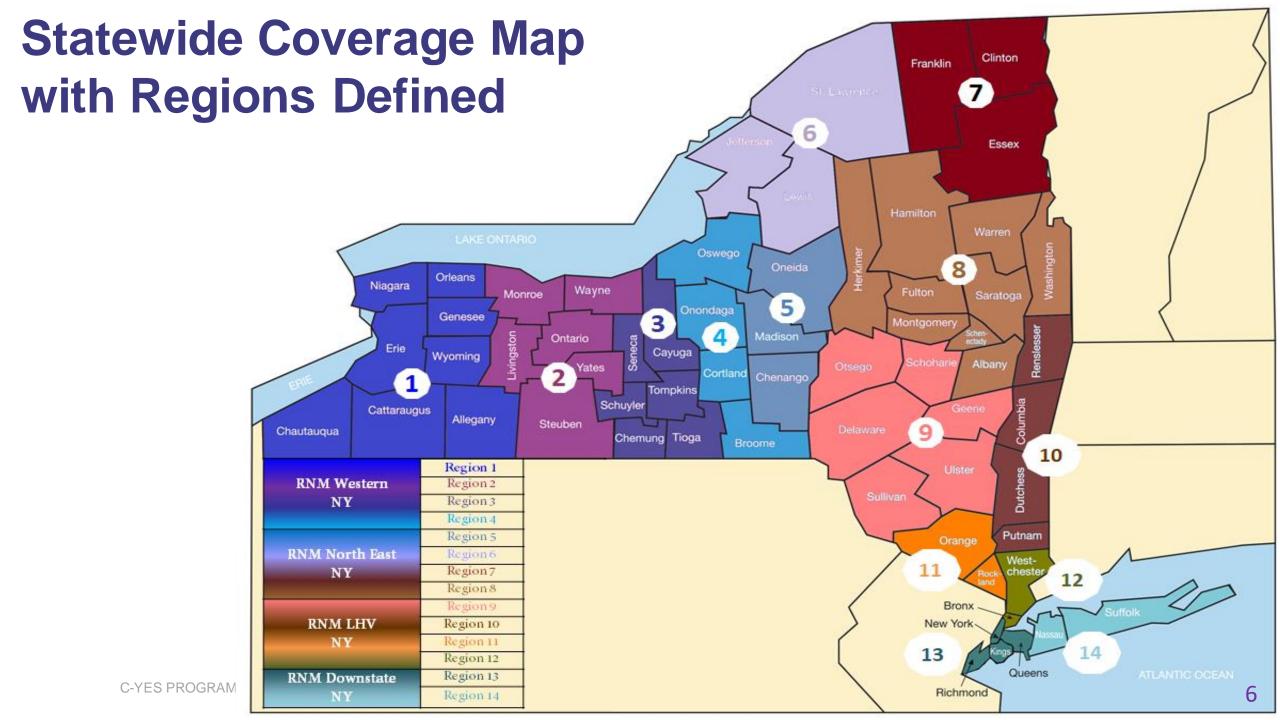


- ➤ We are a conflict-free statewide program that determines if a child or youth is eligible for Home and Community Based Services (HCBS)
- ➤ We provide person-centered Plan of Care (POC) development and HCBS service coordination to children and youth
- ➤ We provide education on other services: Adult Health Home (HH) & HCBS (transition age youth), Office for People With Developmental Disabilities (OPWDD), Children and Family Treatment and Support Services, State Plan services, Single Point of Access programs (SPOA). However, we do not perform service coordination for these services.
- ➤ We assist children and youth who are eligible for HCBS to apply for Medicaid

Our Goal



- Perform conflict free HCBS eligibility determinations for the children and youth of New York State
- Assist Consumers and Families through the eligibility process for HCBS, so that children and youth can stay in their homes and communities and prevent the need for institutional level of care
- Provide an alternative for HCBS Coordination for families opting out of Health Home Care Management (HHCM), as the State designated Independent Entity







We are a consumer-focused program and our hours of operation reflect our commitment to be available to families.

- C-YES Helpline: Monday- Friday, 8:30am-5:30pm; Saturday, 9am-12pm
 - **□** Contact Information:
 - CYESREFERRAL@MAXIMUS.COM
 - 1-833-333-CYES (2937)
- ➤ The Nursing Department is available outside of regular business hours to accommodate the needs of families



Nurse Evaluators (NEs)

Family Support Coordinators (FSCs)

- Ongoing supports and updates
- HH and HCBS provider selection
- Coordinating with the C-YES Field department for Medicaid
- Collaborating with Health
 Plans (for those enrolled in MMCPs)

- Informational Meeting
- HCBS Eligibility Assessment
- Plan of Care Development

Field Customer Service Representatives (FCSRs)

- Stationed throughout all counties
- Assistance with Medicaid application

Intake Coordinators (ICs)

- Referral Processing
- Initial Consumer/Family
 Outreach
- Scheduling
 the Informational Meeting

Consumers and Families

Quality Assurance

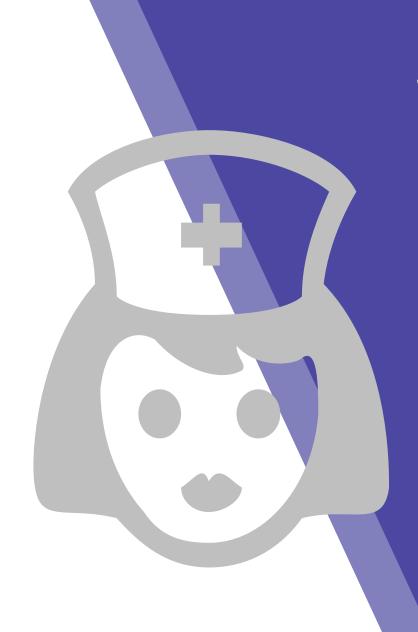
- Monitoring Consumer feedback
- Processing and responding to Complaints
- Identifying and Implementing Process Improvements

Family Support Center Staff

- The primary objectives for the Family Support Center are to be the first point of contact for families, to be a strong advocate and helpful resource to families, providers and Care Management Agencies (CMAs) and to work collaboratively with referents and Nurse Evaluators to support families
- These objectives will be facilitated through our administrative support helpline, scheduled reflective supervision, monthly quality assurance monitoring, retraining, education, and skill building
- All Family Support Coordinators (FSCs) are regionalized to provide continuity of care in the regions they serve



C-YES Helpline (833) 333-CYES (2937)



Nursing Department: Senior Nurse Manager (SNM) Regional Nurse Managers (RNMs) Nurse Evaluators (NEs)

The primary objectives for the Nursing Department are to conduct HCBS eligibility determinations in the community with families seeking HCBS eligibility, HCBS, and/or Health Home Care Management if not remaining with C-YES

 These objectives are facilitated through the recruitment of qualified nurses, scheduled supervision, quality assurance monitoring, retraining, education, and skill building.

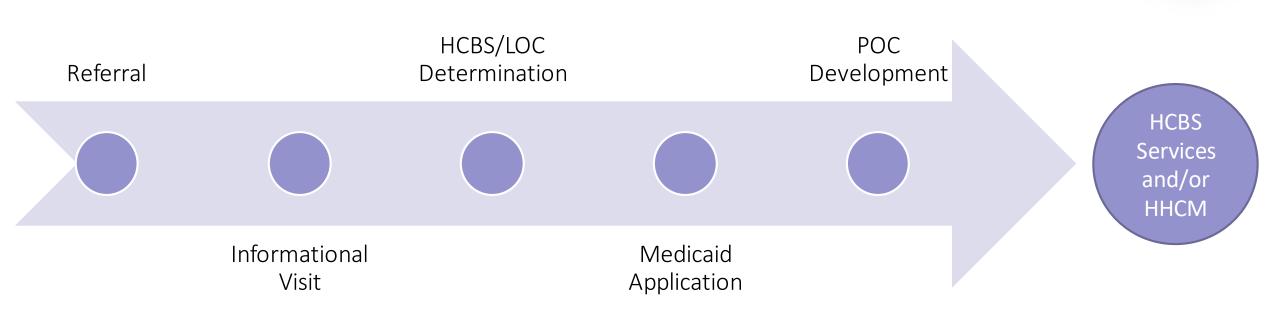
Quality Assurance and Training

- The primary objective for the Quality Assurance and Training (QAT) Department is to establish clear expectations on how the C-YES staff should perform their responsibilities
- The QAT Department will provide a clear definition of uniform excellence in the delivery of our services and will improve the quality of services when opportunities or deficiencies are indicated
- Quality Assurance (QA), Quality Control (QC), and Quality Improvement (QI) ensure our standards are met throughout every step of a work process. We utilize defined performance indicators and reports to measure and evaluate quality of the family support center, nursing department, mail house and customer satisfaction.



C-YES HCBS Process





Note(s): a) Families/Consumers with active Medicaid may opt to be referred to Health Home at any point in this process, if not initially chosen. b) Families/Consumers with active Medicaid who continue through the HCBS process with C-YES will not require a Medicaid Application appointment.

Referral to C-YES



- □ C-YES Referral Form
 - Available here: https://nymedicaidchoice.com/connecting-children-home-and-community-based-services
 - Minimum Referral Form Requirements: Child's Name, Primary Contact, and Consent Signature from adult child, parent, guardian, or legal representative
 - Referrals may be sent via secure email, fax, or mail
- ☐ It is strongly encouraged that the following is included:
 - The child/youth's SSN
 - Any available supporting documents
 - Referent Health Insurance Portability and Accountability Act (HIPAA)
 Release forms

Referral Received



- Referent is notified of referral received
- Progressive attempts are made at varying times and days to contact the Consumer/Family to confirm interest to proceed
- Once contacted, families are educated on the C-YES Process, roles, and expectations
- Information Visit is scheduled
- All families receive an educational package via mail that include our C-YES Steps
- Referent is updated on Referral status and assigned Family Support Coordinator
- Reminder call made before Information Visit

Informational Visit



- Education on C-YES and eligibility process for HCBS and available Care Management options
- Nurse Evaluator conducts intake and preliminary functional questionnaire
- Consent forms are completed
 - Referent added to Consent Forms, per family's request

 Documentation to support eligibility, target population, and risk factor(s) are collected

Preparation for HCBS Eligibility Determination



- Contact providers as needed to gather documents
- C-YES confirms all supporting documentation needed to conduct the HCBS/LOC Eligibility Determination are received
- Schedule HCBS Eligibility Determination visit with family
- Reminder call made before HCBS Eligibility appointment





- HCBS/LOC eligibility determination conducted in the Uniform Assessment System (UAS)
- Outcome provided to the families
 - Referent notified of outcomes (if referent communication was consented)
- Qualified Consumers:
 - Capacity Management Team (CMT) notification
 - Continued interest in HCBS with C-YES confirmed
 - Freedom of Choice form signature and next steps
- Ineligible Consumers:
 - Consumer/Family informed about the appeal and fair hearing process and alternative service options





- Children & Adult SPOA
- OPWDD Care Coordination Organization (CCO) & HCBS
- CFTSS/SPA
- Adult HHCM & HCBS
- AuntBertha.com
- **311 & 411**

Medicaid Application



- FSC performs phone outreach with family regarding Medicaid application scheduling and documentation requirements
- Completes Office of Health Insurance Programs (OHIP) (Eligibility Restriction Exception (RE) coding cover letter) for Medicaid application
- Schedules Medicaid application appointment at the home, in the community, or at the Local Department of Social Services (LDSS) office with field staff
- Provides family with instructions and contact information (regarding the Medicaid appointment)
- Reminder call made before the Medicaid Application Appointment

Medicaid Application Appointment



- Collect documents
- Assist with application completion
- Provide enrollment choice counseling
- Discuss next steps
- Answer questions
- Submit application to LDSS for Medicaid eligibility determination



Plan of Care Development

- Schedule meeting with the family
- A person-centered POC is developed in discussion with the family about their needs
- Assist the consumer with picking HCBS providers and services
- Determine if the consumer is opting into Health Home
- Explain next steps
- Answer questions





- Choice of Health Home or remaining with C-YES confirmed
- If HHCM, referral to HH/CMAs including a warm handoff
 - This may include referral back to a referring CMA, as per the family's request
- If the child/youth is enrolled in a Medicaid Managed Care Plan (MMCP), share the POC with the MMCP
- Sharing of documentation dependent on receipt of Consumer/Family consent

HCBS Coordination with C-YES

- ☐ If the family opts-out of HHCM
 - FSC assists with referring to HCBS Providers
 - NE quarterly POC Review and update
 - If enrolled with a MMCP, this is in collaboration with the MMCP following initial provider selection and linkage to service
 - Annual HCBS Eligibility Redetermination



Written materials purpose and standards

- Clear and concise communication to consumers is key for program success
- Messages are written in plain language that is easy to understand
- Messages communicate DOH policy for the C-YES program
- Materials are translated to Spanish, Russian, Chinese, Korean, Haitian Creole and Italian

Types of Communication

- Notices Welcome Notices and HCBS Eligibility Determinations
- Forms Referral Forms and Consent Forms

Flyers, website and other educational materials

Visit us on the Web!

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HCBS LOC Eligibility Assessments



April 1, 2019 - December 31, 2020

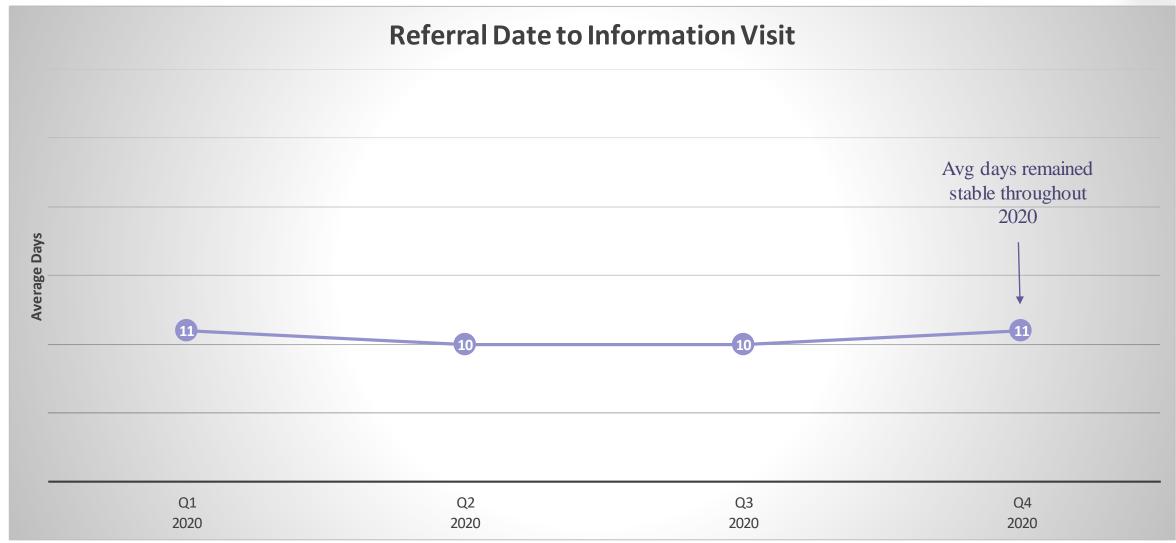
By Target Population

Target Population				
Serious Emotional Disturbance (SED)		58.98%		
Medically Fragile (MF)		40.89%		
Developmental Disability & Foster Care (DD/FC)		0%		
Developmental Disability & Medically Fragile (DD/MF)		0.13%		
Total	763	100%		

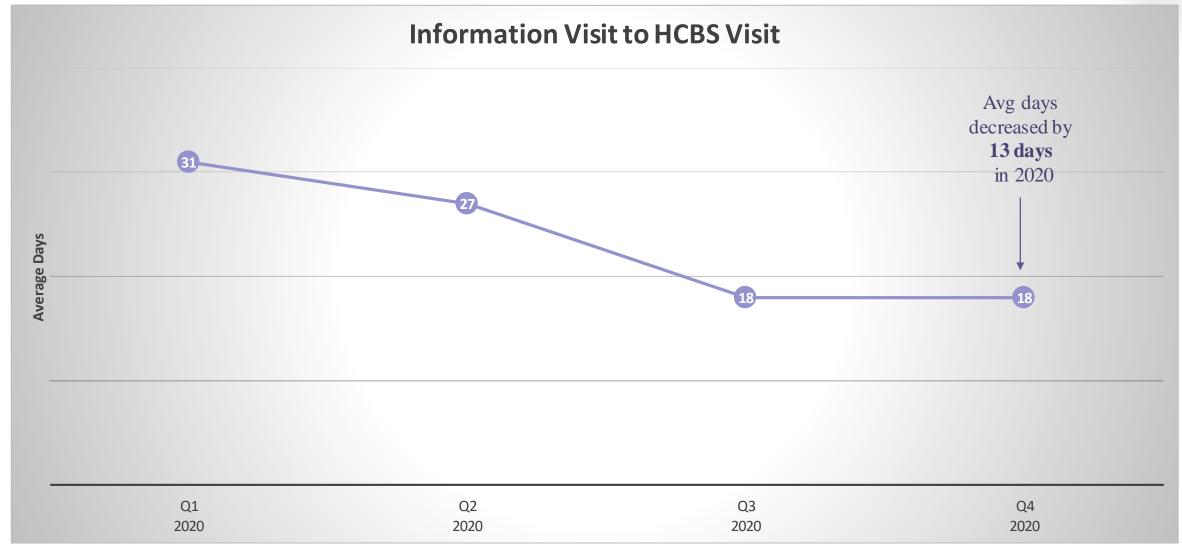
By Assessment Type

Assessment	Eligible	Not Eligible	Total
C-YES Assessment	733 (96.07%)	30 (3.93%)	763

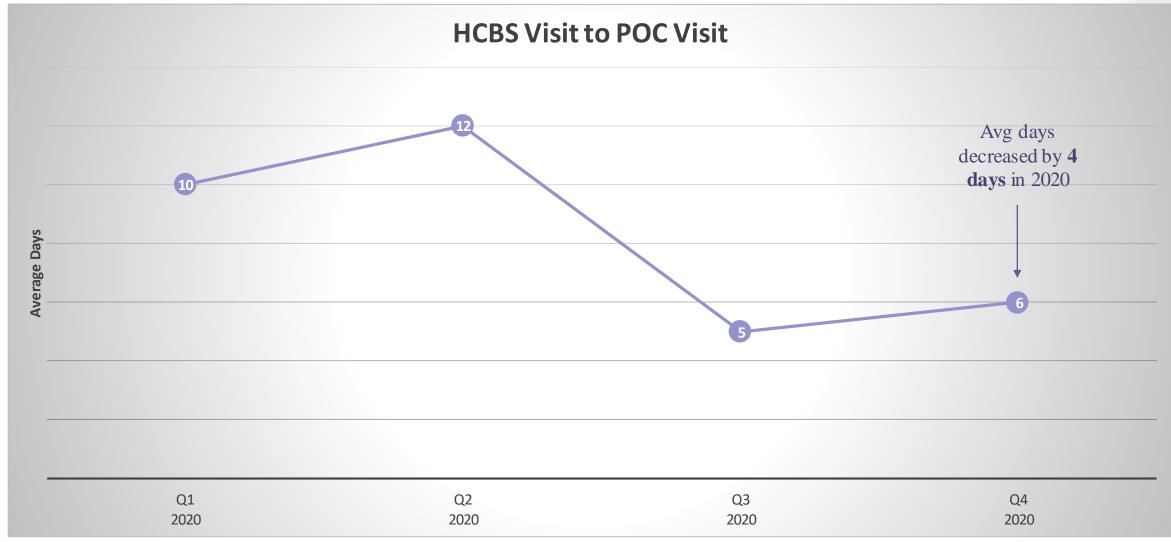




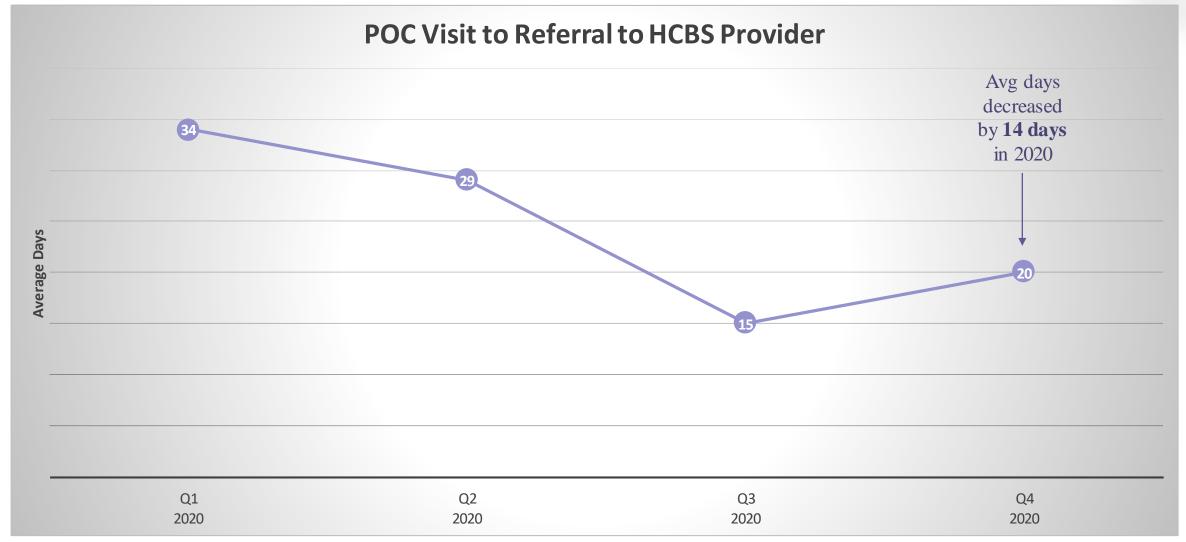




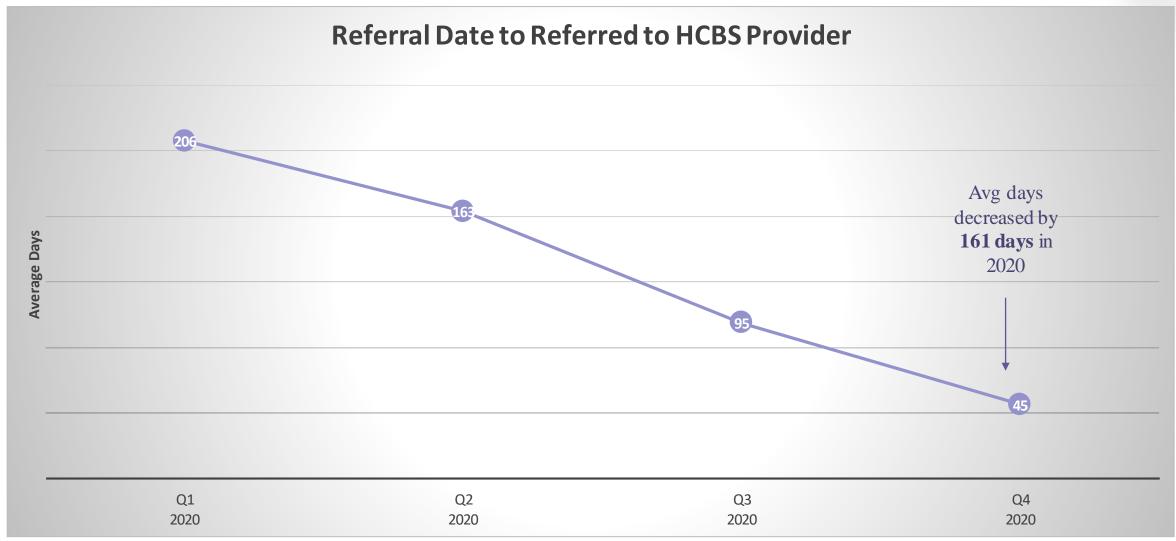
















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When working with a particular family, don't hesitate to contact us with questions about the process or timeframes



For any C-Yes or MCO concern email the NYS Department of Health at managedcarecomplaint@health.ny.gov

All Children's Waiver HCBS questions and concerns, should be directed to the NYS Department of Health at BH.Transition@health.ny.gov mailbox or 518.473.5569

Questions and Comments

