



Department
of Health

Office of
Mental Health

Office of Addiction
Services and Supports

Office of Children
and Family Services

Office for People With
Developmental Disabilities

1915(c) Children's Waiver Feedback Session

For Home and Community Based Services Providers

September 2021

Agenda

- ✓ Children's Redesign Vision and Implementation Timeline
- ✓ Changes & Improvements
 - ✓ Policies/Guidance, Education, and Streamlining
 - ✓ Implemented Changes
 - ✓ Pending Amendment
 - ✓ Proposed Changes
- ✓ 1915(c) Children's Waiver Feedback
 - ✓ Feedback from HCBS providers
- ✓ Appendix



Vision and Implementation Timeline

September 2021



Department of Health

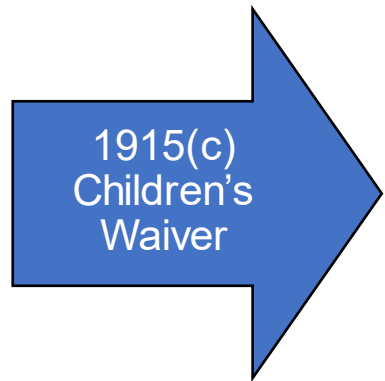
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Children's Redesign Vision

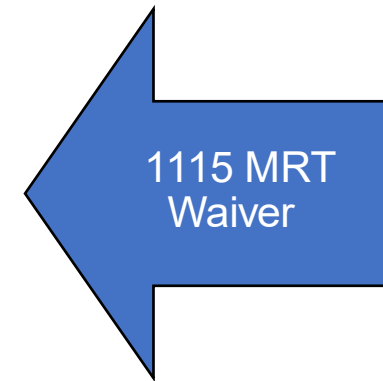


The Children's Waiver consolidated the six previous children's HCBS waivers (approved 4/1/2019)

Together, these waivers provide Medicaid eligibility for children meeting the Home and Community Based Services (HCBS) eligibility under the Children's Waiver, allowing for:

- Streamlined enrollment into the Children's Waiver
- Access to all HCBS as needed
- Greater flexibility for HCBS to be delivered in natural environments for better outcomes
- One State Medicaid agency with partner agency team to support delivery, monitoring and oversight
- Retain eligibility for Medicaid if "Family of One", eligible for the Children's Waiver, and receiving required services (such as care management)
- Increased capacity for enrollment / eliminate waitlists for waiver enrollment

One Streamlined Process For All Populations



The 1115 MRT waiver amendment allowed for "Family of One" budgeting to children meeting 1915(c) waiver criteria (approved 8/2/2019)



Children's Waiver Development and Continuity of Care

The New Children's Waiver Structure

- To ensure Continuity of Care for children/youth that were already enrolled in the previous 6 waivers;
 - Processes and forms are similar to the previous waiver processes
 - A number of the continued processes and forms are Federal Requirements
 - Services are the same and expanded
 - Some of previous waiver services are now in Children and Family Treatment and Support Services
- Wherever possible, changes to streamline processes and forms can be reviewed and updated
 - Several Amendments to the Children's Waiver has occurred due to stakeholder feedback



Children's Timeline

Sept-Dec 2018 - Children's Waiver Implementation Training and Preparation

Jan-March 2019 - Transitioning of Existing Waiver Children to the New Children's Waiver

April 1, 2019 - Implementation of the New Children's Waiver

October 1, 2019 - Children's Waiver Services carved into Medicaid Managed Care

March 2020 - COVID and COVID Guidance/Exceptions Issued

Jan-April 2021 - First Case Review/audit for 2019-2020 Children's Waiver year

June-Nov 2021 - Second Case Review/audit for 2020-2021 Children's Waiver year

Oct-Nov 2021 – First Report to Federal Centers for Medicare and Medicaid Services (CMS) due

June 2021-Feb 2022 – Drafting Waiver Renewal for Approval

April 1, 2022 – Renewal for 5 years Children's Waiver to begin after CMS approval

Changes & Improvements

September 2021



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Overview of Policies/Guidance, Education, Streamlining


20

Webinars



8

Resources




22

Policies/Guidance



9




















Forms



See appendix for details

Provided Education – HCBS Webinars

 Completed Webinars

HCBS Overview	LOC/Eligibility Determination	Waiver Enrollment Activities	Plan of Care & Service Delivery	Waiver Operations	Maintaining Waiver Enrollment	Transfer / Disenroll
 <u>Understanding Medicaid</u>	 <u>Critical Incident Reporting, Grievances and Complaints</u>	 <u>Participant Rights and Choice</u>	 <u>Plan of Care/Person-Centered Planning Requirements</u>	 <u>IRAMS User Intro for HHCM/CMA's</u>	 <u>Initiating and Maintaining OPWDD ICF/IID LCED</u>	 <u>Waiver Enrollment and Disenrollment</u>
HCBS Provider Requirements for Designation	 <u>C-YES – the Role of the Independent Entity</u>	 <u>Conflict Free Care Management</u>	Service Delivery Requirements and Definitions	 <u>IRAMS User Intro for HCBS Providers/C-YES</u>		 <u>Transfer Process Between the Children's and OPWDD Waiver</u>
 <u>Medicaid and the Children's Waiver</u>	 <u>HCBS LCED Process</u>	 <u>C-YES and HH/C-YES Transfer Policy</u>	 <u>Health and Safety Planning</u>	 <u>Modifications (E/V) and Assistive Technology Updated Process for HHCM/C-YES</u>		
	 <u>Collaboration between OPWDD and Children's Waiver for Eligibility</u>	 <u>Capacity Management and Verification of Enrollment by RE: K Code</u>	Bereavement Services	 <u>Modifications (E/V) and Assistive Technology Updated Process for LDSS</u>		

Required for Both
Optional for Both
Required for only HCBS Providers
Required for only Health Home Care Managers

Recordings and PDFs of the completed webinars can be found here:
https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/care_management.htm

Implemented Changes

- **Respite: revised supervisor qualifications** – in an OPWDD-certified setting, supervisors in the provision of Respite in the Children’s Waiver must have over 3 years’ experience in the certified setting and such provision is under the oversight of a licensed professional, Qualified Intellectual Disabilities Professional (QIDP), or a master’s level professional in a Behavioral Health field.
- Clarified that **Care Managers will meet regularly with waiver participants** in a manner and frequency that is consistent with the participant’s Health Home acuity level.
- **Palliative Care – Bereavement and Expressive Therapies**: added generic provider agency qualifications – practitioners must work within a child serving agency or agency with children’s behavioral health and health experience, designated through the NYS Children’s Provider Designation Review Team to provide the services referenced in the definition. This requires agencies to have the appropriate licenses, certification, and/or approval in accordance with State designation requirements by OMH, OASAS, OCFS, or DOH.



Implemented Changes (cont.)

- **Clarified provider qualifications** for Palliative Care - Massage Therapy and Pain & Symptom Management.
- Expand the **definition of Licensed Practitioner of the Healing Arts (LPHA)** to include LPHAs who have the ability to diagnose within their scope of practice under NY State law *or who are under supervision of an LPHA who has the ability to diagnose within their scope of practice under NY State law.*
- **Removed duplicate documentation of the LPHA risk factors form** being completed after the initial eligibility determination without a break of HCBS.
- Updated the **definition of Adaptive and Assistive Equipment** – removing references to service animals that are not consistent with the American Disabilities Act (ADA). Note that the definition *will* continue to cover the reimbursement for service dogs.



Pending Amendment

- **Adjusted the Respite and Palliative Care rates** to align with qualifications.
- Modification to the terminology *Assistive and Adaptive Equipment* to ***Assistive and Adaptive Technology***, to align requested terminology.
- **Combined Caregiver/Family Support Services and Training (CFSS) with Community Self-Advocacy Training and Supports (CSAT)** to allow broader provider qualifications for the activities of both of the former services, which are now consolidated to ***Family/Caregiver Support and Advocacy***.
- **Clarified palliative care counseling assessments and plan of care development** for six months and ensure that certain administrative duties are performed (by the HHCM) for additional one month when a child on the waiver passes away.
- **Enhance rates** consistent with the American Rescue Plan spending plan.

**Currently pending CMS approval*



Proposed Changes for Waiver Renewal

- **Remove and update all Waiver language** specific to transitioning from the previous waiver or the Department of Health Care at Home waiver.
- **Eliminating the need for an LPHA form** when HCBS referrals for a child/youth being discharged from an institutional level of care (i.e., hospitals, residential, nursing homes, psychiatric centers), as long as all critical waiver eligibility information is obtained.
- Change **Health Home Face to Face (F2F) monitoring requirements** for children and youth who have numerous providers involved in their lives. This will allow children and youth with high acuity to safely reduce the number of in-person contacts required by care managers based on an assessment of Risk/Safety.



Proposed Changes for Waiver Renewal cont.

- Implement flexible funding of **Participant-Directed Goods and Services** to permit families to purchase services and programming supports such as respite camps.
- **Expand Respite** to include Medical Respite for children/youth who have complex medical needs.
- **Enhance Peer and Family Support service credentialing/training** specific to the Medically Fragile and Developmental Disabilities population.
- **Implement Transition Services and Coordination** supportive services to improve transitions for children from Institutional Levels of Care to Community Based Services and residences.
- **Clarify remote monitoring and telehealth requirements.**



Children Waiver Renewal Feedback

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Children's Waiver Feedback from HCBS Providers

Topic: Service Delivery

- Aligning CFTSS and HCBS
- Finding and maintaining staff
- Continuing Telehealth
- Intensify care coordination

Topic: Program Design

- Leave caregiver and community advocacy separate
- Recalculate actuarial assumptions based on actual utilization
- Should have more opportunities to consult with the care managers

Topic: Reporting Requirements

- Eliminating multiple state agency involvement
- Reducing paperwork qualifications and reporting
- Do not require HCBS Authorization form



Children's Waiver Feedback from HCBS Providers (cont.)

Topic: Referral Processes

- Could establish auto-enrollment by characteristics, utilization, and critical time needs
- Could create a system that shows what services children are enrolled in
- Simplify the referral process
- Care managers do not always complete the process of getting HCBS for their child/youth

Topic: Practitioner and Supervisor Qualification

- Begin to require Peer Certification for CFSS providers and supervisor
- Add flexibility and address workforce shortages
- Required qualifications for HCBS providers don't always reflect best provider of the service

Topic: Operational Administrative

- Begin reimbursement for time spent on administrative duties
- Reimbursement rates for HCBS are not sustainable

Topic: Eligibility Criteria and Processes

- Take too long for service approval
- Increase criteria



Children's Waiver Feedback

Provide
Specific
Information
and Details



Share your
Ideas and
Solutions

Please share other feedback and ideas not yet discussed.



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Provide Feedback and Ideas

- To provide more feedback and ideas for the Children's Waiver Renewal, please use the survey posted on the website, as seen in the image below.

You are Here: [Home Page](#) > [1915\(c\) Children's Waiver and 1115 Waiver Amendments](#) > [1915c Children's Waiver Renewal](#)

1915c Children's Waiver Renewal

Provide feedback for the 1915(c) Children's Waiver Renewal:

The purpose of this survey is for stakeholders to share suggestions, ideas, and solutions related to the 1915(c) Children's Waiver.

- [1915\(c\) Children's Waiver Renewal Feedback Survey](#)



- Survey link: [1915\(c\) Children's Waiver Renewal Feedback Survey](#)
- This survey will close on September 30th, 2021.*

Encourage Children's Waiver Participants & Families to provide Feedback

- NYS DOH would appreciate your assistance - please share the below with the families that you work with and encouraging them to attend one of the Consumer Feedback Sessions to share their experience and any ideas they may have for improvement.

Tuesday September 28th 5:30pm – 6:30pm –
[Register Here](#)

Wednesday September 29th 10:00am – 11:00am –
[Register Here](#)

Consumer Feedback may also be submitted until September 30, 2021 via the survey, please feel free to share with families and participants.



Appendix: Changes & Improvements – Detail

September 2021



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Provided Guidance & Information

HCBS Children's Manual Update

- **Sections added include:**
 - Outsources Administrative Functions Section
 - Re-Designation Section
 - De-Designation Section
 - Electronic Visit Verification Section
 - CMS Final Rule on HCBS Setting Section
 - Consolidated Fiscal Report Section
 - HCBS Disenrollment section
 - Discharge from HCBS Process section
 - Transitional Age Youth section
 - HCBS Barriers Access Survey section
- DOH will post a “Guide to Edits” with the release of the updated Manual, which will show the addition of the new sections as well as language updates.



Provided Guidance & Information (cont.)

Policies & Guidance created and/or updated:

- [HHSC Grievances and Complaints Policy](#)
- [HCBS Providers Grievances and Complaints Policy](#)
- [HCBS Provider Designation and Re-Designation Policy](#)
- [HCBS Enrollment Policy](#)
- [HCBS Disenrollment Policy](#)
- [HCBS Provider De-Designation Procedure](#)
- [HCBS & CFTSS Timely Claim Filing Guidance](#)
- [Continuity of Care for CFTSS and HCBS](#)
- [Participants Rights and Responsibilities Policy](#)
- [Health Home/C-YES Transfer Policy](#)
- [EMod, VMod, and AT Authorization Policy for Care Managers/CYES](#)
- [Pre-Project Evaluation Guidance](#)
- [21ADM-01 Children's Waiver AT, EMods, and VMods Authorization](#)
- [HCBS Provider Incident Reporting Policy](#)
- [EMod/VMod/AT Policy](#)
- [EMod/VMod/AT ADM](#)
- [Transfer Referral Process between C-YES and HHSC Policy](#)
- [HCBS Versus State Plan Services Delivered During School/Day Time](#)
- HHSC Transitional Age Youth Policy (coming soon)
- HCBS Provider Transitional Age Youth Policy (coming soon)
- HCBS Notice of Decision Policy (coming soon)
- HCBS Documentation Policy (coming soon)



Provided Guidance & Information (cont.)

The Children's Waiver Amendment includes:

- Modification to the terminology Assistive and Adaptive Equipment to Assistive and Adaptive Technology, to align requested terminology.
- Adjustments to Respite rates to align with the provider qualifications. This adjustment has already been implemented.
- Combining of two services: Family/Caregiver Support Services with Community Advocacy and Support into a single service Family/Caregiver Support and Advocacy.
- Allowing a family to receive palliative care counseling for up to 6 months after a child passes away, while ensuring that certain duties performed by Health Home care managers can be paid for an additional month.
- Updates to rate methodology palliative care and bereavement.

For more information refer to [1915\(c\) Children's Waiver Amendment](#)



Streamlined the Process & Procedures

Forms created/updated:

1. [Freedom of Choice](#) (translated in 11 languages)
2. [Health Home Care Management/C-YES Referral for Home and Community Based Services \(HCBS\) to HCBS Provider](#)
3. [Notice of Decision For Enrollment or Denial of Enrollment](#) (translated in 11 languages)
4. [Notice of Decision For Discontinuance](#) (translated in 11 languages)
5. [Serious Emotional Disturbance \(SED\) LPHA Attestation](#)
6. [Medically Fragile \(MF\) LPHA Attestation](#)
7. [Developmentally Disabled who are Medically Fragile \(DDMF\) LPHA Attestation](#)
8. [Description and Cost Projection Form](#)
9. [Final Cost Form](#)



Provided Education – Public Facing Materials

Materials created:

1. [HCBS Care Management Brochure](#)
2. [Children's Waiver Participant: Rights & Responsibilities Fact Sheet](#)
3. What is an EMod/VMod/AT Brochure (coming soon)
4. Three (3) EMod/VMod/AT Process Info Sheets (coming soon)
5. [E/V Modification and AT Pre-Project Evaluation FAQ](#)
6. [IRAMS FAQ](#)
7. Other FAQ's coming soon



Appendix

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Resources and Questions

- HHCMs and HH CMAs should first talk with their Lead Health Home regarding questions and issues they may have
- Questions, comments or feedback on Health Homes Serving Children to: hhsc@health.ny.gov or contact the Health Home Program at the Department of Health at 518.473.5569
- Specific Questions/Comments regarding Transition services BH.Transition@health.ny.gov
- Subscribe to the HH Listserv http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/listserv.htm



NYS DOH Website

Find guidance, policies, forms, webinars, and more on the NYS DOH 1915c Children’s Waiver webpage located at, https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/1115_waiver_amend.htm

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1915(c) Children’s Waiver and 1115 Waiver Amendments

As part of the Children’s Medicaid System Redesign, the 1915(c) Children’s Waiver and 1115 Demonstration Waiver work together to offer an array of services to provide the communities in the least restrictive settings. The goals of the Children’s Waiver are to keep children/youth on their developmental trajectory, identify needs early and intervene to maintain accountability for improved outcomes and delivery of quality care, and make more services available to children/youth from birth to age 21.

This site provides information related to the Children’s Waiver – including guidance and resources for providers, care managers, managed care organizations, families, and BH.Transition@health.ny.gov

IMPORTANT: Please visit our main Health Home page for COVID-19 Updates and Policy Guidance

CANS-NY Information and Resources can be found on the Health Home Serving Children page

<ul style="list-style-type: none"> Home Children’s Medicaid System Transformation—Webinars/Trainings/Timelines Children and Family Treatment and Support Services 1915(c) Children’s Waiver and 1115 Waiver Provider Designation Managed Care Organization (MCO) Qualification Process Billing Guidance Information for Consumers/Medicaid Recipients Children’s Medicaid Redesign Team (MRT) 29-I Health Facility (VFCA Transition) Children’s Health Homes Links/Learn More 	<p>Overview of 1915c Children’s Waiver and 1115 Waiver</p>	<p>Family and Consumer Information</p>	<p>Children’s HCBS Waiver Provider Guidance, Policies, & Training</p>	<p>Children’s HCBS Manuals and Rates</p>
	<p>Capacity Management</p>	<p>Eligibility</p>	<p>Plan of Care</p>	<p>Care Management Guidance, Policies, & Training</p>
<p>Adult Behavioral Health</p> <ul style="list-style-type: none"> Home MRT BH Subcommittees Archive Behavioral Health Home and Community Based Services (BH HCBS) Health Homes for Individuals in HARP and HARP Eligibles in HIV 	<p>Child and Youth Evaluation Services (C-YES)</p>	<p>EMods, VMods, AT, & Non-Medical Transportation</p>	<p>OPWDD Resources</p>	<p>Archive</p>

Department of Health Complaints

- Enrollees and providers may file a complaint regarding managed care plans to DOH
 - 1-800-206-8125
 - managedcarecomplaint@health.ny.gov
- When filing:
 - Identify plan and enrollee
 - Provide all documents from/to plan
 - Medical record not necessary
- Issues not within DOH jurisdiction may be referred
- DOH is unable to arbitrate or resolve contractual disputes in the absence of a specific governing law
- File Prompt Pay complaints with Department of Financial Services:
<https://www.dfs.ny.gov/insurance/provlhow.htm>





Referral Form Instructions

- The Children and Youth Evaluation Service (C-YES) accepts referrals from individuals and providers including a parent, wider family member, doctor, therapist, school guidance counselor, CBOs and others:
- Individuals and families should call C-YES so that we can send you a Referral Form and a pre-paid return envelope in the mail right away! You can mail back the form in the envelope at no cost to you. Call C-YES at 1-833-333-CYES (1-833-333-2937). TTY: 1-888-329-1541
- Providers and Organizations with secure email protocols can download the Referral Form below. Return the form to: CYESREFERRAL@MAXIMUS.COM. Be sure to include the child/youth's name and contact information.
- [C-YES Referral Form](#)

