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State Discussion with Children's Waiver HCBS Providers

May 2022

Purpose

• To have an open dialogue between the State and HCBS Providers to communicate issues and concerns.

• HCBS providers to have the ability to discuss barriers and be a part of the problem-solving discussion.

• The State to have the ability to share upcoming changes, guidance, information, and to obtain feedback directly from the HCBS Providers.



Agenda

- \checkmark Case reviews, physical exams, qualifications, and training reporting
- ✓ Capacity Tracker Survey Reminder and Feedback
- ✓ eFMAP Updates
- ✓ 1915(c) Waiver Renewal and Amendment
- ✓ Building Capacity
- ✓ Manual Updates
- ✓ Feedback regarding supports HCBS providers need (policy/guidance, training, other requests, etc.)
- ✓ Future Meetings & Contact Information

NYSTEC Case Review Process

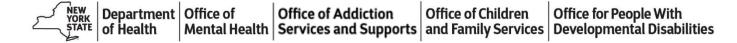
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Capacity Tracker Survey Reminder and Feedback

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Capacity Tracker Survey Reminder

- The next Children's Tracker Survey Due Date is Friday at 11:59pm on May 27th.
- All HCBS Providers are required to submit capacity survey information via the Children's Service Capacity Tracker located in IRAMS.
- Surveys must be submitted every three weeks.
- If you are having trouble accessing the Children's Service Capacity Tracker please email <u>BH.Transition@health.ny.gov</u>



Capacity Tracker Feedback Reminder

- The State would like to solicit feedback from those working within the system regarding usability, the system assist with monitoring referrals for services, waitlist information, and workflow, and that the guidance and requirements are clear.
- Feedback should be submitted to the <u>BH.Transition@health.ny.gov</u> inbox no later than **Monday May 23, 2022**.

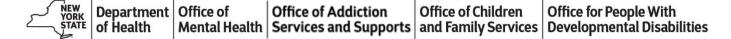
The feedback can be related, not but limited to, the below categories:

- The Children's Capacity Survey
 - Usability of the system
 - Information collected
- The Children's Capacity Waitlist
 - Usability of the system
 - Information collected

- Updates, communications, and guidance
- Reports
- Share of ideas or other functionality that would be helpful



eFMAP Updates



eFMAP Children's Activities – Spend Plan Updates

- The American Rescue Act for the Public Emergency allows NYS to receive additional funding called "enhanced Federal Medical Assistance Percentages (eFMAP)".
- This additional funding is to enhance services and service delivery to children and families.

Retroactive Rate Enhancements

• NYS is increasing service rates retroactively for previously claimed services back to April 1, 2021 and continue funding until September 30, 2022. *There is more information on the next slide.*

Funding for IT Infrastructure and Workforce

- Separate from the rate increases, funding for workforce investment and IT infrastructure will also be allocated across unique providers (CFTSS, HCBS, 29-I,).
- Payments for IT Infrastructure and Workforce funding will be made through the Medicaid Managed Care Plans (MMCPs) and the approval process of a "Directed Payment".

eFMAP Children's Activities – Retroactive Rate Adjustments

Per the announcement on February 18, 2022, <u>Changes Regarding Rates for Children's Services</u>, the below timeline demonstrates when providers can anticipate receipt of funds for the rate adjustment.*

NYS DOH understands that some providers have received funds but not all, **If you do not receive retro* funds by the end of May please reach out—the last checks should arrive by the end of the month

Program	FFS Rate Distribution	MMCP Rate Distribution
Home and Community-Based Services (HCBS)	5/27/2022	5/27/2022
Children and Family Treatment and Support Services (CFTSS)	5/27/2022	5/27/2022
Pending additional approval and subject to change		
Article 29-I Health Facility Core Limited Health Related Services (per diem)	TBD	TBD

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eFMAP Kid's Activities – UPDATED Timeline

The table below is an <u>Approximate Timeline</u> for IT Infrastructure and Workforce funding. *Please note this timeline has shifted since we first shared the information.* NYS DOH will continue to keep stakeholders up to date with any changes to this timeline.

Date	Action
March 31, 2022	DOH submits Preprint to CMS
May 31, 2022	DOH sends attestations to providers for completion
June 10, 2022	Providers complete & return attestation to DOH
June 15, 2022	DOH sends letters notifying providers of award amounts
July 15, 2022	DOH sends payment schedule notification to MMCPs and providers & award amounts disbursed

1915(c) Waiver Renewal

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Children's Waiver Renewal – Temporary Extension

- New York State's request for a temporary 90-day extension for the 1915(c) Children's Waiver has been **approved** by Centers for Medicare & Medicaid Services (CMS).
- The Children's Waiver was currently scheduled to expire on March 31, 2022, and this temporary extension allows the Children's Waiver to continue operating through **June 29, 2022.**
- This temporary extension provides the State with additional time to appropriately address all of CMS' feedback regarding the programmatic, fiscal and quality changes identified in the waiver renewal application.
- The State and CMS will continue to collaborate to ensure that no violations of Section 9817 of the American Rescue Plan Act (ARPA) exist and that the State submits an approvable renewal application.
- An announcement about the temporary extension was shared with HCBS providers and other stakeholders on April 4, 2022.

Additional Waiver Items

- Via a subsequent amendment planned in the summer 2022, the following additions will also be made in the coming months:
 - $\circ~$ Addition of Goods and Services
 - o Medical Respite
 - o Day Habilitation Tier 2
 - Transitional Service Coordination
 - o Rate adjustments beyond the September 30, 2022 eFMAP
 - Distinct rates for rural areas

New Service: Medical Respite & Day Habilitation Tier 2

Medical Respite

- This service focuses on short-term assistance provided to children/youth because of the absence of or need for relief of the child/youth or the child/youth's family caregiver for participants with complex physical and or developmental needs and due to their complex needs, who required additional qualified staffing i.e.; nursing
- Services can be provided in a planned mode. Medical Respite workers provide medical care to the child/youth that support their needs.
- Difference between Medical Respite and Respite:
 - <u>Medical Respite</u> provides medical and physical interventions and staffing to support children/youth with their medical needs
 - <u>Respite</u> provides supervision to support children/youth with their behavioral and developmental needs

Day Habilitation Tier 2

 Targeted for children/youth with complex physical and or developmental needs who need additional support and care and who require additional qualified staffing i.e.; nursing

New Service: Transitional Service Coordinator

- Transitional Service Coordination can be utilized for children/youth living in institutional settings, to identify and address barriers that prevent them from returning to their home and community.
- Transitional Services Coordination provider will seek out children/youth who have long term institutionalization.
- This coordinator will work with institutional levels of care of hospitals, nursing homes, etc. to determine the needs of the child/youth to be able to return to their home and community.
- Coordination of services may include but not limited to: housing, vehicle/environmental modifications, arrangements for medical equipment, parent/caregiver education/training, development of supportive services and caregiver supports, etc.

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Transitional Service Coordination Roles

Health Home Care Manager (HHCM)

Conducts HCBS eligibility assessment and plan of care

The HHCM receives referral from TSC to conduct HCBS eligibility determination. 30 days prior to the child/youth's discharge the HHCM works with the rest of the care team (family, medical providers, and TSC) to prepare child/youth for transition. The HHCM will be responsible for anything under ordinary scope not related to getting the child/youth home (ensure they have a pediatrician, connect to school, connect to early intervention, etc.).

Family & Medical Care Team

Members of the full care coordination team who are key individuals in all decisions

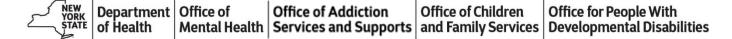
These are the individuals who will be involved in every step of the process with the child/youth. They should be present in any meetings where care determination and decisions are being made.

Transitional Service Coordinator (TSC)

Identifies eligible candidates & reduces barriers to return home

The TSC builds a relationship with local hospitals and other institutional level of care facilities to identify eligible candidates to transition home. After the HHCM conducts HCBS eligibility determination, the TSC will begin planning with the family & medical team to understand and reduce barriers of transition. The TSC works with child/youth for 180 days prior to discharge and 60 days post-discharge.

Building Capacity



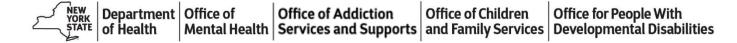
Building Capacity for Existing and New Services

Utilizing the New Children's Services Capacity Tracker regarding waitlist and gaps in services

 Regional HCBS provider meetings with HHs and MCOs to discuss capacity and how to build capacity

Education to Providers regarding New Services

- Specific outreach and education
- Discussion with providers regarding interest



HCBS Manual Updates

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HCBS Manual Updates

- Updates to the HCBS Manual include:
 - Removal of reference to Level of Need (LON)
 - Inclusion of performance measures pertinent to HHCM/C-YES and HCBS providers
 - Added sections for provider requirements, attestation, designation/re-designation, outsourced administrative functions, EVV, HCBS Final Rule, consolidated fiscal reporting, IRAMS, and service animal guidance
 - Clarified referrals to C-YES, timeframe for monitoring access to care, HCBS Authorization and Care Management Notification form,
 - Updated description for CFSS/CSATS
 - Updated minimum qualifications for Palliative Care Expressive Therapy and updated Bereavement Services offering
 - Updated service components and qualifications for A/AT, e-mods, and v-mods

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HCBS Provider Feedback

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HCBS Provider Feedback

- Please provide feedback on the supports that are needed (policy/guidance, training, other requests, etc.).
- Feedback can be provided verbally or in the chat.
- If other ideas and feedback come to your mind after this meeting, please reach out to us at the BH.Transition@health.ny.gov mailbox or 518.473.5569



Future Meetings & Contact Information

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Future Meetings & Agenda

• Next Scheduled Monthly Meetings:

 \circ June 15th, 2022, from 1 – 2:30pm

○ July 20th, 2022, from 1 – 2:30pm

- Register for <u>all</u> these monthly meetings here: <u>https://attendee.gotowebinar.com/rt/6285227798939622667</u>
- NYS would like to discuss topics of interest to the HCBS providers and also hear suggestions and ideas for improvement.
- Please submit your agenda requests, suggestions, or questions to <u>BH.Transition@health.ny.gov</u>.

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

Questions regarding the HCBS Settings Final Rule can be directed to <u>ChildrensWaiverHCBSFinalRule@health.ny.gov</u>

