

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

Topic	Issue	The Department’s Response
POLICY IMPLEMENTATION DATE	When do Health Homes need to have their systems updated to support this new policy?	<p>Implementation of the <i>Continuity of Care and Enrolled Member Re-engagement</i> policy is October 1, 2017 however, the Department recognizes that HHs need time to assure systems support any changes, develop policy and procedures, and train CMA staff.</p> <p>Beginning November 1, 2017, HHs and CMA should begin to follow the new timelines, Member Status and Billing requirements, etc., and transition any enrolled member’s currently in Outreach (under previous <i>Lost To Service</i> policy) into the Continuity of Care and Re-engagement of Enrolled Members process.</p>
	Who is responsible to oversee <i>Diligent Search Efforts</i> ?	The process for conducting <i>Diligent Search Efforts</i> is overseen by the CMA/CM. However, it is a collaborative effort beginning with notification by the CMA/CM to both the HH and member’s MMCP collectively (considered one of three or more required activities in the first month), which provides an added level of monitoring for member activity while the CMA/CM continues to conduct various other activities to locate members (refer to policy for examples of some of the activities related to <i>Diligent Search Efforts</i>).
OVERSIGHT AND RESPONSIBILITIES	Who is responsible to oversee <i>Continued Search Efforts</i> ?	If Diligent Search Efforts do not result in locating the disengaged member, the CMA/CM must inform both the HH and member’s MMCP) collectively of this and move the member into <i>Continued Search Efforts</i> . The HH and MMCP oversee the process through continued monitoring for member activity and report such activity to the CMA/CM who must follow up on any notifications to support the potential for locating and re-engaging the member.

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

DEFINING 'DISENGAGED'	How would the CM make the determination of member disengagement?	<p>HH policies should include guidance for CMAs to determine when an enrolled member is deemed disengaged from CM services. While some members are easy to engage and are consistent in their activities, others are not.</p> <p>The CM should take into account usual patterns of behavior exhibited by the member known to result in inconsistent engagement or temporary disengagement (such as: a pattern of inconsistent attendance with scheduled appointments despite CM reminders; member is without stable housing and changes living arrangements frequently; member is often without access to a phone; youth who continually runs away, etc.). Each time the child/youth is missing, runs away, or the CM is unable to conduct a face to face contact does not necessarily mean the individual is truly disengaged from CM services, therefore the CMA/CM must make sure to take appropriate steps before initiating Diligent Search Efforts.</p>
	What about a member who is habitually lost to care, someone who goes through 2 or more cycles of this continuity of care process?	<p>CMs must be able to distinguish when the member's normal pattern of behavior has changed and a more intensive level of search effort must be implemented. It is also important for CMs to monitor such patterns over time to determine whether CM core services are provided and to what degree this supports the member's continued enrollment. The CM needs to discuss patterns with the member and their care team including CM Supervisors, HH, and MMCP to determine whether there are other options to employ that support member retention and the member's plan of care.</p>

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

	<p>Is there a limit on the number of times a member can go in/out of Diligent Search Efforts?</p>	<p>Diligent Search Efforts is a process. The rate of payment is the same however the activities and intensity of the activities are amplified. Before initiating Diligent Search Efforts, it is important for CMA/CMs to assure that the member is truly disengaged from CM services. CMs need to be aware of the member’s usual pattern of behavior when attempting to connect with the member, and when it’s appropriate to deem the member as disengaged from CM services, warranting initiation of more intensified search efforts.</p> <p>If a member is not engaging with the CM on a routine basis, then it is important to discuss this pattern of behavior with the member, member’s parent, guardian, legally authorized representative or others approved by the member along with the member’s care team (including CMA Supervisor, MMCP, HH, etc.) to identify an appropriate level of CM core services being provided to support continued HH enrollment, and options for enhancing member connectivity.</p>
<p>LOSS OF MEDICAID STATUS</p>	<p>What happens if the member’s Medicaid becomes inactive during search efforts, including when they are located in an excluded setting?</p>	<p>It is important to remember that a HH enrolled member’s Medicaid eligibility status may change at various times, therefore the CMA/CM must monitor coverage and verify eligibility to prevent the risk for non-reimbursement. If the member’s eligibility lapses, the CMA/CM should work with the member to reactive coverage. If an enrolled member is located within an excluded setting at the time Medicaid coverage needs recertification or has lapsed, the CMA/CM should work with the member to retain/reactive Medicaid coverage, or notify the discharge planning staff of the excluded setting. Upon the member’s discharge/release from an excluded setting, the CMA/CM should again verify the member’s Medicaid coverage and if needed, assist the member to recertify/reactive coverage (refer to the policy for rules that apply to members who are incarcerated and their Medicaid coverage during this time).</p>

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

<p>MAPP HHTS</p>	<p>What is the member’s status in MAPP HHTS during Diligent Search Efforts and Continued Search Efforts?</p>	<p>During Diligent Search Efforts, the member’s status in MAPP HHTS must be ‘active’. During Continued Search Efforts, the member’s status in MAPP HHTS must be ‘pending’.</p> <p>NOTE: The member’s status in MAPP HHTS may change depending on activities performed by the CMA/CM such as CM core services performed during Diligent Search Efforts; or, conducting CM follow up to notifications received from the member’s MMCP and HH during Continued Search Efforts; or, related to required discharge planning activities (e.g., when member is located within an excluded setting). MAPP HHTS is changed between ‘pending’ and ‘active’ status to coincide with billing for CM core services performed to locate and re-engage members.</p>
<p>BILLING DURING SEARCH EFFORTS</p>	<p>How many attempts must be made in order to bill for Diligent Search Efforts?</p>	<p>In order for a CMA to bill each month during which a member is in Diligent Search Efforts, <i>a minimum of three or more</i> CM core activities must be provided each month. During month one, the CMA/CM must include notification to both the member’s MMCP and to the HH collectively (together this is considered one of the three or more required activities for month one). Activities must be progressive in nature and vary to assure all opportunities to locate members are exhausted (Policy provides some examples of acceptable activities). If in any month of Diligent Search Efforts the CMA/CM does not conduct required search activities, the CMA cannot bill for that month.</p> <p>For Health Homes Serving Children (HHSC): Policy HH0006 was updated to include special rules that apply for performing Diligent Search Efforts activities for child/youth enrolled in a HHSC based on whether the child/youth is able to self-consent, and the face to face requirement.</p>

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

	<p>How would the CMA bill for HML when a member is disengaged and under Diligent Search Efforts?</p>	<p>For adults, the CMA would bill at the enrollment rate reflective of the rate for HML for that member.</p> <p>Since implementation of policy HH0006, updates have been made in response to questions related to HML for enrolled children deemed as disengaged from CM services. Policy now includes special rules for children/youths for both Diligent and Continued Search Efforts activities based on whether or not the child/youth is able to self-consent. Updates include adjustment in timelines for search activities, and expectations related to face to face contacts for a child/youth, regardless of acuity level.</p>
	<p>Is billing during Continued Search Efforts allowed?</p>	<p>Policy provides guidance related to acceptable Billing practices during the months of Continued Search Efforts. During this time, the Member’s Status is ‘pended’ and no CMA billing can occur...However, if CM core services are conducted related to location and re-engagement activities, then the CMA may bill for this month.</p> <p>For example: the HH and MMCP notifies the CMA/CM of member activity and the CMA/CM conducts timely follow up that results in locating and re-engaging the member. Providing the needed CM core service resulted in member engagement and therefore, billing would be acceptable. The member’s status in MAPP HHTS would be changed to ‘active’ to support billing (refer to policy for additional information related to CMA billing practices during Continued Search Efforts).</p>
	<p>During the 6 months of outreach CMA agency will get paid at the outreach rate for clients that are disengaged?</p>	<p>No. New policy HH0006 eliminates all activities related to <i>outreach</i> and therefore, the CMA will not be paid at the outreach rate. Outreach has been replaced by Diligent Search Efforts, which are allowed for a period of three consecutive months. During Diligent Search Efforts, when required CM core services are conducted and the CM provides supporting documentation of these activities, the CMA can bill at the ‘enrollment’ rate, and the member’s status in MAPP HHTS is ‘active’.</p> <p>If a member is not located following the period of Diligent Search Efforts, the CMA/CM must move the member into <i>Continued Search Efforts</i>. The member’s status in MAPP HHTS is ‘pended’ and therefore, no billing can</p>

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

		<p>occur. However, if during the period of Continued Search Efforts the CMA/CM is notified by the MMCP/HH of member activity and follow up results in member location through the provision of CM core services, then billing can occur and member segment in MAPP HHTS is changed to ‘active’.</p> <p>NOTE: Policy HH0006 has been updated to include special rules for conducting Diligent and Continued Search Efforts related to children/youths depending on whether s/he is able to self-consent. These special rules include requirements for conducting face to face contacts, and allowable time frames for both Diligent and Continued Search Efforts.</p>
	<p>If a care manager doesn't deliver a core service in a given month, doesn't do 3 diligent search activities, and doesn't think the member is "lost," they simply would not bill, correct?</p>	<p>If in any given month the CM does not perform a CM core service then the CMA cannot bill for that month.</p> <p>To support the decision to begin Diligent Search Efforts, the CM must document why they believe the member to be disengaged from CM services, and the three or more CM core service activities performed each month to locate the member under Diligent Search Efforts. If the CMA/CM does not provide the CM core services required for Diligent Search Efforts then the CMA cannot bill for that month.</p> <p>If the CMA/CM doesn't believe the member to be truly disengaged, then Diligent Search Efforts would not be initiated. The CM must be able to distinguish when the member's normal pattern of behavior is no longer viable and it is appropriate to initiate Diligent Search Efforts. Otherwise, the CM would perform and bill for standard CM core services (e.g., inclusive of monthly face to face contact required for HH enrolled children with medium or high acuity).</p>
<p>NOTIFICATION PROCESS BETWEEN HH/MMCP/CMA</p>	<p>When is the member's MMCP and HH notified?</p>	<p>The member's MMCP and HH must be notified in the first month of Diligent Search Efforts to not only provide notification that the member is disengaged from CM services, but to also include the MMCP and HH in Diligent Search Efforts to support activities to locate and re-engage the member.</p> <p>If a member is not located during Diligent Search Efforts, the CMA must also</p>

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

		notify the member’s MMCP and HH to initiate Continued Search Efforts. The MMCP and HH continue to monitor for member activity and notify the CMA whenever activity occurs for follow up to support location and re-engagement of the member.
	Is notification to the member’s MMCP and HH during Diligent Search Efforts considered to be one of three or more required activities, or two of three?	Notification to both the HH and MMCP are required in the first month of Diligent Search Efforts and are considered to be a collective activity, meaning combined they are considered <i>ONE</i> activity. Therefore, two or more additional activities are needed to meet the month one requirement (per policy: a minimum of three or more activities per each month of Diligent Search Efforts). Activities should be progressive in nature, with different entities contacted each month. If the member was not located as a result of Diligent Search Efforts, the CMA must notify the member’s MMCP and HH of this and initiate Continued Search Efforts so that efforts to monitor for member activity could continue through the MMCP and HH.
	What is the expectation for how notifications should take place between the CMA, MMCP and HH that members have disengaged from CM?	HHs should include in policy how notifications between the HH, CMA and MMCP should be handled. For example, if the HH/CMAs Electronic Health Record (HER) system allows for electronic notifications that relay information between HH/CMA/MMCP, then this is acceptable practice. If not, policy should specify alternate options.
CMA RESPONSE TO NOTIFICATIONS FROM THE MEMBER’S MMCP/HH	Is it the expectation that the CMA 'must' follow-up vs. 'may' follow-up during continued search efforts?	During Continued Search Efforts if the CMA/CM is notified by the HH and MMCP of member activity, the CMA <i>must</i> follow up. The HH and MMCPs role is to continue to monitor for member activity and notify the CMA/CM. The CMA/CM must respond to these notifications, conduct appropriate activities, and document outcomes. If activities lead to member location and re-engagement the CMA must assure documentation is present to support any billing activities.

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

HML	<p>Are HMLs required during the months of Diligent Search Efforts?</p>	<p>For adults: During diligent search, the CMA documents in MAPP as appropriate that a CM core service was provided and the core service selected should be “Comprehensive Care Management”. The CMA will bill the rate adjusted by the HML functional questionnaire.</p> <p>For HHSC: After initial issuance of policy HH0006, updates were made for HHSC that distinguishes activities for conducting Diligent and Continued Search Efforts for a child/youth depending on whether s/he can/cannot self-consent. Timelines for conducting Diligent and Continued Search Efforts were changed according to this new information. For child/youth, HML acuity levels are not discernible, meaning that a face to face contact is required during the month(s) when Diligent Search Efforts are being conducted (refer to policy for special rules related to the face to face contact requirements for HHSC during Diligent Search Efforts).</p>
	<p>What happens when it is the parent/legal guardian who becomes disengaged from the HH program, therefore the CM is unable to reach the child through the parent?</p>	<p>If the enrolled child is indeed determined to be disengaged from HH services and the CM has properly documented this, then <i>Diligent Search Efforts</i> would begin and follow the amended HHSC language based upon whether the member can or cannot self-consent. For those members who cannot self-consent, one month of <i>Diligent Search Efforts</i> is allowable during which a face to face contact with the child is required. If the CM is unable to locate the child for a face to face contact, then the CM must conduct a face to face contact with the child’s parent, guardian or legally authorized representative. However, if the parent, guardian, or legally authorized representative cannot be located (also deemed disengaged from HH services) for a face to face to occur, then the CMA cannot bill for the one month of <i>Diligent Search Efforts</i>. The case must be moved into <i>Continued Search Efforts</i> and the member’s status in MAPP HHTS must be ‘pending’.</p>
	<p>When the child is disengaged from CM services, and the CM is conducting search efforts, what does the CM do if a CANS-NY 6-month re-assessment is due?</p>	<p>If the six-month re-assessment of the CANS-NY is due while the member is disengaged from CM services, the CM would complete the CANS-NY with the information known regarding the current situation. Once the member is located and re-engaged, a new CANS-NY would need to be completed for a</p>

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

		change in circumstances of the member.
MEMBER DISENROLLMENT FROM THE HEALTH HOME PROGRAM	When is it appropriate to disenroll a HH member during the search process?	<p>Previous HH policy (<i>Lost To Service</i>) allowed for disenrollment of the member after three months of search efforts (Outreach) if the member was not found. New HH policy HH0006 eliminated this practice and in its place, allows for a lengthier period of time and expanded process to search and re-engage an enrolled member deemed disengaged from CM services. If a member is not located after <i>Diligent Search Efforts</i>, the CMA/CM <u>must</u> move into <i>Continued Search Efforts</i>. Only when a member cannot be located after exhausting <i>all</i> search efforts – the combined periods of Diligent Search Efforts and Continued Search Efforts – may the CMA disenroll the member from the HH program.</p> <p>Other considerations for disenrollment during search efforts are when a member is located in an ‘excluded setting’ if the member is located and chooses to disenroll or, if the member is located in an <i>excluded setting</i> and discharge/release is not anticipated within 6 months of the admission date into the excluded setting, the CMA/M can then disenroll the member from the HH program (refer to policy for more detail on these procedures).</p> <p>NOTE: The CMA/CM must use professional discretion when discharge is anticipated shortly after the 6-month period, keeping in mind member retention and connectivity to prevent potential disengagement of the member that could have otherwise been prevented.</p>
QUALITY MONITORING	Do Health Homes need to include as part of their quality monitoring activities that three or more <i>varying</i> activities were conducted by the CMA/CM each month?	<p>HHs must evaluate patterns related to member disengagement within its own network and establish Quality Monitoring activities to address issues identified. HH policies should provide CMA/CMs with guidance on conducting search activities that are progressive, meaningful and appropriate to the member to support successful re-engagement. When there is opportunity to locate a member through multiple and varying activities, but these are not utilized, how does this aid location efforts, affect the outcome, support Billing for CM core services, and prevent potential future events? HH policies should include expectations for conducting appropriate audits related to CM activities.</p>

CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
 QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017

DOCUMENTATION REQUIREMENTS	Do all of the CM supervisor activities need to be documented in the records?	The CMA Supervisor is part of the process for supporting CM activities to locate and re-engage members. Policy defines expectations for CM to notify and include CMA Supervisor in activities to locate and re-engage members. CM must document all activities conducted to locate and reengage members including engagement of the CMA Supervisor throughout the process.
	During 'continued search efforts is the CMA responsible for documenting anything in the client's record?	During Continued Search Efforts and CMA/CM must document all activities related to location and re-engagement activities including notification to the HH and MMCP to initiate Continued Search Efforts, any contact(s) from the HH and MMCP related to member activity, CM core services performed to locate the member, and outcomes.
TRANSITIONING ENROLLED MEMBERS CURRENTLY IN OUTREACH DUE TO 'LOST TO SERVICE' ON OCTOBER 1, 2017	If an enrolled member is in outreach for <i>Lost To Service</i> upon implementation date of policy, HH0006 (October 1, 2017), how should these members be transitioned to the new policy timelines and activities?	<p>Under previous HH policy (<i>Lost To Service</i>): Outreach was allowed for a period of three months to locate and reengage enrolled HH members. If after three months the member was not located, the CMA disenrolled the member from the HH program.</p> <p>Under new policy HH0006, a period of three months of <i>Diligent Search Efforts</i> is allowed to locate the enrolled member disengaged from CM services. However, if the member is not located by the end of this time period, rather than being disenrolled from the HH program, the CMA would move the member into <i>Continued Search Efforts</i>.</p> <p>Any enrolled member in Outreach due to <i>Lost To Service</i> (previous policy) on October 1, 2017, must be transitioned into search efforts under new policy HH0006. To do this the CMA would not begin a new cycle of <i>Diligent Search Efforts</i>, but instead would move the member from Outreach into Diligent Search Efforts for the exact same month.</p> <p>For example: An enrolled member was <i>Lost To Service</i> and placed into Outreach for August 2017 and September 2017. Normally, the CMA would have conducted a third month of Outreach in October 2017. Instead, the CMA will move the member into the <u>third month</u> of <i>Diligent Search Efforts</i>.</p> <p>*NOTE: Following initial implementation, policy HH0006 has been updated</p>

**CONTINUITY OF CARE AND RE-ENGAGEMENT FOR ENROLLED HEALTH HOME MEMBERS POLICY (HH0006)
QUESTIONS AND ANSWERS – ISSUED OCTOBER 25, 2017**

		to include special rules for children/youths enrolled in the HH program depending on their ability to self-consent, including CM activities for conducting Diligent Search Efforts (e.g., requirement for face to face contacts). Special rules also contain variations in timelines associated with both Diligent and Continued Search Efforts. Please refer to policy HH0006, updated October 24, 2017.
CONTACT LIST FOR MEDICIAD MANAGED CARE PLANS	Where can we access a list of MCO's?	For a listing of Managed Care Organizations and contacts, please go to the DOH Health Homes webpage, Managed Care Organizations via the following link: https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/managed_care/mc_hh_contacts.htm - click on MCO Resources, then see Contact Information.

KEY: Abbreviations used in this Questions and Answers Document are:

- Health Home = HH
- Care Manager = CM
- Care Management Agency = CMA
- NYS Department of Health = the Department
- Medicaid Managed Care Plan = MMCP