ATTACHMENT C

New York State Health Home Model for Children



Administrative Services, Network Management, HIT Support/Data Exchange

HH Care Coordination ead Health Home ✓ Comprehensive Care Management Care Care ✓ Care Coordination and Health **Managers Managers** Promotion Serving Serving ✓ Comprehensive Transitional **Adults** Children Care **Foster Care (Will support ✓ Individual and Family Support transitional care) Agencies ✓ Referral to Community and Provide Care Social Support Services Management for ✓ Use of HIT to Link Services Children in Care Manager Partners Foster Care Downstream & **OMH Waivers OCFS Foster Pediatric** DOH OASAS/ Care **TCM** (OMH SED, Health Care AI/COBRA **MATS** Agencies and (SCM & CAH & **Providers** Foster Care ICM) *B2H*) System** **Access to Needed Primary, Community and Specialty** and Specialty Services Primary, Community Services(Coordinated with MCO) Pediatric & Developmental Health, Behavioral Health, Substance Use Disorder Services, HIV/AIDS, Housing, Education/CSE, Juvenile Justice, Early and Periodic Screening Diagnosis and Treatment (EPSDT) Services, Early Intervention (EI), and HCBS /Waiver Services (1915c/i) Note: While leveraging existing Health Homes to serve children is the preferred option, the

State may consider authorizing Health Home Models that exclusively serve children.