



Subject: CLARIFICATION to the Children’s Medicaid Waiver Transition to Health Home Care Management Guidance specifically for Transitioning 1915c DOH and OPWDD Care at Home Waiver Providers

TO: Transitioning 1915c DOH and OPWDD Care at Home Waiver Providers and Lead Health Homes

This memo intends to clarify the January 11, 2019 guidance that was sent out to all transitioning 1915c Waiver providers regarding the documentation requirements for Care Management staff (OMH ICC, OCFS HCI, DOH/OPWDD case management and Health Home (HH) care management), as it relates to their care coordination activities during the transition period of **January 2019 through March 31, 2019** while transitioning children within the current six waivers (listed below) into Health Home (HH) care management or the Independent Entity (IE).

- OMH SED HCBS 1915(c) waiver
- DOH Care at Home (CAH) I/II 1915(c) waiver
- OPWDD Care at Home 1915(c) waiver
- OCFS Bridges to Health (B2H) SED 1915(c) waiver
- OCFS B2H Medically Fragile 1915(c) waiver
- OCFS B2H DD 1915(c) waiver

The current six waivers and their authority are still in place during the transition period of January 2019 through March 31, 2019. Current waiver care management requirements and billing procedures remain intact for children who continue to receive care management services of OMH ICC, OCFS HCI or DOH/OPWDD case management services.

Level of Care Determination

This is a change from the In-person Trainings:

- Level of Care (LOC) forms must be completed as currently required under existing waivers for any transitioning child who is due for annual recertification between January 2019 through March 31, 2019, even if the child has already transitioned to Health Home during this period.
- For any transitioning waiver child whose annual recertification is on or after April 1, 2019, based on the recertification date under the former waiver, the new HCBS/LOC Eligibility Determination will be completed within the month of the due annual recertification.

CMS disapproved the proposed process announced in the statewide in-person training regarding the LOC determinations. The existing waiver eligibility processes remain in place



from January 2019 through March 31, 2019. Each child must have a current LOC. If the annual LOC redetermination for any transitioning child is due between January – March 31, 2019, the care manager must complete the LOC form under the historic waiver (e.g., former 6 waivers).

If a transitioning child's recertification is due on or after April 1, 2019, based on the former waiver, the care manager must complete the new HCBS/LOC Eligibility Determination process for the Children's waiver. (Training on the new HCBS/LOC Eligibility Determination process will be forthcoming).

If a child does not meet the new LOC criteria but is at risk for institutionalization in absence of the waiver, the CM should contact the waiver capacity manager team at capacitymanagement@health.ny.gov for a review of eligibility so that the child can stay on the waiver. Additional documentation may be needed by the State from the HHCM/IE to determine if the child will remain eligible for the new Children's waiver under old eligibility criteria. The HHCM/IE will only be contacted, and documentation will only be needed if the State notifies the HHCM/IE.

Note: this will not occur in certain circumstances such as ICF-IDD eligibility where the eligibility criteria and tools have remained the same. If the child is eligible under the former Waiver, a Level of Care exception will be issued for one year. ***The exception process will no longer exist after 4/1/2020.***

***CLARIFICATION to the Transitioning 1915c DOH and OPWDD Care at Home Waiver Providers**

This guidance further clarifies the LOC process and the care manager's role in this process during the transition period of January 2019 – March 31, 2019 for a child currently enrolled in the OPWDD CAH or DOH CAH I/II Waivers.

During this timeframe, if a child has an annual LOC or six-month POC that comes due during the transition period window, the Plan of Care (POC), Physician's Orders, and Level of Care (LOC) must be completed in order to remain in compliance with CMS directives.

Mandatory in all Instances:

- **Plan of Services** – Once transitioned to Health Home, the POC should be updated and cross walked to the new array of HCBS to be ready for April 1, 2019 implementation of the Children's Waiver
- **Physician's Orders** – Must be maintained in the child's record every 60 days in accordance with current waiver standards
- **Home Assessment Abstract (HAA)** – It will be considered sufficient for the Care Manager to place a note in the file that a HAA review was conducted and there are no changes needed. If the HAA is not tied to such essential State Plan services, then the HAA can be reviewed to ensure that the child's needs are met.



- **Level of Care documentation**

- For the OPWDD CAH Waiver, the Level of Care form is completed by the DDRO, but the process for completing the Level of Care and maintaining the Plan of Care requires actions by the Care Manager. The Plan of Service, Physician's Orders, Home Assessment Abstract, and Level of Care form should be coordinated with OPWDD DDRO staff to facilitate completion.
- For the CAH I/II waiver, the care manager may complete either the Pediatric UAS or the CANS-NY within the UAS. However, if the care manager completes the CANS-NY, it must ensure that a physician or other qualified practitioner confirms that the child meets an institutional level of care. A CANS-NY is already required to complete the transition to Health Home care management.

Not Required:

- **The Budget** - requirement is waived

Special Note:

- If the HAA Form and/or Pediatric UAS is essential for a child's access to existing State Plan Services (such as Consumer Directed Personal Assistance Services -CDPAS, Private Duty Nursing, Person Care Services, etc.) then the HAA process and/or the Pediatric UAS must be completed as required.