

Welcome to Training!



Contact



(518) 408-1021



uasny@health.ny.gov



<http://bit.ly/uasny>

Who We Are

The Uniform Assessment System for New York (UAS-NY) is a web application that allows qualified assessors to securely conduct standardized health assessments which generate outcomes that are used to determine eligibility and service level authorization, as well as guide care planning for New York State residents.

Our Mission

The UAS-NY's mission is to maintain and advance the leading repository for health information and assessment instruments while providing exceptional communication, training, and support to our 10,000 users and 1,800 organizations. We make the first step in developing individualized service plans efficient and easy to ensure New York State residents receive the right care, within the right setting, at the right time.

Purpose

The purpose of this training is to provide an overview of the Uniform Assessment System for accessing the CANS-NY and HCBS/LOC assessments, resources for conducting an assessment, and assessment reporting features



Learning Activities

What You Will Learn About Today!



Review of the
CANS-NY and
HCBS/LOC
Determination

UAS-NY
Uniform Assessment System for New York

Best Practices
to ensure data
integrity

Assessment
Outcomes

Linking a CANS-
NY to an
HCBS/LOC

Using Reports

Children's Behavioral Health Assessments

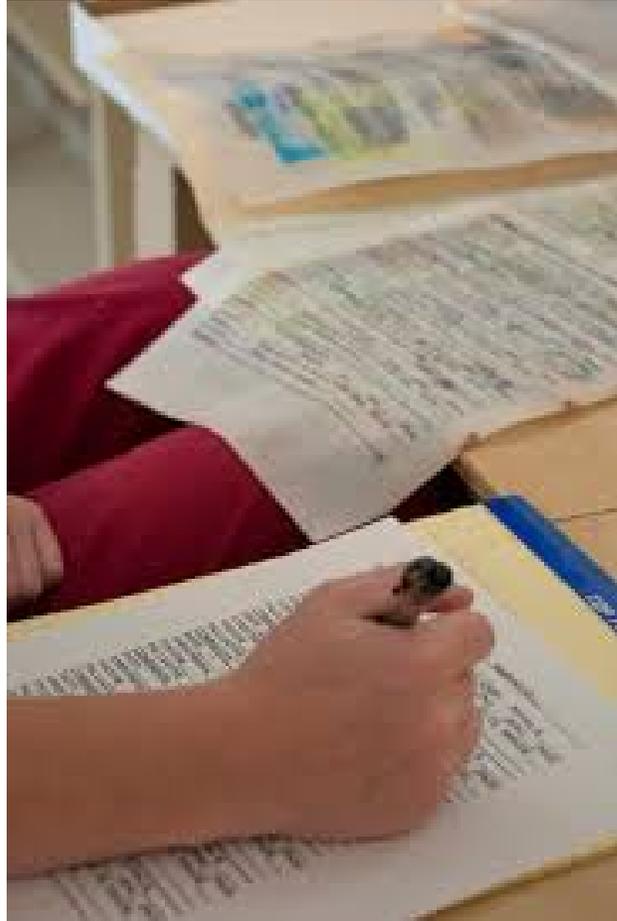


CANS-NY: identifies a child's strength and needs.

HCBS/LOC Determination: Determines a child's HCBS Eligibility

- **Shared information and care planning**
- **Connect children with services**
- **Run reports for care planning and reassessment**

Our Goal: Work towards returning children to home and community!



Getting Ready to Conduct the Assessment

- **Verify data between MAPP Health Home Tracking System (HHTS) and the CANS-NY.**
- **Collect data about the child's strengths and needs.**
- **Manage the restrictions to the Sign/Finalize process.**

Data Integrity and Best Practices



Verify data between MAPP Health Home Tracking System (HHTS) and the CANS-NY.

Member	Program Participation	DOB	Medicaid End Date	Coverage Code	Managed Care Plan	Health Home
Andrea Anderson XX11111X		10/21/2015		30	CAPITAL DISTRICT PHYS HLTH PL- 0118013	ADIRONDACK HEALTH INSTITUTE INC-034449974

Adding the Assessment to the UAS-NY

The Health Home selected in the assessment must match the Health Home assigned in the MAPP/HHTS.

Andrea Anderson

- Identification Info
- Assessments
 - 12/30/2019 CANS-NY 0-5
 - Reference Date
 - Intake / Demographics**
 - CANS-NY 0-5
 - A: Caregivers
 - A: Caregiver #1
 - A: Caregiver #2
 - A: Caregiver #3
 - A: Caregiver #4
 - B: Child Strengths
 - C: Child Needs & Functioning

Updating the Health Home in the UAS-NY

Andrea Anderson

- Identification Info
- Assessments
 - 12/30/2019 CANS-NY 0-5
 - Reference Date
 - Intake / Demographics**
 - CANS-NY 0-5
 - A: Caregivers
 - A: Caregiver #1
 - A: Caregiver #2
 - A: Caregiver #3
 - A: Caregiver #4
 - B: Child Strengths
 - C: Child Needs & Functioning

Choose Health Home the child is enrolled in

-- No Selection --

-- No Selection --

Reassessment Reason: Change of Circumstances

- Adirondack Health Institute (AHI) (03449974)
- Catholic Charities of Broome County/Encompass (01164149)
- Children's Health Home of Upstate New York (CHHUNY) (04277941)
- Children's Health Home of WNY dba Oishei Healthy Kids (04587495)
- CNYHHN-Central New York Health Home Network (03549144)
- Community Care Management Partners (CCMP) LLC (03606902)
- Coordinated Behavioral Care, Inc. (CBC) (03559515)
- Greater Rochester Health Home Network, LLC (GRHHN) (03467301)
- Hudson River HealthCare d/b/a CommunityHealth Care Collaborative (00473038)
- Montefiore Medical Center d/b/a Bronx Accountable Healthcare Network (BAHN) (03460400)
- Mount Sinai Health Home Serving Children (04327868)
- Niagara Falls Memorial Medical Center (00354467)
- North Shore/Northwell (03457054)

- **Changes in MAPP are transmitted daily.**
- **Updates via the EHR must be coordinated with the Lead Health Home.**

UAS-NY and MAPP HHTS Data Inconsistencies

When attempting to sign and finalize an assessment the Health Home selection in the UAS-NY must match the Health Home selection in MAPP HHTS.



The Health Home selection in the Intake/Demographics, Northern Health Home, does not match the enrollment data sent to the UAS from MAPP, ZZNYS. Please verify the accuracy of both systems and make corrections accordingly. Changes made directly in MAPP will be reflected in the UAS the following day.

Sign/Finalize

The assessment CAN NOT be signed/finalized!

Correcting Data between the UAS-NY and MAPP



Changes in MAPP HHTS are not transmitted to the UAS-NY until the next day.

Changes via the EHR must be coordinated with the Lead Health Home to ensure a timely transmission to MAPP HHTS.

Changes in the UAS-NY are immediately reflected and will allow the assessor to sign and finalize the assessment.

Don't wait until the end of the month to Sign/Finalize a CANS-NY.

Verify Enrollment in MAPP HHTS



The child must have a qualified enrollment in MAPP HHTS.

Segment Status Code	Status Description
HHSS001	Active
HHSS004	Pended
HHSS007	Pending Pended
HHSS009	Pending Active

Verify Enrollment in MAPP HHTS



The child must have a qualified enrollment in MAPP HHTS.

You note that Andrea has a qualified enrollment record in HHTS beginning 7/1/2019.

Member	Program Participation	DOB
Andrea Anderson XX11111		10/21/2015

Health Home	Care Management Agency	HARP	Segment	Start Date	End Date	Pending Transfer
ADIRONDACK HEALTH INSTITUTE INC-034449974	BERKSHIRE FARM CENTER-0350143	No	Enrollment	07/01/2019		

UAS-NY and MAPP HHTS Data Inconsistencies

The child must have a valid enrollment in MAPP HHTS at the time the assessor attempts to sign and finalize the assessment.



! The Health Home selection in Intake/Demographics, Community Care Management Partners (CCMP), does not match the enrollment data sent to the UAS from MAPP. None. Please verify accuracy in both systems and make corrections accordingly. Changes made directly in MAPP will be reflected in the UAS the following day.

The assessment CAN NOT be signed/finalized!

Verify Medicaid ID in MAPP HHTS



The child's Medicaid ID must match in both systems.

Member	Program Participation	DOB
Andrea Anderson XX11111X		10/21/2015

Suzie Smith

+ Add Refresh Delete Check Missing

Andrea Anderson

- Identification Info
- Assessments
- Attestations

Medicaid numbers

Prior to editing demographic information, verify data accuracy. Changes impact the ability of other users to locate this record.

Medicaid number 1: XX11111X

Medicaid number 2: []

Medicaid number 3: []

UAS-NY and MAPP HHTS Data Inconsistencies

The Medicaid ID's must match what is found in the person's case file in the UAS-NY and the person's record in the MAPP HHTS.



! The Health Home selection in Intake/Demographics, Community Care Management Partners (CCMP), does not match the enrollment data sent to the UAS from MAPP. None. Please verify accuracy in both systems and make corrections accordingly. Changes made directly in MAPP will be reflected in the UAS the following day.

The assessment CAN NOT be signed/finalized!

Children's Behavioral Health Assessments - Recap

If an assessment can not be signed/finalized check:

- **Health Home must match in MAPP/HHTS and the UAS-NY.**
- **A valid enrollment must be in the child's record in MAPP.**
- **Medicaid ID must match in MAPP/HHTS and the UAS-NY.**



Children's Behavioral Health Assessments - Recap

If an assessment can not be signed/finalized check:

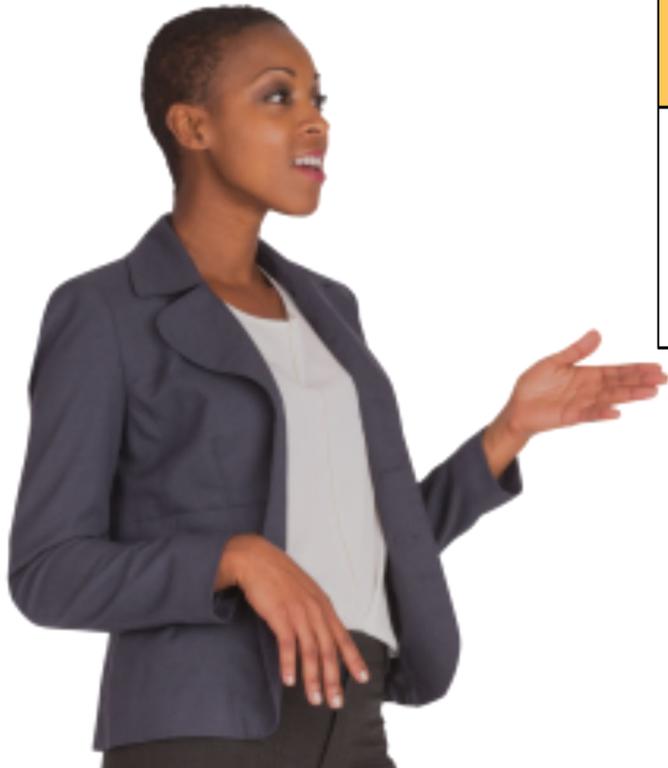
- Health Home must match in MAPP/HHTS and the UAS-NY.

Health Home	Care Management Agency
ADIRONDACK HEALTH INSTITUTE INC-034449974	BERKSHIRE FARM CENTER-0350143



Choose Health Home the child is enrolled in

Adirondack Health Institute (AHI) (03449) ▾



Children's Behavioral Health Assessments - Recap

If an assessment can not be signed/finalized check:

- **Check for a valid enrollment in the child's record in MAPP.**



Member	Program Participation	DOB
Andrea Anderson XX11111X		10/21/2015

Health Home	Care Management Agency	HARP	Segment	Start Date	End Date	Pending Transfer
ADIRONDACK HEALTH INSTITUTE INC-034449974	BERKSHIRE FARM CENTER-0350143	No	Enrollment	07/01/2019		

Children's Behavioral Health Assessments - Recap

If an assessment can not be signed/finalized check:

- Medicaid ID must match in MAPP/HHTS and the UAS-NY.

Member	Program Participation	DOB
Andrea Anderson XX11111X		10/21/2015



? Medicaid numbers
Prior to editing demographic information, verify data accuracy. Changes impact the ability of other users to locate this record.

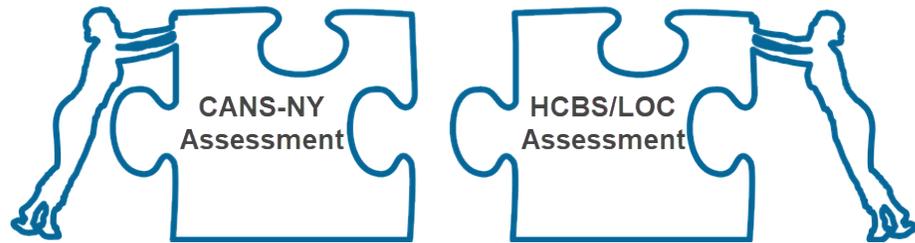
Medicaid number 1	<input type="text" value="AA22334A"/>
Medicaid number 2	<input type="text"/>
Medicaid number 3	<input type="text"/>

Linking the CANS-NY Assessment to the HCBS/LOC



Information can be linked *from* a signed/finalized CANS-NY assessment *to* the HCBS/LOC providing specific information has been completed in the CANS-NY assessment.

Linking the CANS-NY Assessment to the HCBS/LOC



Preparing to link the CANS-NY and HCBS/LOC

Rules for Linking:

- The CANS-NY assessment must be signed/finalized within the past 6 months.
- CANS-NY assessment must be for the same age range as the HCBS/LOC.
- All CANS-NY modules required for the selected HCBS/LOC Target Population must be triggered.
- It is essential you review the CANS-NY assessment before you link to the HCBS/LOC.

Responses in a Linked CANS Affect Eligibility

Algorithms are the “step by step” instructions used to by the system to determine eligibility.

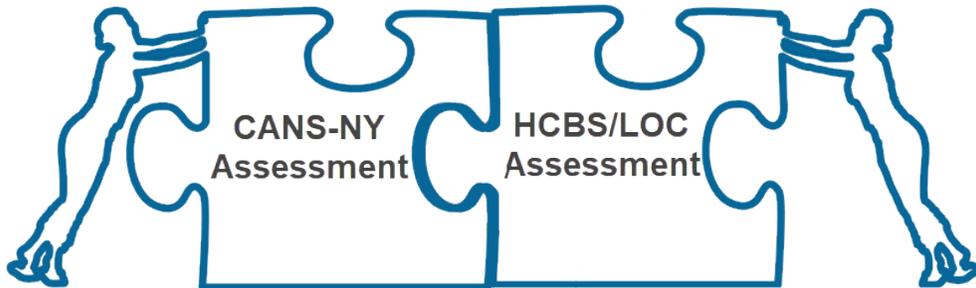
Serious Emotional Disturbance (SED) 0-5 years old HCBS/LOC Functional Algorithm			
A child meets "SED" if he/she meets:			
<ul style="list-style-type: none"> At least ONE "3" on Criterion 1.1 OR Criterion 1.2; OR At least ONE "2" on Criterion 1.1 AND at least ONE "2" on Criterion 1.2; OR At least TWO "2" on Criterion 1.2 			
AND			
<ul style="list-style-type: none"> At least ONE "3" OR "2" on Criterion 2 items within TWO or more of these five domains <ul style="list-style-type: none"> Caregiver Needs and Strengths (A) Child Strengths (B) Child Needs and Functioning (C) Risk Behaviors (F) Preschool/Child Care Functioning (94) 			
Criterion 1.1			
<u>Behavioral Health Module (92)</u>		<u>Child Development (D)</u>	
<ul style="list-style-type: none"> Attention/Concentration (Item 92A) Impulsivity (Item 92B) Anger Control (Item 92G) 		<ul style="list-style-type: none"> Agitation (Item D45) Sensory Reactivity (Item D58) Emotional Control (Item D59) Frustration Tolerance/Tantrumming (Item D60) Temperament (Item D61) 	
Criterion 1.2		Criterion 1.2	
<u>Trauma Symptoms Module (91)</u>		<u>Behavioral Health Module (92)</u>	
<ul style="list-style-type: none"> Traumatic Grief (Item 91A) Re-experiencing (Item 91B) Hyperarousal (Item 91C) Avoidance (Item 91D) Numbing (Item 91E) Dissociation (Item 91F) Affective or Physiological Dysregulation (Item 91G) 		<ul style="list-style-type: none"> Depression (Item 92C) Anxiety (Item 92D) Oppositional (Item 92E) PICA (Item 92F) 	
		<u>Risk Behaviors (F)</u>	
		<ul style="list-style-type: none"> Self-Harm (Item 69F) 	

Responses in a Linked CANS Affect Eligibility

Responses in the finalized and linked CANS-NY will affect the whether not the system will calculate eligibility for HCBS.

<p>D. Avoidance</p> <p>This item refers to a child who avoids or tries to avoid places or people who remind them of earlier traumatic experiences. This may manifest as avoidance of thoughts, feelings or conversations about a traumatic event; avoidance of actual places or people connected to the event or who may remind the child of the event. Given a child's lack of control over their circumstances avoidance behaviors may manifest as clinginess to caregivers.</p> <ul style="list-style-type: none"><input type="radio"/> No selection<input type="radio"/> 0 - No evidence of avoidance symptoms<input type="radio"/> 1 - Child exhibits mild avoidance symptoms that do not significantly interfere with day-to-day functioning<input checked="" type="radio"/> 2 - Child exhibits moderate avoidance symptoms with the traumatic event(s). Symptoms are the child or caregiver(s) and negatively impact functioning<input type="radio"/> 3 - Child exhibits multiple or severe avoidance symptoms. The intensity or frequency of these symptoms are overwhelming for the child or caregiver(s) and significantly interfere with day-to-day functioning in many areas. The child may have difficulty with thoughts and feelings as well as situations associated with the trauma	<p>B. Preschool/Child Care Behavior</p> <p>This item describes behavior when attending school.</p> <ul style="list-style-type: none"><input type="radio"/> No selection<input type="radio"/> 0 - Child is behaving well in preschool/child care<input type="radio"/> 1 - Child is behaving adequately in preschool/child care although some mild behavior problems may exist. Child may have a history of behavioral problems<input checked="" type="radio"/> 2 - Child is having moderate behavioral problems at preschool/child care. Child is disruptive and many types of interventions have been implemented<input type="radio"/> 3 - Child is having severe problems with behavior in preschool/child care. Child is frequently or severely disruptive. The threat of expulsion is present
<p>E. Numbing</p> <p>This item refers to a child who has experienced traumatic events and displays a diminished capacity to feel or experience and express a range of emotions. This may manifest as difficulty feeling or expressing emotions such as happiness, anger or fear. The child may also withdraw from people and activities she/he used to enjoy (i.e., play). The child may also have a sense of a foreshortened future (i.e., no expectation of finishing school) or negative beliefs about self or the world (i.e., "I am bad" "I did this"). The child may also have difficulty remembering important aspects of the event.</p> <ul style="list-style-type: none"><input type="radio"/> No selection<input type="radio"/> 0 - No evidence of numbing responses<input type="radio"/> 1 - Child exhibits mild numbing symptoms that do not significantly interfere with day-to-day functioning<input checked="" type="radio"/> 2 - Child exhibits moderate numbing symptoms with the traumatic event(s). Symptoms are the child or caregiver(s) and negatively impact functioning<input type="radio"/> 3 - Child exhibits multiple or severe numbing symptoms associated with the traumatic event(s). The intensity or frequency of these symptoms are overwhelming for the child or caregiver(s) and impede day-to-day functioning in many areas. The child may have a marked loss of interest or participation in significant activities, difficulty experiencing intense emotions or being comforted from others, and experience a sense of a foreshortened future	<p>C. Preschool/Child Care Achievement</p> <p>This item is rated based on developmental age rather than chronological age.</p> <ul style="list-style-type: none"><input type="radio"/> No selection<input type="radio"/> 0 - Child is doing well acquiring new skills<input type="radio"/> 1 - Child is doing adequately, acquiring new skills with some challenges. Child may be able to compensate with extra adult support<input checked="" type="radio"/> 2 - Child is having moderate problems with acquiring new skills. Child may not be able to retain concepts or meet expectations even with adult support in some areas<input type="radio"/> 3 - Child is having severe achievement problems. Child may be completely unable to understand or participate in skill development in most or all areas

Linking the CANS-NY Assessment to the HCBS/LOC



Linked CANS-NY and HCBS/LOC

Linked HCBS/LOC:

- User **MAY** edit the Intake/Demographics data copied from the CANS-NY.
- User may **NOT** edit any of the overlapping functional criteria copied from the CANS-NY.
- Prior to sign/finalize, a link to the CANS-NY can be deleted.

A Linked HCBS/LOC Assessment



Andrea Anderson

Identification Info

Assessments

01/08/2020 HCBS/LOC Elig 0-5

Reference Date

Target Pop Selection

Link to CANS-NY

01/07/2020 CANS-NY 0-5

Intake / Demographics

HCBS/LOC Eligibility 0-5

Serious Emotional Disturbance

Medically-Fragile

Dev-Disability-&-Foster-Care

Dev-Disability-&-Med-Frag

Sign/Finalize

Assessment Outcomes

01/07/2020 CANS-NY 0-5

05/21/2019 CANS-NY 0-5

04/29/2019 HCBS/LOC Elig 0-5

Attestations

Functional Criteria

A. Caregivers Strengths & Needs

The score sheet for the caregiver domain has space to rate up to 4 caregivers, if applicable.

If the child lives in a foster boarding home, complete (at least) 2 caregiver sections – one for the foster parent and one for the parent(s) from who the child was removed.

If the child is freed for adoption, do not complete a caregiver section for the child's parents.

If the child has a permanency goal other than return home, complete a caregiver section on the intended permanency person (if identified).

If the child lives in a congregate foster care setting, there will be no foster parent to rate. For children whose permanency goal is APLA, no caregiver section should be completed. For children with other permanency goals, rate the parent from whom the child was removed and/or a different permanency resource person.

Skip any caregiver sections that are not applicable and proceed to section B. Child Strengths.

Caregiver #1

Caregiver name

Sandra McKensie

Relationship to child

- No selection
- Mother
- Father
- Kinship Foster Parent
- Non-kin Foster Parent
- Other Relative
- Other Non-relative

14. Decision-Making

This item describes the caregiver's ability to comprehend and anticipate the consequences of decisions; to plan, implement, and monitor a course of action; and to judge and self-regulate behavior according to anticipated outcomes.

- No selection
- 0 - The caregiver has no evidence of problems with decision-making
- 1 - The caregiver has mild or occasional problems thinking through problems or situations but decision-making abilities do not interfere v
- 2 - The caregiver has moderate or frequent problems thinking through problems or situations and this interferes with their ability to func
- 3 - The caregiver has severe problems with decision-making and judgment placing the child at risk

15. Parenting Stress

This item reflects the degree of stress or burden experienced by the caregiver as a result of the needs of all children in the household, including target child.

- No selection
- 0 - Caregiver is able to manage the stress of the child/children's needs
- 1 - Caregiver has some problems managing the stress of the child/children's needs
- 2 - Caregiver has notable problems managing the stress of the child/children's needs. This stress interferes with their capacity to give care
- 3 - Caregiver is unable to manage the stress associated with the child/children's needs. This stress prevents caregiver from parenting

Rules About Signed/finalized Assessments



Rules:

- **Assessments can not be signed/finalized if all of the data items are not updated.**
- **Once an assessment is signed/finalized, it can not be updated or deleted. PERIOD!**
- **The assessor must select the correct Target Population prior to linking the HCBS/LOC to the CANS-NY.**
- **It is essential you review the linked CANS and HCBS/LOC before sign and finalized the HCBS/LOC.**

Children's Behavioral Health Assessments - Recap

Assessments can not be signed/finalized if all of the data items are not updated.



All the fields required to finalize the assessment have not been completed. Please use the "Check Required" feature to identify the fields that need to be completed. You cannot sign the assessment until all fields required for signing have been completed. Use the 'Check Required' feature to find missing items.

Sign/Finalize

Assessor Signature

Instructions:
Enter name (required), title and/or any comment then click on [Sign/Finalize](#)

Click the 'Check Required' button below to ensure that all data required to finalize an assessment has been entered.

Check Required

Assessor Name

Adam King

Assessor Title

Assessor

Assessor Comments

I certify that this assessment is, to the best of my ability, accurate and complete. I understand that, after I click the [Sign/Finalize](#) button, the

Sign/Finalize

Children's Behavioral Health Assessments - Recap

Signed/finalized assessments can NOT be edited or deleted.



The screenshot shows a software interface for a child's behavioral health assessment. The interface is divided into several sections:

- Top Bar:** Contains buttons for '+ Add', 'Refresh', 'Delete', and 'Click Missing'. The 'Delete' button is circled in red.
- Left Panel:** Shows the user's name 'Andrea Anderson' and a tree view of assessment sections. The 'Assessments' section is expanded, showing '01/09/2020 HCBS/LOC Elig 0-5'. Under this, 'Serious Emotional Disturbance' is highlighted with a blue box.
- Right Panel:** Displays the 'Serious Emotional Disturbance Target Population' section. It includes two questions with radio button options:
 - 'Child has Serious Emotional Disturbance (SED) as defined in the help file' with options 'No selection' and 'Yes' (selected).
 - 'Primary Diagnosis' with a list of diagnostic categories, each with a radio button. The 'Anxiety Disorders' option is selected.

Children's Behavioral Health Assessments - Recap

Before attempting to link the HCBS to the CANS-NY be sure the correct Target Population is selected.



? Target Population Selection

Note: The target population selection will be locked when there is a linked CANS-NY

Select the applicable target population

- No Selection
- Serious Emotional Disturbance
- Medically Fragile
- Developmental Disability & Foster Care (DDRO only)
- Developmental Disability & Medically Fragile (DDRO only)

Children's Behavioral Health Assessments - Recap

It is essential you review the CANS-NY assessment before you link to the HCBS/LOC.



CANS-NY 0-5

- A: Caregivers
 - A: Caregiver #1
 - A: Caregiver #2
 - A: Caregiver #3
 - A: Caregiver #4
- B: Child Strengths
- C: Child Needs & Functioning
- D: Child Development
- E: Child Risk Factors
- F: Child Risk Behaviors
- G: Adverse Childhood Exp.
- H: Module Screening
- 91: Trauma Symptoms**
- 92: Behavioral Health
- 93: Medical Health
- 94: Preschool/Child Care

Sign/Finalize

Assessment Outcomes

Review/Consult

91. TRAUMA SYMPTOMS MODULE

If the Trauma Symptoms Module is completed, the Behavioral Health Module should be completed as well.

A. Traumatic Grief

This item refers to the grief a child may experience as a result of the death or separation from significant caregivers, siblings or other important figures in the child's life. This child may be preoccupied with the separation from their parents (i.e., clinginess, worrying about caregivers' safety) and this preoccupation may impact their ability to function in one or more areas. Conversely, the child may actively avoid thinking or talking about the person they lost. This child may also experience repeated images regarding this loss (i.e., intrusive memories or nightmares).

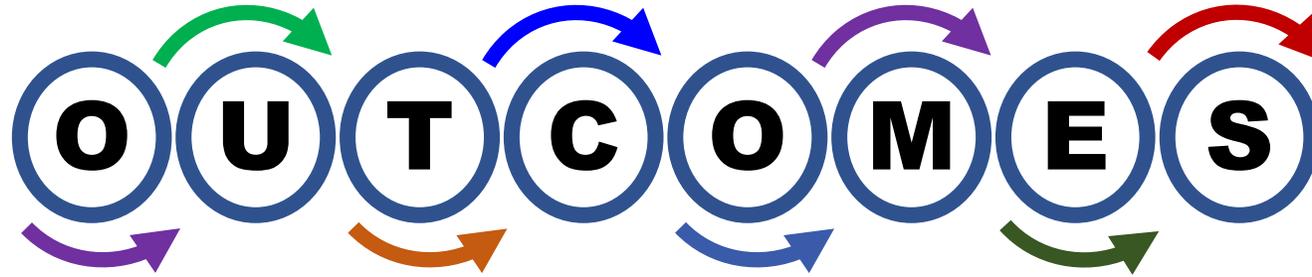
- No selection
- 0 - There is no evidence that the child is experiencing traumatic grief reactions or separation problems with day-to-day functioning
- 1 - Child is experiencing a mild level of traumatic grief due to death or loss/separation
- 2 - Child is experiencing a moderate level of traumatic grief or difficulties with separation
- 3 - Child is experiencing significant traumatic grief reactions. Child exhibits impaired functioning

B. Re-experiencing

This item refers to a child who re-enacts or has intrusive memories following a traumatic event(s). These symptoms consist of intrusive memories or reminders of traumatic events, including nightmares, flashbacks, and repetitive play with themes of specific traumatic experiences. Symptoms also include intense distress or physiological reactivity (sweating, heart racing) after exposure to reminders (external or internal) of the event(s).

- No selection
- 0 - No evidence of intrusive symptoms
- 1 - Child exhibits mild re-experiencing symptoms that do not significantly interfere with
- 2 - Child exhibits moderate re-experiencing symptoms associated with the traumatic event
- 3 - Child exhibits multiple and/or severe re-experiencing symptoms associated with the traumatic event. Child exhibits frequent and overwhelming intrusive symptoms/distressing memories. The child exhibits repetitive play with themes of the traumatic event or sexual play with adults or related behaviors that put the safety of the child or others at risk.

Assessment Outcomes

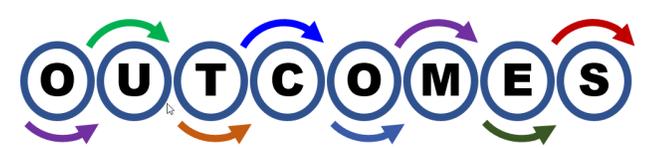


The Signed/finalized CANS-NY provides the “acuity score”

The signed/finalized HCBS/LOC provides summary information and details pertaining the HCBS Eligibility.

Our Goal: Work towards returning children to home and community!

Assessment Outcomes – CANS-NY



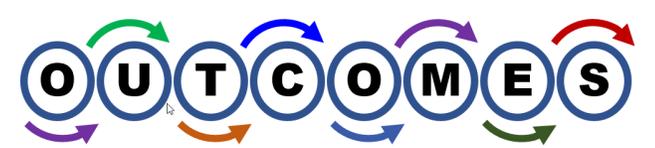
Andrea Anderson

- Identification Info
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 - Link to CANS-NY
 - 01/09/2020 CANS-NY 0-5
 - Intake / Demographics
 - HCBS/LOC Eligibility 0-5
 - Sign/Finalize
 - Assessment Outcomes
 - 01/09/2020 CANS-NY 0-5
 - Reference Date
 - Intake / Demographics
 - CANS-NY 0-5
 - Sign/Finalize
 - Assessment Outcomes**
 - Review/Consult

Summary

Health Home Acuity Score High

Assessment Outcomes – HCBS/LOC



Summary

Signing and finalizing the outcomes is required to start the one year HCBS Eligibility period, if eligible

HCBS/LOC Eligibility

Yes, eligible

Serious Emotional Disturbance

Not selected

Medically Fragile

Not selected

Developmental Disability & Foster Care

Yes

Developmental Disability & Medically Fragile

Choice to Participate in HCBS

If determined eligible, did the child/youth's caregiver or the self-consenting youth choose to participate in HCBS?

- No Selection
- No. The child/youth's caregiver or self-consenting youth chose NOT to participate in HCBS.
- Yes. The child/youth's caregiver or self-consenting youth chose TO participate in HCBS.

If no, why were HCBS services declined?

- No Selection
- Does not feel HCBS will help them reach their goals.
- Currently receiving community based services that are meeting their needs.
- Residential setting is not considered home and community based, and there are no current plans to transition into a HCBS-compliant setting.

Reports in the CANS NY and HCBS/LOC



[Search](#) [Reports](#) [Tools](#) [Help](#) [Logout](#)

Assessment Results

Complete Assessment

Strengths and Needs

[Search](#) [Reports](#) [Tools](#) [Help](#) [Logout](#)

HCBS Results

HCBS Complete

What are the child's the strengths and needs?

What are the results of the assessment?

What services are recommended for the child?

Reports in the CANS NY and HCBS/LOC

Uniform Assessment System - New York CANS-NY 0 - 5 Strengths and Needs Report

Anderson, Andrea

Date of Birth: 10/21/2015

Medicaid ID: AA12568A

Assessment Date: 01/09/2020

Assessment Type: CANS-NY Re-assessment prior to 6 months

Finalized Date: 01/09/2020

Organization conducted on behalf of:
Adirondack Health Institute Inc.

Reassessment Reason: Significant change in child's functioning (including increase or decrease of symptoms or new diagnosis)

The Strengths and Needs Report is designed to provide guidance and assistance to the care manager to identify the strengths and needs to discuss with the child and family. During this collaborative person-centered discussion the child and family should determine which items to include within the Plan of Care. Not every domain item from this report is required to be included in the Plan of Care.

Useful Strengths - Child

Talk with the child and family about which items below represent strengths to be used in the Plan of Care. These strengths are 0's and 1's. How will you build upon these in the Plan of Care?

B: Child Strengths

B.28. Family Of Origin

1 - Moderate level of strengths and family members are loving with generally good communication and ability to enjoy each other's company. There may be some problems between family members

B.30. Social Relationships

1 - Child has formed a positive interpersonal relationship with at least one non-caregiver. Child responds positively to social initiations by adults, but may not initiate such interactions

B.31. Relationship Stability

1 - Child has had stable relationships but there is some concern about instability in the near future due to such things as impending

Reports in the CANS NY and HCBS/LOC

Uniform Assessment System - New York HCBS/LOC 0 - 5 Complete Report

Anderson, Andrea

Date of Birth: 10/21/2015

Medicaid ID: AA12568A

Assessment Date: 01/09/2020

Finalized Date: 01/09/2020

Section Reference Date

Assessment Reference Date **01/09/2020**
Organization which conducted this assessment **Children's Home of Poughkeepsie (HHCMA)**

Section Link to CANS-NY

Linked CANS-NY assessment **01/09/2020 CANS-NY 0-5**

Section Intake/Demographics

Early Reassessment

Is this an HCBS/LOC reassessment prior to 10 months for a child already determined eligible? **No**

Residential Setting at Time of Assessment:

Select the one that represents the child's living arrangement at the time of the current assessment. The person's living arrangement may be long-standing or temporary. **Private housing (house/apartment/rented room)**

Child Lives With:

Does the child/youth live on their own with no others? **No**

Does youth live with his/her own child(ren)?

Does youth live with his/her own child(ren)? **Not Applicable, no children**

How many adults live in the same household as this child?

How many adults live in the same household as this child? Enter NA when this information is not known or is not available. **1**

How many other children live in the same household as this child?

How many other children live in the same household as this child? Enter NA when this information is not known or is not available. **1**

County of Responsibility:

Columbia

Has there been residential instability over the LAST 2 YEARS?

and evicted from the home, homeless, 3 or more moves, no permanent **Yes**

Reports in the CANS NY and HCBS/LOC

Using the Data

- Printing the entire CANS outcomes.
- Determine when reassessments are due.
- View when there are potential updates to the POC.

AutoSave Off CansHcbsAggregate-1579007366300-1 - Read-Only - Excel

File Home Insert Page Layout Formulas **Data** Review View Developer Help Acrobat Forms Tell me what you want to do

Get From From From Table/ Recent Existing Refresh Properties Sort Filter Clear Reapply Text to Flash Remove Data Consolidate Relationships Manage What-If Forecast Group Data Text/CSV Web Range Sources Connections All Edit Links Sort Filter Reapply Validation Columns Fill Duplicates Validation Consolidate Relationships Manage Data Model Analysis Forecast Sheet

Get & Transform Data Queries & Connections Sort & Filter Data Tools Forecast

F20

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
1	Reporting Period	Last Name	First Name	Date of Birth	CIN	Child Transited from 1915c	Asmt Type	CANS-NY Type	Health Home Name	MC Plan Name	Assessing Organization	Asmt Refer Date	Linked CANS-NY Refer Date	Linked CANS-NY Finalized Date	Reason for early ReAssess	County of Responsibility	LPHA Form
2	Reasmt Due: Jul-2020 - Jul-2020	Anderson	Alison	10/21/2015	AA22334A	No select	CANS-NY	CANS-NY	Adirondack UnitedHe	Children's Home of Poughl	1/9/2020					Columbia	
3	Reasmt Due: Jul-2020 - Jul-2020	Anderson	Andrea	10/21/2015	AA12568A	Yes, DOH	CANS-NY	CANS-NY	Adirondack UnitedHe	Children's Home of Poughl	1/9/2020				Significan	Columbia	
4	Reasmt Due: Jul-2020 - Jul-2020	Anderson	Harley	10/21/2015	BB22334B	No select	CANS-NY	CANS-NY	Adirondack UnitedHe	Children's Home of Poughl	1/13/2020					Albany	
5	Reasmt Due: Jul-2020 - Jul-2020	Blessing	Maria	10/21/2015	DD22334D	No select	CANS-NY	CANS-NY	Adirondack Health Ir	Children's Home of Poughl	1/13/2020					Columbia	
6	Reasmt Due: Jul-2020 - Jul-2020	lisa	SED	1/1/2017	HJ26276J	No select	CANS-NY	CANS-NY	Adirondack Health Ir	Children's Home of Poughl	1/13/2020				Significan	Albany	
7	Reasmt Due: Jul-2020 - Jul-2020	test	lisa	1/1/2016	HW26262J	No select	CANS-NY	CANS-NY	Adirondack Health Ir	Children's Home of Poughl	1/13/2020					Albany	
8	Reasmt Due: Jul-2020 - Jul-2020	test	SED	1/1/2018	GW26273I	No select	CANS-NY	CANS-NY	Adirondack Health Ir	Children's Home of Poughl	1/13/2020					Albany	
9	Reasmt Due: Jul-2020 - Jul-2020	test	test	1/1/2016	WT99999H	No select	CANS-NY	CANS-NY	Adirondack Health Ir	Children's Home of Poughl	1/13/2020					Albany	
10	Reasmt Due: Jul-2020 - Jul-2020	Williams	Jason	10/21/2015	BB55667B	No select	CANS-NY	CANS-NY	Adirondack Health Ir	Children's Home of Poughl	1/10/2020					Columbia	
11																	
12																	

Trying it Out in the UAS-NY



Working in the Assessments

- Prepping for the assessment.
- Working in a CANS-NY assessment.
- Linking an HCBS/LOC assessment.
- Troubleshooting the assessment at sign/finalize.
- Viewing Outcomes.
- Viewing Reports.

Welcome to Training!



Contact



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<http://bit.ly/uasny>

Who We Are

The Uniform Assessment System for New York (UAS-NY) is a web application that allows qualified assessors to securely conduct standardized health assessments which generate outcomes that are used to determine eligibility and service level authorization, as well as guide care planning for New York State residents.

Our Mission

The UAS-NY's mission is to maintain and advance the leading repository for health information and assessment instruments while providing exceptional communication, training, and support to our 10,000 users and 1,800 organizations. We make the first step in developing individualized service plans efficient and easy to ensure New York State residents receive the right care, within the right setting, at the right time.