## Attachment A: Form for Submitting Comments regarding Draft Health Home Application to Serve Individuals with Intellectual and/or Developmental Disabilities

Name of Provider/Stakeholder:		
Provider/Stakeholder Type*		
Address:		
e.g. self-advocate, parent, family	membe	r, MSC provider, Medicaid Service Coordinator, HCBS Waiver Provider, etc.)
Draft Hea	alth Hom	e Application to Serve Individuals with Intellectual and/or Developmental Disabilities
related to the Draft Application to Ser	ve Individ	nents, please use this form (which provides an outline of the application's content) to submit comments or questions duals with Intellectual and/or Developmental Disabilities (Part I) released on June 30, 2017. Please submit this form on mail to HHIDD@health.ny.gov with "Name of Your Organization- Comments to Draft Application" in the subject line.
		Introduction/Comments/Recommendations
Section Name	Page #	Questions/Comments/Recommendations
ntroduction		
Submission of Comments		
Letter of Interest		
Application Attachments		
Application Review Process		
Part I of the I/DD Health Home Application		
Section Name	Page #	Questions/Comments/Recommendations
<ol> <li>Programmatic Goals and Role of CCO/HHs in the I/DD Medicaid Transformation</li> </ol>		

2. Anticipated Schedule for the Implementation of I/DD Health Homes	
3. New York's Health Home Care  Management Model and Expanding  and Tailoring the Health Home Model  to serve I/DD	
4. Health Homes in New York State and Health Home Eligibility Requirements	
5. The Health Home - the Role of the Primary Governance Entity	
6. Who Can Apply to be a CCO/HH?	
7. Regional Designation of I/DD Health Homes	
8. Regional Phase-in of the Designation and Implementation of I/DD Health Homes	
9. Health Home Core Services and Requirements	
9.1 Comprehensive Care Management	
9.2 Care Coordination and Health Promotion	
9.3 Comprehensive Transitional Care	

9.4 Individual Family and Support	
9.5 Referral to Community and Social Support Services	
9.6 Use of Health Information Technology to Link Services	
10. Other Health Home Standards Requirements	
10.a Minimum Standards and Requirements for Health Home Life Plans	
10.b Assessments and Requirements	
10.c Requirements for Monitoring and Implementing the Life Plan	
10.d Requirements for Care Planning Meetings	
10.e I/DD Health Home Care Manager Qualifications and Requirements	
10.f. Willowbrook	
10.g State Regulatory Requirements	

11. CCO/HH Payments and Billing Standards	
12. CCO/HH Network Requirements, and State and Provider Agreements	
13. General Enrollment Information and Member Consent to Enroll	
14. Requirements for Communicating and Sharing Information with I/DD CCO/HH Members	
15. Performance Management and Quality Metrics	
16. Start-up Grants for Successful CCO/ HH Applicants	
Additional Comments:	