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## Introduction

- When a member is enrolled in one Health Home and would like to be enrolled in another Health Home, the MAPP HHTS transfer function can be used to request the member transfer and to facilitate the end of one enrollment segment and the creation of a new enrollment segment once that transfer request is approved.
- As part of Release 3.1, Health Homes can now initiate the **transfer in** of an enrolled member into their HH from another HH in addition to initiating the **transfer out** of an enrolled member out of their HH into another HH (or from one CMA to another CMA within their HH).
- The transfer function also tracts rejected transfers and transfer requests that go unanswered by a receiving Health Home.
- The following 3 slides introduces scenarios that will be referenced throughout the presentation.



## **Scenario 1: Jack**

Jack is currently enrolled with HH A, but while at his PCP he meets with a HH representative from HH B and expresses that he would like to be served by HH B since his wife also receives services from this HH.



## Scenario 2: Wonda

HH A has been working with Wonda for 1 year, but Wonda is moving outside of HH A's service area. HH A decides to transfer Wonda to HH B, which serves the location Wonda is moving to.



## **Scenario 3: Jessica**

Jessica has been working with HH A and CMA C since 2018. CMA C has recently lost a number of staff and no longer has the ability to serve Jessica effectively. HH A determines it is most appropriate to transfer Jessica to CMA D, where she can be better served.



## **Initiating a Transfer**



August 1<sup>st</sup> 2019

# **Initiating a Transfer**

- When a member is enrolled in one Health Home and would like to be enrolled in another Health Home, a HH worker can initiate a Transfer in the MAPP HHTS.
- HHs will now have the ability to initiate either a **transfer in** or a **transfer out**:
  - **Transfer in** occurs if a HH would like to work with a member that is currently enrolled with another HH.
  - Transfer out occurs if:
    - A HH would like to transfer a member currently enrolled in their HH to a different HH (and therefore stop serving the member).
    - A HH would like to transfer the member from one CMA to another, within their HH
- Transfers are initiated on the "Member CIN Search" Screen, instead of from the member's assignment tab.



## Initiating a Transfer: Scenarios



August 1<sup>st</sup> 2019

#### How to Initiate a Transfer In Request: Jack HH A to HH B, HH B has to request that Jack be transferred in from HH A

Scenario: Jack requests that HH B begin to provide his HH services. A HH B worker should:

- 1. Navigate to the "Member CIN Search" Screen
- 2. Search for Jack by entering his CIN in the 'Search Criteria'
- 3. Click on the member hyperlink to open the 'Member Search Report'
- 4. From the 'Member Search Report' Click on 'Transfer-In Member'

ember Search Re	port						1
lember ienerated On atest Address atest Phone ledicaid End Date ssigned Health Hom nrolled Health Hom lanaged Care Plan toverage Code overage Code Descri	2	Uack - CC12345C 7/22/2019 2426 CAPRI PL, N BELI HEALTH INSURANCE P NE - 04082293 7/1/20 30 30-CLIENT IS ELIG E ENROLLED IN A PCC Transfer-In Reque	LAN OF GREATER 19 - 12/31/9999	Program Participation Opt-Out Signature Da Opt-Out Submitston I Opt-Out Submitted by Opt-Out Submitted by Pending Transfer Crea Pending Transfer Effe Pending Transfer Initi	ite Date / User / Organization Name ate Date ective Date		
ast 5 Unique Prov Service Date	iders Provider	Address 1	Address 2	City	State	Zip	Phone
3/20/2019	QUALITY LABORATORY SERVICES	2818 OCEAN AVE STE 5		BROOKLYN	NY	11235-3170	7186465100
3/20/2019 1/23/2019	LABORATORY			BROOKLYN	NY	11235-3170 11944-1222	7186465100
	LABORATORY SERVICES EASTERN LONG	STE 5					
1/23/2019	LABORATORY SERVICES EASTERN LONG ISLAND HOSPITAL EASTERN LONG	STE 5 201 MANOR PL		GREENPORT	NY	11944-1222	5164775100
1/23/2019 1/23/2019	LABORATORY SERVICES EASTERN LONG ISLAND HOSPITAL EASTERN LONG ISLAND HOSPITAL SUNRISE MEDICAL	STE 5 201 MANOR PL 201 MANOR PL		GREENPORT	NY	11944-1222 11944-1222	5164775100 6314775425
1/23/2019 1/23/2019 1/16/2019 1/14/2019	LABORATORY SERVICES EASTERN LONG ISLAND HOSPITAL EASTERN LONG ISLAND HOSPITAL SUNRISE MEDICAL LABORATORIES SEAFIELD CENTER INC	STE 5 201 MANOR PL 201 MANOR PL 240 MOTOR PKWY		GREENPORT GREENPORT HAUPPAUGE WESTHAMPTON	NY NY NY	11944-1222 11944-1222 11788-5105	5164775100 6314775425 8007820282
1/23/2019 1/23/2019 1/16/2019 1/14/2019	LABORATORY SERVICES EASTERN LONG ISLAND HOSPITAL EASTERN LONG ISLAND HOSPITAL SUNRISE MEDICAL LABORATORIES SEAFIELD CENTER INC	STE 5 201 MANOR PL 201 MANOR PL 240 MOTOR PKWY 7 SEAFIELD LN	in Date	GREENPORT GREENPORT HAUPPAUGE WESTHAMPTON	NY NY NY	11944-1222 11944-1222 11788-5105 11978-2714	5164775100 6314775425 8007820282
1/23/2019 1/23/2019 1/16/2019 1/14/2019 Member's R/E Cod	LABORATORY SERVICES EASTERN LONG ISLAND HOSPITAL EASTERN LONG ISLAND HOSPITAL SUNRISE MEDICAL LABORATORIES SEAFIELD CENTER INC	STE 5 201 MANOR PL 201 MANOR PL 240 MOTOR PKWY 7 SEAFIELD LN		GREENPORT GREENPORT HAUPPAUGE WESTHAMPTON	NY NY NY	11944-1222 11944-1222 11788-5105 11978-2714 te	5164775100 6314775425 8007820282
1/23/2019 1/23/2019 1/16/2019 1/14/2019 Member's R/E Code R/E Code	LABORATORY SERVICES EASTERN LONG ISLAND HOSPITAL EASTERN LONG ISLAND HOSPITAL SUNRISE MEDICAL LABORATORIES SEAFIELD CENTER INC	STE 5 201 MANOR PL 201 MANOR PL 201 MANOR PKWY 7 SEAFIELD LN Beg	2019	GREENPORT GREENPORT HAUPPAUGE WESTHAMPTON	NY NY NY End Da	11944-1222 11944-1222 11788-5105 11978-2714 te 9999	5164775100 6314775425 8007820282



## How to Initiate a Transfer In Request: Jack from HH A to HH B Continued

5. On the 'Transfer In Member' popup complete:

- Begin Date of the Transfer (*if accepted, this is the begin date of HH B's new segment with the member and the day after HH A's segment with the member will end*).
- CMA (that the member will be enrolled with if the transfer is accepted)
- Reason for Transfer (this is a required field)
- Comments, if you have any

6. Click Next

- 7. Enter any Consent and POC information
- 8. Click Create
- 9. The 'Member Search Report' will display, indicating that HH B created a *pending* Transfer

Jack's pending transfer record will now be available on HH A's **My Transfers** screen and Assignment Download File. It is now the responsibility of HH A to accept or reject the pending transfer.

Transfer In Request	? 2
Create Enrollment Segment     Consent	
Step 1: Create Enrollment Segment	
Enter Segment Details	<b>•</b>
Begin Date	8/1/2019
Provider Details	<b>•</b>
Health Home	BESTSELF BEHAVIORAL HEALTH INC
Care Management Agency	CMA C
Reason for Transfer	Member requested Transfer
Comments	▼
Cancel	Refresh CMA list Next

Create Enrollment Segment	
Create Enrollment Segment     Consent	
Step 2: Consent	
Consent to Enroll Date 7/22/2019	
Consent to Share Information Date 7/22/2019	
Consenter Parent 💽	
Plan of Care Date 7/22/2019 × 🧠	
'n	ent
Back Create	L

#### How to Initiate a Transfer Out Request: Wonda from HH A to HH B HH A has to request that Wonda be transferred out to HH B

Scenario: HH A initiates a **transfer out** to HH B. A HH A worker should:

- 1. Navigate to the *"Member CIN Search"* Screen
- 2. Search for Wonda by entering her CIN in the 'Search Criteria'
- 3. Click on the member hyperlink to open the 'Member Search Report'
- 4. From the 'Member Search Report' click on 'Transfer-Out Member'

Aember Search Re	eport						?
1ember		Wonda - AA12345	A	Program Participation	n		
Generated On		7/22/2019		Opt-Out Signature Da	ate		
atest Address		97 GLOVER AVE APT 2, 10704	YONKERS, NY,	Opt-Out Submission	Date		
atest Phone		207 2992088		Opt-Out Submitted b	y User		
ledicaid End Date				Opt-Out Submitted b	y Organization Name		
ssigned Health Hom	1e			Pending Transfer Cre	eate Date		
nrolled Health Home	e	HH A -11111111		Pending Transfer Effe	ective Date		
lanaged Care Plan		UNITED HEALTHCARE 01403176 12/1/2018 -		Pending Transfer Init	tiated By		
Coverage Code		30					
Coverage Code Desci	ription	30-CLIENT IS ELIG FOR					
-3 2000	Click Here	INROLLED IN A PCP (P	2				
Print Tr	ansfer-Out Member	Transfer-In Reque	st				
	2						
Service Date	Provider	Address 1	Address 2	City	State	Zip	Phone
3/15/2019	INTERFAITH MEDICAL CENTER	1545 ATLANTIC AVE		BROOKLYN	NY	11213-1166	7186134003
3/15/2019 3/15/2019				BROOKLYN	NY	11213-1166 11213-1122	7186134003 7186134000
	MEDICAL CENTER INTERFAITH PROFESSIONAL	AVE 1545 ATLANTIC	555 PROSPECT PL				
3/15/2019	MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH	AVE 1545 ATLANTIC AVE JEWISH HSP BKLYN	555 PROSPECT PL	BROOKLYN	NY	11213-1122	7186134000
3/15/2019 3/7/2019	MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH MEDICAL CENTER INTERFAITH	AVE 1545 ATLANTIC AVE JEWISH HSP BKLYN TB 1545 ATLANTIC	555 PROSPECT PL	BROOKLYN BROOKLYN	NY	11213-1122 11238-4266	7186134000
3/15/2019 3/7/2019 2/8/2019 1/24/2019	MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH MEDICAL CENTER INTERFAITH MEDICAL CENTER INTERFAITH EMERGENCY MEDICINE PC	AVE 1545 ATLANTIC JEWISH HSP BKLYN TB 1545 ATLANTIC AVE FL 3 1545 ATLANTIC	555 PROSPECT PL	BROOKLYN BROOKLYN BROOKLYN	NY NY NY	11213-1122 11238-4266 11213-1122	7186134000 7189357000
3/15/2019 3/7/2019 2/8/2019	MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH MEDICAL CENTER INTERFAITH MEDICAL CENTER INTERFAITH EMERGENCY MEDICINE PC	AVE 1545 ATLANTIC JEWISH HSP BKLYN TB 1545 ATLANTIC AVE FL 3 1545 ATLANTIC	555 PROSPECT PL	BROOKLYN BROOKLYN BROOKLYN	NY NY NY	11213-1122 11238-4266 11213-1122	7186134000 7189357000
3/15/2019 3/7/2019 2/8/2019 1/24/2019	MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH MEDICAL CENTER INTERFAITH MEDICAL CENTER INTERFAITH EMERGENCY MEDICINE PC	AVE 1545 ATLANTIC JEWISH HSP BKLYN TB 1545 ATLANTIC AVE FL 3 1545 ATLANTIC AVE	555 PROSPECT PL	BROOKLYN BROOKLYN BROOKLYN	NY NY NY	11213-1122 11238-4266 11213-1122	7186134000 7189357000
3/15/2019 3/7/2019 2/8/2019 1/24/2019 tember's R/E Cod	MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH MEDICAL CENTER INTERFAITH MEDICAL CENTER INTERFAITH EMERGENCY MEDICINE PC	AVE 1545 ATLANTIC JEWISH HSP BKLYN TB 1545 ATLANTIC AVE FL 3 1545 ATLANTIC AVE	n Date	BROOKLYN BROOKLYN BROOKLYN	NY NY NY NY	11213-1122 11238-4266 11213-1122	7186134000 7189357000
3/15/2019 3/7/2019 2/8/2019 1/24/2019 tember's R/E Code R/E Code	MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH MEDICAL CENTER INTERFAITH MEDICAL CENTER INTERFAITH EMERGENCY MEDICINE PC	AVE 1545 ATLANTIC AVE JEWISH HSP BKLYN TB 1545 ATLANTIC AVE FL 3 1545 ATLANTIC AVE Begi	n Date 2019	BROOKLYN BROOKLYN BROOKLYN	NY NY NY NY End Date	11213-1122 11238-4266 11213-1122 11213-1122	7186134000 7189357000 7186134444
3/15/2019 3/7/2019 2/8/2019 1/24/2019 tember's R/E Code R/E Code	MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH MEDICAL CENTER INTERFAITH MEDICAL CENTER INTERFAITH EMERGENCY MEDICINE PC	AVE AVE 1545 ATLANTIC AVE JEWISH HSP BKLYN TB 1545 ATLANTIC AVE FL 3 1545 ATLANTIC AVE Begi 3/1/2	n Date 2019	BROOKLYN BROOKLYN BROOKLYN	NY NY NY NY End Date	11213-1122 11238-4266 11213-1122	7186134000 7189357000

## How to Initiate a Transfer Out Request: Wonda from HH A to HH B Continued

5. On the 'Transfer Out Member' popup complete:

- Effective Date of the Transfer (*if accepted, this is the begin date of HH B's new segment with the member and the day after HH A's segment with the member will end*).
- Health Home (*HH B in this scenario*)
- Reason for Transfer (required field)
- Comments, if you have any

#### 6. Click Save

7. The 'Member Search Report' will display, indicating that HH A created a *pending* Transfer

	Member Search Report				?
	Member	Wonda	Program Participation		
	Generated On	7/22/2019	Opt-Out Signature Date		
fc	Latest Address	97 GLOVER AVE APT 2, YONKERS, NY, 10704	Opt-Out Submission Date		
	Latest Phone	207 2992088	Opt-Out Submitted by User		
	Medicaid End Date		Opt-Out Submitted by Organization Name		
	Assigned Health Home		Pending Transfer Create Date	7/22/2019	
L	Enrolled Health Home	HH A - 11111111	Pending Transfer Effective Date	8/1/2019	
	Managed Care Plan	UNITED HEALTHCARE OF NY INC - 01403176 12/1/2018 - 12/31/9999	Pending Transfer Initiated By	HH A	
	Coverage Code	30			
L	Coverage Code Description	30-CLIENT IS ELIG FOR MCAID AND ENROLLED IN A PCP (P)			
	Print Transfer-Out Member	Transfer-In Request			

Transfer Out Marshar	Danding Transfor Effective Data	? ×
Transfer Out Member		
		* required field
Effective Date *	8/1/2019	
Provider Details		-
Health Home	HH B	
Care Management Agency		
Reason for Transfer*	Member moved out of service county	
Comments		-
Member Moved to Wayne County		
Cancel		Save

Wonda's pending transfer record will now be available on HH B's **My Transfers** screen and Assignment Download File. It is now the responsibility of HH B to accept or reject the pending transfer.



## How to Initiate a Transfer Out Request: Jessica from CMA C to CMA D

Scenario: HH A transfers Jessica from CMA C to CMA D. A HH A worker should:

- 1. Navigate to the "Member CIN Search" Screen
- 2. Search for Jessica by entering her CIN in the 'Search Criteria'
- 3. Click on the member hyperlink to open the 'Member Search Report'
- 4. From the 'Member Search Report' Click on 'Transfer-Out Member'

lember Search Re	eport							?
lember Jenerated On		Jessica - BB12345 7/22/2019	В	Program Participatio Opt-Out Signature [				
atest Address		97 GLOVER AVE APT 2, 10704	YONKERS, NY,	Opt-Out Submission				
atest Phone Iedicaid End Date ssigned Health Hom	ie	207 2992088		Opt-Out Submitted Opt-Out Submitted Pending Transfer Cr	by Organization Name			
nrolled Health Home	e	HH A -11111111		Pending Transfer Ef	fective Date			
lanaged Care Plan		UNITED HEALTHCARE 0 01403176 12/1/2018 - 1		Pending Transfer In	itiated By			
overage Code		30 30-CLIENT IS ELIG FOR						
Print Tr ast 5 Unique Prov	Click Here	NROLLED IN A PCP (P)						
Service Date	Provider	Address 1	Address 2	City	State	Zip	Phone	
		Address 1 1545 ATLANTIC AVE	Address 2	<b>City</b> BROOKLYN	State NY	<b>Zip</b> 11213-1166	-	
Service Date	<b>Provider</b> INTERFAITH	1545 ATLANTIC	Address 2	-			Phone	
Service Date 3/15/2019	Provider INTERFAITH MEDICAL CENTER INTERFAITH PROFESSIONAL	1545 ATLANTIC AVE 1545 ATLANTIC	Address 2 555 PROSPECT PL	BROOKLYN	NY	11213-1166	Phone 7186134003	
Service Date 3/15/2019 3/15/2019	Provider INTERFAITH MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH	1545 ATLANTIC AVE 1545 ATLANTIC AVE JEWISH HSP BKLYN		BROOKLYN	NY	11213-1166	Phone 7186134003 7186134000	
Service Date 3/15/2019 3/15/2019 3/7/2019	Provider INTERFAITH MEDICAL CENTER INTERFAITH PROFESSIONAL PHYSICIAN S INTERFAITH MEDICAL CENTER INTERFAITH	1545 ATLANTIC AVE 1545 ATLANTIC AVE JEWISH HSP BKLYN TB 1545 ATLANTIC		BROOKLYN BROOKLYN BROOKLYN	NY NY NY	11213-1166 11213-1122 11238-4266	Phone 7186134003 7186134000	
Service Date 3/15/2019 3/15/2019 3/7/2019 2/8/2019	Provider           INTERFAITH MEDICAL CENTER           INTERFAITH PROFESSIONAL PHYSICIAN S           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH PMERGENCY MEDICINE PC	1545 ATLANTIC AVE 1545 ATLANTIC AVE JEWISH HSP BKLYN TB 1545 ATLANTIC AVE FL 3 1545 ATLANTIC		BROOKLYN BROOKLYN BROOKLYN BROOKLYN	NY NY NY NY	11213-1166 11213-1122 11238-4266 11213-1122	Phone           7186134003           7186134000           7189357000	
Service Date 3/15/2019 3/15/2019 3/7/2019 2/8/2019 1/24/2019	Provider           INTERFAITH MEDICAL CENTER           INTERFAITH PROFESSIONAL PHYSICIAN S           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH PMERGENCY MEDICINE PC	1545 ATLANTIC AVE 1545 ATLANTIC AVE JEWISH HSP BKLYN TB 1545 ATLANTIC AVE FL 3 1545 ATLANTIC AVE		BROOKLYN BROOKLYN BROOKLYN BROOKLYN	NY NY NY NY	11213-1166 11213-1122 11238-4266 11213-1122 11213-1122	Phone           7186134003           7186134000           7189357000	
Service Date 3/15/2019 3/15/2019 3/7/2019 2/8/2019 1/24/2019 tember's R/E Cod	Provider           INTERFAITH MEDICAL CENTER           INTERFAITH PROFESSIONAL PHYSICIAN S           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH MEDICAL CENTER           INTERFAITH PMERGENCY MEDICINE PC	1545 ATLANTIC AVE 1545 ATLANTIC AVE JEWISH HSP BKLYN TB 1545 ATLANTIC AVE FL 3 1545 ATLANTIC AVE	555 PROSPECT PL	BROOKLYN BROOKLYN BROOKLYN BROOKLYN	NY NY NY NY	11213-1166 11213-1122 11238-4266 11213-1122 11213-1122 11213-1122	Phone           7186134003           7186134000           7189357000	



## How to Initiate a Transfer Out Request: Jessica from CMA C to CMA D Continued

5. On the 'Transfer Out Member' pop up complete:

- Effective Date of the Transfer (*if accepted, this is the begin date of CMA D's new segment with the member and the day after CMA C's segment with the member will end*).
- CMA (CMA D in this scenario)
- Reason for Transfer (required field)
- Comments, if you have any

#### 6. Click Save

7. The 'Member Search Report' will display, indicating that

HH A created a *pending* transfer

Member Search Report				?
Member	Jessica	Program Participation		
Generated On	7/22/2019	Opt-Out Signature Date		
Latest Address	97 GLOVER AVE APT 2, YONKERS, NY, 10704	Opt-Out Submission Date		
Latest Phone	207 2992088	Opt-Out Submitted by User		
Medicaid End Date		Opt-Out Submitted by Organization Name		
Assigned Health Home		Pending Transfer Create Date	7/22/2019	
Enrolled Health Home	HH A - 11111111	Pending Transfer Effective Date	8/1/2019	
Managed Care Plan	UNITED HEALTHCARE OF NY INC - 01403176 12/1/2018 - 12/31/9999	Pending Transfer Initiated By	HH A	
Coverage Code	30			
Coverage Code Description	30-CLIENT IS ELIG FOR MCAID AND ENROLLED IN A PCP (P)			
Print Transfer-Out Member	Transfer-In Request			

SOUTHWEST DROOKENT HE	Ponding Transfor Effective Date	
Transfer Out Member		?
		* required fie
Effective Date *	8/1/2019	3
Provider Details		-
Health Home		~
Care Management Agency	CMA D	~
Reason for Transfer*	At capacity	~
Comments		•
		7
Cancel		Save
		10020-6502

Jessica's pending transfer record will now be available on HH A & CMA D's **My Transfers** screen and Assignment Download Files. It is now the responsibility of either HH A or CMA D to accept or reject the pending transfer.



## Viewing Transfers: My Transfers Screen



August 1<sup>st</sup> 2019

## **My Transfers Screen**

- The 'My Transfers' Screen is accessible to HHs from the quicklinks menu and CMAs from the Shortcuts Menu
- The 'My Transfers' Screen shows a history of all the pending, accepted, rejected or canceled transfers
- From the My Transfers Screen providers can:
  - CANCEL
  - ACCEPT
  - REJECT
- These actions can be performed on the 'My Transfers' screen utilizing the action button to the right of the record



## **My Transfers Screen**

#### HH view

#### CMA view

me		Shortcuts Searches
▼ Quick Links	🗴 👻 Му Та	My Assignments Member CIN Search Manage Assignments My Members My Transfers
My Assignments		Daily Digest
My Members My Transfers	There ar	
Member CIN Search Manage Assignments		
Upload File Download File		
Create Referral/Segment		
Children's HH Referral Portal		
View Submitted Referrals		
Billing Support		

Referrals and Members inbox	My Members X My Transfers X My Members		
ments IN Search ssignments ars ers	<ul> <li>Gearch is restricted to Members assigned</li> <li>Managed Care Plans</li> </ul>	to CAMBA INC.	
st	None O3458546 - AETNA BETTER HEALTH - 0: O3485701 - AETNA BETTER HEALTH FID O4342307 - AFFINITY HEALTH PLAN-EN O477156 - AFFINITY HEALTH PLAN M/I O2802899 - AFFINITY HEALTH PLAN M/I O3864495 - AGEWELL NEW YORK FIDA Select All Deselect All	A PLAN - 03885701 RICHED PLAN - 04342307 C - 00477156 M - 02802899	
I	First Name Min. Age (Years) County Member Status		L № Z
	Segment Reason		s



# Viewing Transfers on 'My Transfers'

The 'My Transfers' screen has a history of all Transfers associated with an organization. This
includes transfers the organization has initiated, transfers the organization needs to act on and
transfers that the organization has already acted on

Hy	Transfers								
Te	ender Requests								98
1	Hender	Туре	HPIESED - Provider Name	Transfer Recipient	Effective Date	Create Date	Reason	Status	
,	Member - CIN	Incoming Transfer From	DECKS178 - NEW YORK PRESENTERSAN HOSPITAL DVC	Health Home	8/1/2019	7/9/2019 10:22 AM	Hender requested Transfer	Rejected	۹.
	Member - CIN	Incoming Transfer From	MO43178 - NEW YORK PRESEYTERIAN Hospittal Inc	Health Home	7/1/2019	7/9/2019 10:23 AM	Nender requested Transfer	Accepted	۹,
,	Member - CIN	Incoming Transfer From	00473038 - HUDSON RIVER HEALTHCARE INC	Health Hame	7/1/2019	7/11/2019 09:42 494	At capacity	Pending	۹.
1	Member - CIN	Incoming Transfer From	00243178 - NEW YORK PRESBYTERDAN HOSPITAL DVC	Health Norse	7)1/2019	7/15/2019 10:32 AM	At capacity	Carceled	۹,



### 'My Transfers' Screen: Type and Provider Name

- The 'My Transfers' screen includes the Type and MMIS ID. These fields help the user determine the direction of the transfer and the Provider who initiated the transfer or would receive the transfer.
  - An 'Incoming Transfer From' another HH means that the HH provider looking at the screen would receive the member to provide services to if the transfer is accepted.
    - The HH provider on the screen or the provider that the member is currently with could have initiated the transfer
  - An 'Outgoing Transfer To' means that if the HH provider looking at the screen accepts or accepted the transfer that the member would have a segment with the new Provider listed and no longer be with the HH provider who is logged in.
    - The HH provider on the screen could have initiated this or the provider that will receive the member could have requested the member.

Туре	MMISID - Provider Name
Outgoing Transfer To	04277941 - CHHUNY LLC
Outgoing Transfer To	04277941 - CHHUNY LLC
Outgoing Transfer To	04277941 - CHHUNY LLC
Outgoing Transfer To	03559515 - COORDINATED BEHAVIORAL CARE INC
Outgoing Transfer To	03559515 - COORDINATED BEHAVIORAL CARE INC
Incoming Transfer From	03449974 - ADIRONDACK HEALTH INSTITUTE INC
Incoming Transfer From	03449974 - ADIRONDACK HEALTH INSTITUTE INC
Incoming Transfer From	00243178 - NEW YORK PRESBYTERIAN HOSPITAL INC



# 'My Transfers' Screen: Status

- Records remain on the 'My Transfers' Screen for perpetuity.
- Providers can use the Status Column to determine if the record has been acted on:
  - Pending The transfer has been requested, but not acted on
    - This includes both transfers you need to act on and transfers that you are waiting for another HH to act on. If you initiated a transfer you must wait for another HH to act on it.
  - Rejected A pending transfer was rejected. The member stays with the original HH and CMA
  - Accepted The pending transfer was accepted. The effective date is used to determine when the initial segment should be ended and a new one started
  - Canceled A pending transfer was canceled before it was acted on.





### 'My Transfers' Screen: Additional Fields

- The screen also shows the effective date (date the member will be transferred if accepted), the create date of the pending transfer, and the reason the transfer was initiated.
- By expanding the toggle providers can see the initiator, receiver, and updates

	Member	Incoming Transfer From	00243178 - NEW YORK PRESBYTERIAN HOSPITAL INC	Health Home	7/1/2019	7/9/2019 10:23 AM	Member requested Transfer	Accepted	<b>a</b> ,
-	g Provider g Provider		COORDINATED BEHAVIORAL CARE INC COORDINATED BEHAVIORAL CARE INC		Created On Initiating User		7/9/2019 10:23 AM HH03559515worker		^
Status	5	Updated By	(username)	Updated By (Provider Na	ame)	Update Date	Comments		
Accept	ted	HH00243178	worker	00243178 - NEW YORK PRE	SBYTERIAN HOSPITAL INC	7/9/2019 11:16 AM			
Pendin	ng	HH03559515	worker	03559515 - COORDINATED	BEHAVIORAL CARE INC	7/9/2019 10:23 AM			~



## Viewing Transfers: My Transfers Screen Scenarios



August 1<sup>st</sup> 2019

## My Transfers Screen: HH A

sfer Requests								¢
Member	Туре	MMISID - Provider Name	Transfer Recipient	Effective Date	Create Date	Reason	Status	
Jack - CC12345C	Outgoing Transfer To	22222222 - B	Health Home	8/1/2019	7/23/2019 12:53 PM	Member requested Transfer	Pending	
Initiating Provider Receiving Provider	HH B HH B			Created On Initiating User		7/23/2019 12:53 PM HH03449974worker		
Status	Updated	l By (username)	Updated By (Provider	· Name)	Update Date	Comments		
Pending	HH03449	974worker	HH B		7/23/2019 12:53 PM			
Jessica - BB12345B	Outgoing Transfer To	11111111 - A	Care Management Agency	8/1/2019	7/23/2019 12:51 PM	At capacity	Pending	
Initiating Provider Receiving Provider		HH A HH A		Created On Initiating User		7/23/2019 12:51 PM HH04159431worker		
Status	Updated	l By (username)	Updated By (Provider	· Name)	Update Date	Comments		
Pending	HH04159	431worker	HHA		7/23/2019 12:51 PM			
Wonda - AA12345B	Outgoing Transfer To	22222222 - В	Health Home	8/1/2019	7/23/2019 12:49 PM	Member moved out of service county	Pending	
Initiating Provider Receiving Provider		НН А НН В		Created On Initiating User		7/23/2019 12:49 PM HH04159431worker		
Status	Updated	i By (username)	Updated By (Provider	· Name)	Update Date	Comments		
Pending	10.00 44 50	431worker	HHA		7/23/2019 12:49 PM	Member Moved to Wa		

• HH A has the ability to:

Member CIN Search

My Transf

- CANCEL Wonda's pending transfer
- ACCEPT or REJECT Jack's pending transfer
- ACCEPT or REJECT Jessica's pending transfer on behalf of CMA D. And CANCEL as the Department initiator

## **My Transfers Screen: HH B**

y Transfers 🗙								
Transfers								
ansfer Requests								
Member	Туре	MMISID - Provider Name	Transfer Recipient	Effective Date	Create Date	Reason	Status	
Jack - CC12345C	Incoming Transfer From	HH A	Health Home	8/1/2019	7/23/2019 12:53 PM	Member requested Transfer	Pending	
Initiating Provider Receiving Provider		22222222 - НН В 22222222 - НН В		Created On Initiating User		7/23/2019 12:53 PM HH03449974worker		
Status	Updated	By (username)	Updated By (Provide	er Name)	Update Date	Comments		
Pending	HH03449	974worker	HH B		7/23/2019 12:53 PM			
Wonda - AA12345B	Incoming Transfer From	HHA	Health Home	8/1/2019	7/23/2019 12:49 PM	Member moved out of service county	Pending	
Initiating Provider Receiving Provider		HH A HH B		Created On Initiating User		7/23/2019 12:49 PM HH04159431worker		
Status	Updated	By (username)	Updated By (Provide	er Name)	Update Date	Comments		
Pending	HH04159	431worker	HH A		7/23/2019 12:49 PM	Member Moved to Way	vne County	

- HH B has the ability to:
  - ACCEPT or REJECT Wonda's pending transfer
  - CANCEL Jack's pending transfer



## My Transfers Screen: CMA D

Home Referrals and Members Inbox									
Shortcuts 《	My Transfers X								
Searches	My Transfers								
My Assignments	Transfer Requests								🗘 📇 ?
Member CIN Search									
Manage Assignments	Member	Туре	MMISID - Provider Name	Transfer Recipient	Effective Date	Create Date	Reason	Status	
My Members	Jessica - BB12345B	Incoming Transfer From	11111111 - A	Care Management Agency	8/1/2019	7/23/2019 12:51 PM	At capacity	Pending	<b>a</b> ,
My Transfers									
Daily Digest	Initiating Provider Receiving Provider		HA HA		Created On		7/23/2019 12:51 PM HH04159431worker		^
	Receiving Provider	Ľ.			Initiating User		HIU4139431WUIKei		
	Status	Updated I	By (username)	Updated By (Provide	er Name)	Update Date	Comments		
	Pending	HH041594	31worker	HH A		7/23/2019 12:51 PM			~

- CMA D has the ability to:
  - ACCEPT or REJECT Jessica's pending transfer



### **Viewing Transfers: Files**



August 1<sup>st</sup> 2019

## **Viewing Transfers: HH Assignment File**

- The HH Assignment File displays any pending transfers that your organization must act on
- The HH Assignment File also displays any transfer that have been rejected for 30 days after the rejection date

#### New Fields

- Field 74: 'Health Home Assignment Status' Shows if the transfer record is pending or rejected
- Field 93: 'HH Assignment Record Type' will display transfer for transfer records
- Fields 119/120: 'Transfer Initiator MMIS ID/Organization Name' Display the name of the HH that made the initial transfer request
- Fields 121/122: 'Transfer Receiver MMIS ID/Organization Name' Display the name of the HH that will serve the member if the HH is accepted
- Field 123: 'Transfer Create Date' Displays the date the transfer was created
- Field 124: 'Transfer Effective Date' Displays the start date of the segment if the transfer was accepted
- Fields 125/126: 'Transfer Reason/Comment' Display the reason the transfer was created or the reason the transfer was
  rejected



## Viewing Transfers: Enrollment Download File

 Pending Transfer information will display on Enrollment Download files for any members the downloading provider has an active enrollment segment with at the time of the download

_ <del></del>	cilia nebo nag	700	-	,00	
35	Transfer Initiator MMIS ID	707	8	714	Numeric
36	Transfer Initiator Organization Name	715	40	754	Alpha
37	Transfer Receiver MMIS ID	755	8	762	Numeric
38	Transfer Receiver Organization Name	763	40	802	Alpha
39	Transfer Create Date	803	8	810	Date
40	Transfer Effective Date	811	8	818	Date
41	Transfer Reason	819	75	893	Alpha
42	Transfer Comment	894	300	1193	Alphanumeric



### Assignment and Enrollment Files: Transfers

Examples of how transfers will be displayed on files can be found on the MAPP HHTS portion of the HH website:

https://www.health.ny.gov/health\_care/medicaid/program/medicaid\_health\_homes/mapp/index.htm

- Expand the 'Health Home Tracking system' Section
- Click on 'Transfer System Logic



## Viewing Transfers: Files Scenarios



August 1<sup>st</sup> 2019

### Assignment and Enrollment Files Pending Transfers

			74	93	119	120	121	122	123	124	125	126
Date File ownloaded	HH Downloading file	Member Name	Health Home Assignment Status	HH Assignment Record Type	Transfer Initiator MMIS ID	Transfer Initiator Organization Name	Transfer Receiver MMIS ID	Transfer Receiver Organization Name	Transfer Create Date	Transfer Effective Date	Transfer Reason	Transfer Comment
7/23/2019	HH A	Wonda				Wond	a Is not included on H	H A's assignment file				
		Jessica	Pending	Transfer	111111111	HH A	11111111	HH A	7/23/2019	8/1/2019	At capacity	
		Jack	Pending	Transfer	22222222	нн в	22222222	нн в	7/23/2019	8/1/2019	Member Requested Transfer	
7/23/2019	нн в	Wonda	Pending	Transfer	11111111	HH A	22222222	НН В	7/23/2019	8/1/2019	Member moved out of service county	Member moved to Wayne County
		Jack				Jack	is not included on HH	B's assignment file				
nrollment D	ownload											
			1 - 34	35	36	37	38	39	40	41	42	
Date File Downloaded	HH Downloading file	Member Name	1 - 34 Segment Data	35 Transfer Initiator MMIS ID	36 Transfer Initiator Organization Name	37 Transfer Receiver MMIS ID	38 Transfer Receiver Organization Name	Transfer Create	Transfer	41 Transfer Reason	42 Transfer Comment	
ownloaded	Downloading			Transfer Initiator MMIS	Transfer Initiator Organization Name	Transfer Receiver	Transfer Receiver Organization Name	Transfer Create	Transfer Effective Date		Transfer Comment	
ownloaded	Downloading file	Name	Segment Data	Transfer Initiator MMIS ID	Transfer Initiator Organization Name HH A	Transfer Receiver MMIS ID	Transfer Receiver Organization Name HH B	Transfer Create Date	Transfer Effective Date 8/1/2019	Transfer Reason	Transfer Comment	
Date File Downloaded 7/23/2019	Downloading file	Name Wonda	Segment Data Complete	Transfer Initiator MMIS ID 11111111	Transfer Initiator Organization Name HH A HH A	Transfer Receiver MMIS ID 22222222	Transfer Receiver Organization Name HH B HH A	Transfer Create Date 7/23/2019	Transfer Effective Date 8/1/2019 8/1/2019	Transfer Reason Member moved at capacity Member requested	Transfer Comment	
Oownloaded	Downloading file	Name Wonda Jessica	Segment Data Complete Complete	Transfer Initiator MMIS ID 11111111 11111111	Transfer Initiator Organization Name HH A HH A	Transfer Receiver MMIS ID 22222222 11111111 22222222	Transfer Receiver Organization Name HH B HH A	Transfer Create Date 7/23/2019 7/23/2019 7/23/2019	Transfer Effective Date 8/1/2019 8/1/2019	Transfer Reason Member moved at capacity Member requested	Transfer Comment	

Ye.

## Acting on a Transfer: My Transfers Screen



August 1<sup>st</sup> 2019

## **My Transfers Screen**

- The 'My Transfers' Screen is accessible to HHs from the quicklinks menu and CMAs from the Shortcuts Menu
- The 'My Transfers' Screen shows a history of all the pending, accepted, rejected or canceled transfers
- From the My Transfers Screen providers can:
  - CANCEL
  - ACCEPT
  - REJECT
- These actions can be performed on the 'My Transfers' screen utilizing the action button to the right of the record



## **My Transfers Screen**

#### HH view

#### CMA view

			Shortcuts
me			Searches
			My Assignmen
			Member CIN S
			Manage Assign My Members
Quick Links	x	🔻 Му Та	My Transfers
Quick Links			Daily Digest
My Assignments			
My Members		There ar	
My Transfers		There ar	
Member CIN Search			
Manage Assignments			
Upload File			
Download File			
Create Referral/Segment			
Children's HH Referral Portal			
View Submitted Referrals			
Billing Support			
Daily Digest			

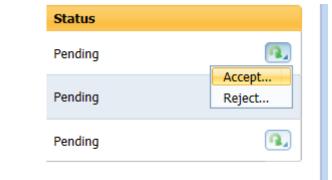
Click Here			
Referrals and Members Inbox			
its vi 🔨	My Members X My Transfers X		
es 😽	My Members		
nments CIN Search Assignments bers	<ol> <li>Search is restricted to Members assigned</li> </ol>	to CAMBA INC.	
sfers	Managed Care Plans		
lest	None           03458546 - AETNA BETTER HEALTH - 03           03885701 - AETNA BETTER HEALTH FID           04342307 - AFFINITY HEALTH PLAN-ENF           00477156 - AFFINITY HEALTH PLAN INC           02802899 - AFFINITY HEALTH PLAN INC           03864495 - AGEWELL NEW YORK FIDA           Select All	A PLAN - 03885701 RICHED PLAN - 04342307 - 00477156 1 - 02802899	
	First Name		L
	Min. Age (Years)		M
	County	~	Z
	Member Status	All	С
	Segment	✓	s
	Reason	~	S



## My Transfers Screen: Accepting an outgoing transfer

- When **ACCEPTING** an outgoing HH to HH transfer the HH utilizes the action button on the member record to select 'Accept'
- The 'Enter Segment Details' popup box displays the segment information that was entered by the initiating provider
- By clicking 'Save' the pending transfer is **ACCEPTED**

8/1/2019 22222222 - HH B 01550370 - MENTAL HEALTH ASSOC ESSEX MH Member requested Transfer	•
22222222 - HH B 01550370 - MENTAL HEALTH ASSOC ESSEX MH	• •
01550370 - MENTAL HEALTH ASSOC ESSEX MH	· ·
01550370 - MENTAL HEALTH ASSOC ESSEX MH	] •
	•
Member requested Transfer	•
	•
	Save



Scenario: HH A accepts HH B request for Jack. This creates an active segment with HH B and ends HH A's enrollment segment with Jack.



## My Transfers Screen: Accepting an Incoming Transfer

- When ACCEPTING an incoming HH to HH transfer the HH utilizes the action button on the member record to select 'Accept'
- The 'Accept Transfer/Create Enrollment Segment' popup box requests the CMA that the enrollment segment should be created with.
- By clicking 'Next' the provider is able to add consent and POC information associated with the segment
- By clicking 'Create' the provider is able to create the segment

Accept Transfer / Create Enrollment Segment		? ×
Create Enrollment Segment     Onsent		
Step 1: Create Enrollment Segment		
Enter Segment Details		•
Begin Date	8/1/2019	
Provider Details		•
Health Home	HH B	
Care Management Agency	IDACK HEALTH INSTITUTE INC - 05436342 💌	
Reason for Transfer	Member moved out of service county	
Cancel		Next
		TEAL

Create Enrollment Segment		?
Create Enrollment Segment     Co	nsent	
Step 2: Consent		
Consent to Enroll Date	7/22/2019 🥘	
Consent to Share Information Date	7/22/2019	
Consenter	Guardian	
Plan of Care Date	(3)	
Back		Create

Scenario: HH B accepts Wonda's incoming transfer from HH A. This creates a segment with HH B and ends the segment with HH A.



\* Incoming CMA transfers, or outgoing HH transfers from CMA to CMA will also display these same screens

## **My Transfers Screen: Rejecting Transfers**

- When **REJECTING** an incoming or outgoing HH to HH transfer the HH utilizes the action button on the member record to select 'Reject'
- The 'Reject' popup box requests the reason the pending transfer is being rejected and any comments
- By clicking 'Save' the pending transfer is **REJECTED**

1EALTH HOME LLC		
Reject		? ×
NC		* required field
CH Reason *	Referred to another Health Home	<b>v</b>
CO . Comments		<b>→</b> 1
CO Member has already been referred to another H O our HH	HH based on his expressed discontent with	1
2U		1
2U Cancel		Save
ED CARE PARTNERS Health Home	8/1/2019	7/19/2019 10:04 AM

Scenario: HH A rejects HH B's request to serve Jack and states they have already referred Jack to another HH. HH A continues to have a segment with Jack.



## Acting on a Transfer: Tracking System Files



August 1<sup>st</sup> 2019

## Acting on Pending Transfers: Tracking File Uploads

Transfers can also be **ACCEPTED** or **REJECTED** for <u>adults</u> via the tracking file upload (children must always be accepted via the 'My Transfers' screen)

#### **ACCEPTING** a pending transfer:

- Utilize the Tracking File Segment Record
  - 'Record Type' = C
  - 'Member ID' = ID of member with pending transfer
  - 'Date of Birth' = complete
  - 'Gender' = Complete
  - 'Begin Date' = Effective date of transfer
  - 'Outreach/enrollment code' = E
  - 'HH MMIS ID'/'CMA MMIS ID' =
    - Incoming transfer the HH and CMA of the new segment
    - Outgoing transfer the HH and CMA of the current segment
  - 'Referral Code' = T

#### **REJECTING** a pending transfer:

- Utilize the Tracking File Assignment Records
  - 'Record Type' = D
  - 'Member ID' = ID of member with pending transfer
  - 'Begin Date' = effective date of the transfer



## Acting on a Transfer: Tracking System Files Scenarios



August 1<sup>st</sup> 2019

# **Tracking File Actions: HH A**

Accept Records

- HH A accepts Jessica's pending transfer on behalf of CMA D
  - The MMIS ID of the CMA is that of CMA D
- HH A accepts Jack's transfer out to HH B
  - The MMIS ID of the HH and CMA are that of the current segment Jack is in with HH A

	Α	В	С	D	E	F	G	н	I.	J	К	L	М	N	0	Р	Q	R	S	Т	U	V	٧
1	Record T	y Member I	Date of Bir	Gender	Begin Date	End Date	Outreach	HH MMIS	CMA MMIS	Direct Bill Indica	Adult or 0	TBD2	Referral C	Segment	Consent [	NYSID	End Date	Pend Star	Pend Rea	Pend Rea	End Health	Home As	signn
3	С	BB12345B	08151986	F	08012019		E	11111111	99999999				т										
4	С	CC12345C	120661984	M	08151986		E	11111111	777777777777777777777777777777777777777				Т										

Reject Records

- HH A rejects Jessica's pending transfer on behalf of CMA D
- HH A rejects Jack's transfer out to HH B

	А	В	с	D	E	F	G	н	I.	J	К	L	М	N	0	Р
1	Record Ty	Member (	Effective I	Date												
2	D	BB12345B	08012019													
3	D	CC12345C	08012019													



# **Tracking File Actions: HH B**

Accept Records

- HH B accepts Wonda's pending transfer
  - The MMIS ID of the CMA that HH B would like to use in the enrollment segment they are creating

	А	В	С	D	E	F	G	Н	I.	J	К	L	М	N	0	P	Q	R	S	т	U	V	W
1	Record T	y Member I	Date of Bir	Gender	Begin Dat B	End Date	Outreach/	HH MMIS I	CMA MMIS	Direct Bill Indica	Adult or C	TBD2	Referral C	Segment	Consent I	NYSID	End Date	Pend Star	Pend Rea	Pend Rea	End Healt	h Home As	signment
3	С	AA12345A	08151986	F	08012019		E	22222222	999999999				Т										

Reject Records

• HH B rejects Wonda's transfer into HH B

	А	В	С	D	E	F	G	н	I	J	к	L	М
1	Record Ty	Member (	Effective [	Date									
2	D	AA12345A	08012019										
-	1												



## Viewing Transfers: Member CIN Search

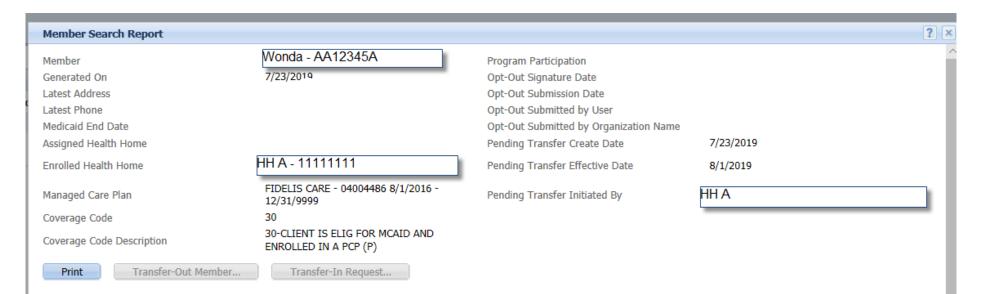


August 1<sup>st</sup> 2019

#### Viewing Transfers: Member CIN Search Screen

• The 'Member CIN Search Screen' and 'Member Search Report' both show pending transfer information

Member	Program Participation	DOB	Medicaid End Date	Coverage Code	Managed Care Plan	Health Home	Care Management Agency	HARP	Segment	Status	Start Date	End Date	Pending Transfer
Wonda - AA1	345A	11/18/1973		30	FIDELIS CARE - 04004486	HH A - 11111111	MENTAL HEALTH AMERICA DUTCHESS CO - 02324885	Enrolled	Enrollment	Active	1/1/2016		Yes





## Viewing Transfers: Member CIN Search Screen Continued

Initiator	Segment	Direction	Action	Question to Ask	Scenario
Y	Y	Out	None	none	Wonda/HH A
Υ	Ν	In	None	none	Jack/HH B
Ν	Y	Out	Accept/Reject	Allow another HH to work with the member?	Jack/HH A
Ν	Ν	In	Accept/Reject	Will you work with the member?	Wonda/HH B



### Viewing Transfers: Member CIN Search Download

- Pending Transfers will show on the Member CIN Search Download
- Fields 104-111 have been added to capture Transfer information
- The '*Member CIN Search*' Download shows additional information, such as the Receiver. The Receiver will always be the organization that would have the newly created segment and be working with the member if the segment were to be accepted.

		and the second se				
1	104	Pending Transfer Initiator MMIS ID	2199	8	2206	Numeric
ł	105	Pending Transfer Initiator Organization	2207	40	2246	Alpha
)	106	Pending Transfer Receiver MMIS ID	2247	8	2254	Numeric
	107	Pending Transfer Receiver Organization	2255	40	2294	Alpha
	108	Pending Transfer Create Date	2295	8	2302	MMDDYYYY, Numeric
2	109	Pending Transfer Effective Date	2303	8	2310	MMDDYYYY, Numeric
ł	110	Pending Transfer Reason	2311	75	2385	Alpha
ł	111	Pending Transfer Comment	2386	300	2685	Alphanumeric





# **Additional Resources**

- For additional information on transfer logic: <u>https://www.health.ny.gov/health\_care/medicaid/program/medicaid\_health\_homes/mapp/ind</u> <u>ex.htm</u>
  - Health Home Tracking System 'Transfer System Logic'
- For current file specifications: <u>https://www.health.ny.gov/health\_care/medicaid/program/medicaid\_health\_homes/mapp/ind</u> <u>ex.htm</u>
  - Tracking System File Formats 'MAPP HHTS File Specifications Document v3.1'
- For release information:

https://www.health.ny.gov/health\_care/medicaid/program/medicaid\_health\_homes/mapp/ind ex.htm

Health Home Tracking System – 'Draft 2019 MAPP HHTS Release Schedule'



# **Health Home Contact Information**

- For Questions regarding billing of transitioning Children's HCBS services contact the children's team at <u>HHSC@health.ny.gov</u>
- For MAPP HHTS issues, contact: MAPP Customer Care (518) 649-4335 or email <u>MAPP-CustomerCareCenter@cma.com</u>
- For HH policy questions, contact the DOH Health Home Provider Line (518) 473-5569 or submit an email using the HH email web form: <u>https://apps.health.ny.gov/pubdoh/health\_care/medicaid/program/medicaid\_health\_homes/emailHe</u> <u>althHome.action</u>
- For MAPP HHTS presentations: https://www.health.ny.gov/health\_care/medicaid/program/medicaid\_health\_homes/mapp/index.htm

