

Health Home Implementation Webinar

Session #25– October 9, 2013

Program Updates

Health Home Eligibility Review



Agenda

- Introduction
- Review of Health Home Eligibility Criteria
- Q&A

Health Home Eligibility Criteria

Medicaid Eligibility

- Individuals entering Health Homes must be enrolled in Medicaid.
- A member's Medicaid eligibility may change.
- Health Homes should verify member eligibility and assist members on maintaining Medicaid eligibility.
- If an individual is not enrolled in Medicaid but is eligible, the Health Home care manager can work to get them enrolled but no payments for Health Home services will be made until they are enrolled in Medicaid.
- Often Medicaid coverage is granted retroactively. However, the decision to provide it retroactively is up to the county of residence.

Health Home Eligibility Criteria

Health Home Services Eligibility

- Individuals served in a Health Home must have at least TWO chronic conditions or ONE single qualifying condition (HIV/AIDS or SMI-serious mental illness)
- If an individual has HIV or SMI they DO NOT have to be determined to be at risk of another condition to be eligible.
- Having one qualifying chronic condition and being at risk of developing condition another DOES NOT qualify an individual for Health Home services.

Health Home Eligibility Criteria

Health Home Services Eligibility

The two chronic conditions are any of those included in the “Major” categories of the 3M™ Clinical Risk Groups or CRGs (see SPA for specific examples)

- Alcohol and Substance Abuse
- Mental Health
- Cardiovascular Disease
- Metabolic Disease
- Respiratory Disease
- Other Chronic Disease

Acute conditions (e.g., infections, broken bones) or cancer diagnoses are not included.

Health Home Eligibility Criteria

Health Home Services Eligibility

The chronic conditions include, but are not limited to, the following:

- Mental Health Condition
- Substance Use Disorder
- Asthma
- Diabetes
- Heart Disease
- Overweight as evidenced by a body mass index (BMI) of >25
- HIV/AIDS
- Hypertension

Health Home Eligibility Criteria

Appropriateness for Health Home Services

In order to be eligible for Health Home services, the member must be appropriate for Health Home care management. They must have significant behavioral, medical or social risk factors:

- Probable risk for adverse event, e.g., death, disability, inpatient or nursing home admission;
- Lack of or inadequate social/family/housing support;
- Lack of or inadequate connectivity with healthcare system;
- Non-adherence to treatments or medication(s) or difficulty managing medications;
- Recent release from incarceration or psychiatric hospitalization;
- Deficits in activities of daily living such as dressing, eating,
- Learning or cognition issues.

Health Home Eligibility Criteria

Ground Rules

- The DOH assignment lists provide Health Homes with candidates for Health Home services,
- Medicaid and Health Home eligibility and assessment of risk level to determine appropriateness for Health Home services must still be confirmed for both list-assigned members and referrals.
- Health Homes, MCOs and care management partners can decide who is responsible for establishing and verifying eligibility and risk (appropriateness for Health Home services) but the biller remains ultimately responsible.

Health Home Eligibility Criteria

Ground Rules

- As described in the New York State Health Home State Plan Amendment (SPA) claims/encounter or other clinical data should be used to verify medical and psychiatric diagnoses.
- Documentation of Medicaid and Health Home eligibility and risk assessment must be maintained.

Health Home Eligibility Criteria

Other Coverage Issues

- Anyone eligible for Health Home services can be considered for enrollment, but if they are already in a program that provides case management (e.g., certain waivers) they may not be in both.
 - If Medicaid coverage is limited an individual may not be eligible for Health Home services.
 - DOH is working on the lists of programs and services (RE Codes and Coverage Codes) that are compatible with Health Home services and those that are not.
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Useful Contact Information

- Visit the Health Home website:
http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/
- Get updates from the Health Homes listserv. To subscribe send an email to: listserv@listserv.health.state.ny.us (In the body of the message, type SUBSCRIBE HHOMES-L YourFirstName YourLastName)
- To email Health Homes, visit the Health Home Website and click on the tab “Email Health Homes”
http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/
- Call the Health Home Provider Support Line: 518-473-5569