Health Home
Implementation Webinars
Session #45 – October 1, 2014
Program Updates
Agenda

- SHIN-NY
- Health Home Policy Update
  - Eligibility
  - Monitoring Surveys
  - Monitoring the Reporting of Complaints and Incidents
The policy updates can be found in the ‘Health Home Medicaid Updates, Policy and Provider Manual’ tab or under ‘What’s New?’
Health Home Policy Update

Updated policies will appear here until further notice.

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Health Home Policy

September 2014

- Eligibility Criteria for Health Home Services Intake and Chronic Conditions List (PDF, 162KB)
- Health Home Eligibility Policy
- Monitoring System
- Monitoring the Reporting of Complaints and Incidents

July 2014

- Recipient Restriction Program (RBP) (PDF, 109KB)
- Representative PAYE (PDF, 154KB)
- Coverage Codes (PDF, 235KB)
- Restriction Exception (R/E) Codes (PDF, 243KB)

Medicaid Updates

Regular Editions
- December 2012
  - Health Home Consent Process, page 4 (PDF, 623KB, 16pp.)

Special Editions
- November 2012
  - Health Home Implementation Update (PDF, 412KB, 12pp.)
- April 2012
  - Introducing Health Homes - Improving Care for Medicaid Recipients with Chronic Conditions (PDF, 4.2MB, 20pp.)

Health Home Provider Manual

- Health Home Provider Manual (Billing Policy and Guidance)
Health Home Policy Update

- Health Home Eligibility Policy
  - Identifying Potential Members
  - Three Steps to Determining Eligibility
    - Step One: Determine Medicaid Eligibility
    - Step Two: Determine Eligibility for Health Home Services
    - Step Three: Determine Appropriateness for Health Home Services

- Eligibility Criteria for Health Home Services
  - Brief Health Home Eligibility Policy (e.g., Medicaid Eligibility, Health Home Eligibility and Appropriateness)
  - Health Home Chronic Conditions List
Monitoring Surveys and Monitoring the Reporting of Complaints and Incidents

- These are high level policies developed through a joint effort between the NYS Department of Health including Health Home Program staff, AIDs Institute (AI), Division of Health Plan Contracting and Oversight and, the Division of Health Information Technology Transformation (DHITT) with the Office of Mental Health (OMH) and Office of Alcohol and Substance Abuse Services (OASAS) to:
  - Review the performance of each Health Home in its progress towards meeting the Triple Aim; and,
  - Ensure all Health Homes across NYS are in compliance with Health Home standards.

- These policies will be updated and additional State Partners added as the Health Home model for children is developed.
Monitoring Surveys
Health Home Policies and Procedures
September 2014
Comprehensive Survey

➢ A full review of Health Home operations. Surveys will be conducted by NYS DOH staff and will include representatives from State partner agencies.

➢ May be conducted for:
  - Initial Readiness
  - Significant Change in Operations and/or Governance
  - Re-designation
Health Home Re-designation

- After the initial three year period of designation and prior to renewal, each Health Home’s performance will be reviewed to determine if designation status will continue.

- We are in the process of developing standards and tools to be used for re-designation site visits that will include benchmarks and quality metrics to measure performance of each Health Home. Re-designation visits may also incorporate HARP readiness criteria.

- Health Home re-designation is coming in 2015. A Health Home Webinar is being planned for November 2014 to provide information about the re-designation process.
Focused Survey

- An in-depth review focusing on one of more specific areas of Health Home operations.
  - Evaluation of Process and Quality Metrics
  - Trigger Events
  - Other Issues

- Used to identify best practices and improvement strategies.

- Based on the same domains identified in Comprehensive Survey policy checklist.
Monitoring the Reporting of Complaints and Incidents

Health Home Policies and Procedures
September 2014
Purpose

➢ To maintain the health and welfare of every Health Home member

➢ Health Homes must have policies in place to:
   ▪ Identify and investigate complaints and incidents received from or on behalf of Health Home members;
   ▪ Minimize probability of reoccurrence;
   ▪ Identify problematic trends in agencies within their network;
   ▪ Assure member rights related to filing complaints and incidents.
Complaints and Incidents Policy

- **Definition**: what is a complaint versus what is an incident
- **Reporting Requirements**: reporting and initiating a complaint or incident
- **Timeframes for Resolution**: immediate resolution versus maximum allowable time for resolution
- **Notification Requirements**: timelines for response to member
- **Documentation requirements**: maintaining records, and reporting requirements to DOH.
Complaints

- Verbal or written dissatisfaction by the member or member’s designee related to the provision of Health Home care management services or other service identified in the member’s plan of care.
  - Managed at the level of the Health Home and care management agency.
  - Reported to DOH by Health Homes on a quarterly basis to include any trends noted and corrective actions taken.
  - Complaints that rise to the level of an Incident must be reported to DOH as per Incident policy.
Incidents

- Urgent issues, events or actions either perceived or an actual threat to the member’s health and welfare or actions taken by or against a member by another individual.
  - Notification to DOH Health Home staff is required.
    - Health Home Helpline: 518-473-5569
  - Health Homes oversee incident investigation process, including findings.
  - Health Homes work with care management agencies to conduct investigations.
  - Health Homes track incidents and monitor reporting, timeliness, outcomes, and trends.
  - Health Homes report to DOH quarterly.
Incidents (continued)

- This Health Home policy focuses on allegations involving unlicensed facilities or agencies.

- If the allegation is against a licensed agency, the Health Home will discuss the details of the incident with that licensed agency. It then becomes the responsibility of that licensed agency to investigate the incident following their own reporting protocols, e.g., contacting the New York Justice Center (NYJC).

- Allegations against unlicensed agencies will be reported to DOH and investigated per the Health Home Incident policy.

- Since the Health Home program does not fall under the jurisdiction of the NYJC, any reports they received involving a Health Home member will continue to be forwarded to DOH HH staff. Health Homes are contacted by DOH to oversee the investigation process.

- A DOH database is being developed to track all complaints and incidents received.
Information

- Policies for Monitoring Surveys and Monitoring the Reporting of Complaints and Incidents are now posted on the Health Home website at: http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/health_home_policy.htm

- Questions and comments may be sent to the Health Home BML – Policy.

- More information about these policies and final implementation will be forthcoming.

- Policies will need to be updated as the model for Health Home services for Children is developed.
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

- Medicaid Helpline: 1-800-541-2831