Children’s Health and Behavioral Health Providers

New State Plan Services and Aligned HCBS under the Children's Medicaid System Transformation

Provider Designation Process and Authorization Processes for New Populations/Services

April 19, 2018
Children’s Medicaid System Transformation Update

- A webinar has been scheduled for April 24, 2018, 2-3PM to update providers and stakeholders regarding the new implementation timeline and next steps.
- Registration information for this webinar can be found below: https://attendee.gotowebinar.com/register/4459718508446786563
- The purpose of today’s webinar is to discuss the following:
  - The updated timeline for implementing the Children’s Medicaid System transformation includes beginning some of the new State plans services and making available the new HCBS array of services (under a phased in approach to an expanded population) on January 1, 2019.
  - The initial goal is to ensure that the designation process affords providers as much time as possible to contract with plans and to claims test (e.g., six months to contract with plans, six weeks to claims test) before the January 1, 2019 begin date.
  - To meet this initial goal, the State is working to issue formal designations by Mid-May.
  - Providers should note the designation process will remain open (i.e., is a rolling process) and will continue beyond Mid-May.
Provider Designation Portal

- The Children’s Designation process is a multi-State agency process that includes the Department of Health (DOH), Office of Mental Health (OMH), Office of Alcoholism and Substance Abuse Services (OASAS), Office of Children and Family Services (OCFS) and the Office for People With Developmental Disabilities (OPWDD) (i.e., the NYS Interagency Review Team).

- Sole practitioners and/or group practices are NOT eligible for designation.

- The portal allows for providers serving multiple populations, who have established relationships (licensure/certification) with various child-serving State agencies to submit ONE application.

- Having one portal allows the State to quickly and efficiently designate current child-serving providers for comparable services they provide currently to facilitate a seamless transition to managed care and build adequate networks under the new Medicaid redesign.

- The application enables the State agencies to determine if the provider is qualified to be designated based on, (1) what services they provide currently, and (2) a review of historical provider performance by the agency with whom they have established relationship.

- The application helps to identify when providers are proposing to expand the populations they currently serve so they may fulfill any required additional steps with the appropriate State agency to establish formal relationships.

- Prior to service delivery of new State Plan Services and/or HCBS, approved providers must be Medicaid enrolled. If the approved provider is not already enrolled as a NYS Medicaid provider, the approved provider must complete the NY Medicaid Provider Enrollment Form. These forms can be found on the following link: [http://www.emedny.org/info/ProviderEnrollment/index.aspx](http://www.emedny.org/info/ProviderEnrollment/index.aspx). For more information on applying for a Medicaid provider ID: [http://www.ctacny.org/training/medicaid-provider-enrollment-new-childrens-spa-and-hcbs-providers](http://www.ctacny.org/training/medicaid-provider-enrollment-new-childrens-spa-and-hcbs-providers)
Before Completing the Application in the Portal

Providers are required to have:

• A user ID (granted by the NYS OMH)
• A Facility Code

Instructions on obtaining these credentials are available at https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/childrens_designation_app.htm.
To Become a Designated Provider

1. Be an OMH, OASAS, OCFS, DOH, or OPWDD provider and meet the qualifications as outlined in the State Plan Services and HCBS Provider Manuals:
   
   A child serving agency or agency with children’s behavioral health and health experience that is licensed, certified, designated, and/or approved by OMH, OASAS, OCFS, OPWDD or DOH or its designee to provide comparable and appropriate services referenced in the definition

2. Submit an application to (https://my.omh.ny.gov/hcbs/default.aspx)

3. Obtain formal designation from the NYS Interagency Review Team

4. Return information or complete tasks outlined by any State agency who will be monitoring and overseeing service provision
   
   • Depending on the services for which you are applying, your agency may need to return signed authorization forms, complete a licensing application, certification attestation, obtain additional licensure from DOH, or do nothing. (More explanation in following slides.)
Provider Designation Information

- Qualified providers can apply for the new State Plan behavioral health services and Children’s Aligned Home and Community Based Services listed below through the application portal:
  - **New State Plan Services**: Other Licensed Practitioner, Crisis Intervention, Community Psychiatric Supports and Treatment, Psychosocial Rehabilitation, Family Peer Support Services, Youth Peer Support and Training
  - **HCBS**: Caregiver Family Supports and Services, Crisis Respite, Planned Respite, Supported Employment, Community Self–Advocacy Training and Support, Habilitation, Palliative Care, Prevocational Services

- Providers must meet the qualifications as outlined in the State Plan services and HCBS provider manuals, which can be found at:
How to Be Designated to Provide the Six New State Plan Services
New State Plan Services

- **New State Plan Services:** Other Licensed Practitioner, Crisis Intervention, Community Psychiatric Supports and Treatment, Psychosocial Rehabilitation, Family Peer Support Services, Youth Peer Support and Training

- The new State Plan Services will provide services that focus on:
  - Prevention and wellness;
  - Improving integration of behavioral health and health focused services earlier in a child’s life;
  - Allowing interventions to be delivered in natural community-based settings where children and their families live; and
  - Making available lower intensity services that prevent the need for more restrictive settings and higher intensity services

- The State Plan services will be under the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefits. EPSDT is an array of Medicaid benefits for children under 21 years of age, and has been focused primarily on children’s preventive medical care. These new services offer the opportunity to better meet children’s behavioral health needs and provide new approaches for rehabilitative interventions.
Glossary of Key Terms

- **Provider Designation**: The State Interagency process to review and approve applicants to be providers of the new State Plan Services or HCBS

- **Designation Letter**: The letter from the State Interagency Review Team notifying providers they have been approved (formally designated) to provide new State Plan Services or HCBS. Designation Letter will enable designated providers to initiate contract discussions with Managed Care Plans

- **Authorization Letter**: The letter issued by individual State agencies following the issuance of a Designation Letter to establish formal agreements for compliance activities and monitoring/oversight of State Plan or HCBS

- **Licensure**: A process undertaken to be authorized to provide licensed services by an individual State agency by the issuance of an operating certificate

- **Certification**: A process undertaken to be authorized to provide certified services by an individual State agency by the issuance of an operating certificate
State Agencies Issuing Authorization Letters/Operating Certificates for SPA Services

State agencies issuing Authorization Letters/operating certificates to providers for the provision of SPA services include the following:

- **Office of Mental Health (OMH)**: OMH authorizes the provision of the SPA services to children with mental health needs.

- **Office of Alcoholism and Substance Abuse Services (OASAS)**: OASAS certifies the provision of the SPA services to children with substance use needs.

- **Office of Children and Family Services (OCFS)**: OCFS authorizes the provision of the State Plan services to children within or discharged from foster care to Voluntary Foster Care Agencies (VFCA) and Bridges to Health (B2H) providers.
Designation for State Plan Services by Population

- Preliminary notification letters previously issued to some providers contained service designations for populations.
- The State is now issuing Designation Letters for State plan services that will indicate the following three populations: general mental health, substance use, and foster care for the State Plan services only.
- The medically fragile and developmentally disabled populations meeting medical necessity criteria will continue to be served.
Designation for State Plan Services by Population

- Agencies designated for State Plan services for “General Mental Health” can serve any child with mental health needs who meets medical necessity criteria, regardless of any co-occurring conditions.
- Agencies designated for State Plan services for “Substance Use” can serve any child with or in recovery from substance use disorders who meets medical necessity criteria, regardless of any co-occurring conditions.
- Agencies designated for “Foster Care” ONLY can only serve children who are in or discharged from foster care who meet medical necessity criteria, regardless of their diagnoses.
For **Current** OMH Licensed and/or OASAS Certified Providers

Applying for designation of OLP or CPST to *Serve Children with Mental Health Needs*:

- OMH will require a signed Authorization letter upon designation and issue a new operating certificate.

Applying for designation of Crisis Intervention, Psychosocial Rehabilitation, Family Peer Support, and Youth Peer Support and Training to *Serve Children with Mental Health Needs*:

- OMH will require a signed Authorization Letter upon designation.

Applying for designation of any SPA service to *Serve Children with or in recovery from a Substance Use Disorder*:

- For ALL SPA Services, Complete the Part 823 Children’s Designated Services’ “Attestation for currently Certified OASAS providers and currently Licensed OMH providers” Form will be on line on April 1st **https://www.oasas.ny.gov/legal/CertApp/capphome.cfm** Sign and return attestation form to OASAS for review and a contingent approval letter will be issued within 4 weeks.
Provider IS currently licensed by OMH or certified by OASAS seeking designation for OLP and CPST to serve children with mental health needs

- Provider applying is currently Licensed by OMH OR Certified by OASAS
- Provider applies for designation of OLP and/or CPST using the online application
- State will issue a designation letter indicating approved services
- Provider signs OMH Authorization letter outlining agency specific requirements
- OMH will issue a new operating certificate for OLP/CPST and an Authorization letter for PSR
Provider **IS** currently licensed by OMH or certified by OASAS seeking designation for ANY of the State Plan services to serve children with diagnosed *substance use disorders*

| Provider applying is currently Licensed by OMH OR Certified by OASAS | Provider applies for designation of any of the SPA services using the online application | Complete Part 823 Children’s Designated Services Attestation for currently Certified OASAS providers and currently Licensed OMH providers (form will be made available on line). | Provider begins working on Attestation form while waiting for designation Letter. | Provider submits their interagency designation letter with Attestation form to OASAS and reviewed within 4 weeks and a contingent approval letter will be issued | OASAS Contingent Approval Letter will allow for contracting with MCO. Two-Three months prior to beginning services an Operating Certificate will be issued for provision of any 6 new SPA Services. |
Provider (either OMH licensed or non-licensed) is Applying for PSR, FPSS, YPS, and CI to serve children with *mental health needs*

Provider applies for designation of one or more of the following services: PSR, FPSS, YPS, CI

State will issue a designation letter indicating approved services

Provider signs OMH Authorization letter outlining agency specific requirements
Applicant is currently **NOT** OMH Licensed and **is NOT** OASAS Certified seeking to serve children with mental health needs:

**Example**: Seeking designation for FPSS, YPST, OLP, CPST, and PSR to children with mental health needs

Providers seeking FPSS, YPST, and PSR need to complete the following:

- Apply for designation for FPSS, YPST, and PSR
- Receive Designation Letter from the State
- Sign and return OMH authorization letter for FPSS, YPST, and PSR

Providers seeking OLP and CPST must obtain OMH license:

- Complete a Prior Approval Review (PAR) application for OMH licensure for OLP/CPST
- Sign and return the OMH authorization letter for OLP/CPST
- A new operating certificate for OLP/CPST will be issued to the provider upon receipt of the signed OMH authorization letter
- Receive updated Designation Letter for these services now indicating approved for these services
Applicant is currently **NOT** Certified by OASAS and **NOT** Licensed by OMH seeking to serve children with a *primary SUD Diagnosis*

**Example:** Provider is seeking designation for ANY SPA Service: Crisis Intervention, OLP, CPST, PSR, FPSS, and/or YPST for children **with a substance use disorder.**

- Apply for designation for OLP, CPST, PSR, FPSS, YPST
- Complete *Part 823 Children’s Designated Services Application*- Begin to fill out the forms while awaiting the designation letter. Copies of appropriate forms can be found at: [https://www.oasas.ny.gov/legal/CertApp/capphome.cfm](https://www.oasas.ny.gov/legal/CertApp/capphome.cfm)
- Submit completed *Part 823 Children’s Designated Services Application with the State designation letter to OASAS*
- The OASAS Bureau of Certification will review and prepare it to go before the Behavioral Health Advisory Council (BHSAC). Please note the BHSAC meets quarterly.
- The BHSAC will make recommendations to the Commissioner to Certify the program or ask for additional information.
- Once approved by the Commissioner, a Contingent Approval letter will be issued.
- Formal designation to provide services will be issued upon completion of above.
Provider applying is **NOT** currently Licensed by OMH and **NOT** Certified by OASAS, seeking designation for OLP/CPST to serve children with mental health needs and/or substance use disorders.

- **Provider applying is NOT currently Licensed by OMH**
- Or Certified by OASAS

- **Provider applies for designation of OLP and/or CPST using the online application**

- **Apply for licensure (PAR) OMH process**
  And/OR
  Complete OASAS SPA Certification Process

- **Provider is now an OMH Licensed or OASAS certified provider**

- **State will issue a Designation Letter indicating approved services**

- **Authorization / Attestation letters will be issued from OMH and/or OASAS outlining agency requirements**

- **New Operating certificate issued (OMH or OASAS depending on what process the provider chooses)**
Applicant is a VFCA or a B2H provider who wants to continue to ONLY serve children in or discharged from foster care

**Example**: Seeking designation to provide ANY/ALL of the SPA/HCBS to children in foster care and children discharged from foster care.

- Apply for Designation
- Receive designation from the State
- Download Authorization letter from OCFS
Provider Designation of any SPA/HCB Services for a VFCA/B2H Provider to serve the children in or discharged from foster care

- Provider is a VFCA/B2H Provider
- Provider applies for designation of any SPA/HCB services using the online application
- State will issue a designation letter indicating approved services
- Authorization letters will accompany the designation letter outlining agency specific OCFS requirements where applicable
Applicant is a Current Voluntary Foster Care Agency

**Example:** A VFCA is ONLY authorized by OCFS. The VFCA would like to provide any of the SPA services to children in or discharged from foster care and any other children with mental health needs and substance use disorders.

- Apply for Designation
- Receive designation from the State to serve children in or discharged from foster care
- Complete authorization letter from OCFS

AND

- Follow directions in Slides 17-19 as a Non-Licensed or Certified Provider for designation from OMH and OASAS for serving all other children with mental health and substance use needs
How to Be Designated to Provide Aligned Children's Home and Community Based Services (HCBS)
Provider Designation - HCBS

NOTE:
For Palliative care designation, provider must already be a licensed Hospice, Article 28 or CHHA
For Habilitation designation, the provider must already be a certified OPWDD provider
Designation for HCBS and Populations

• Preliminary notification letters previously issued to some providers contained service designations for populations – the State has determined this is not necessary

• Agencies designated for HCBS can serve children within all populations, if they have been determined eligible and appropriate for services – hence, HCBS Designation Letters will not designate populations
Authorization Letters

- Authorization letters will be issued by the State Agency authorizing the provision of services and responsible for the oversight of monitoring of those services.

- The letters provide additional details the provider will need to adhere to that are State agency specific, such as State statutes, regulations, compliance activities, and/or reporting requirements, etc.

- Authorization letters will be signed by the provider and returned to the respective State agencies.

- Palliative Care and Habilitation Services providers will be monitored under their current licensure/operating certificate requirements, hence no separate Authorization Letter will be required.
OCFS and OMH Authorization Letters for HCBS

For the following HCBS: Caregiver/Family Services and Supports, Community Self Advocacy Supports and Training, Respite, Pre-Vocational Services, and Supportive Employment

• OCFS will issue authorization letters for VFCA and B2H
• OMH will issue authorization letters for everyone else
Palliative Care Requirements for Providers

Palliative Care – Providers seeking designation for any of the four palliative care services

- Bereavement
- Massage Therapy
- Expressive Therapy
- Pain and Symptom Management

Must have one of the following required licenses:

1. Article 28,
2. CHHA, or
3. Certified Hospice Provider;

Providers interested in providing palliative care services that do not have one of these required licenses should contact DOH at BH.Transition@health.ny.gov
Habilitation Requirements for Providers

All providers who are seeking designation for Habilitation will need to be certified by OPWDD, if they are not they will need to follow the OPWDD New Provider Process.
OPWDD New Provider Process

- Providers that would like to become certified by OPWDD are referred to the Community Development Office of the OPWDD Regional Office.
  - This is based on the region where the provider is located.
  - There are five Regional Offices throughout New York State.
- Through the new provider process, a Provider must demonstrate:
  - An understanding of service they wish to provide, a business capacity to operate an agency as well as demonstrate a comprehensive financial plan.
- For more information: https://opwdd.ny.gov/opwdd_services_supports/service_providers/how_to_become_a_service_provider
Applicant is a Current OMH/B2H Waiver Provider

**Example**: Seeking designation to provide Caregiver and Family Support Services and Respite

The provider must:

- Apply for provider designation
- Receive designation from the State
- Complete both OMH and OCFS authorization letters
Applicant is a Current DOH Article 28 Provider

**Example**: Seeking to provide Palliative Care and Caregiver Family Supports and Services

- Apply for designation
- Receive designation from the State
- No Authorization Letter necessary
Applicant is a Current OPWDD Habilitation Provider

**Example**: Seeking designation to provide Habilitation

- Apply for designation
- Receive designation from the State
- No Authorization Letter necessary
What’s Next?

• Providers with applications in “open status” must submit their applications by April 20th to be considered final for the initial round of provider designations to ensure they receive timely designation for MCO network contracting (these applicants have already been outreached)

• Providers who have applied and receive requests from the State for additional information to finalize their application review should respond ASAP to ensure timely designation

• Providers who have applied for designation can expect to receive formal designation letters from the State regarding their designation status Mid-May
  • Designation statuses will include: approved, pending certification/licensure, or denied

• **Reminder:** provider designation process remains a rolling process; however, it is important that the State can review and approve applications by Mid-May to ensure adequate time for MCO network contracting
Questions?

For any additional questions not addressed today regarding the Children’s SPA/HCBS designation process, please contact the following email box: OMH-Childrens-Designation@omh.ny.gov.

For all other questions, please use the following email boxes:

BH.Transition@health.ny.gov
OMH-Managed-Care@omh.ny.gov
Thank you