ANNOUNCEMENT
Changes to Respite Telehealth Services Under the 1915(c) Children’s Waiver
Home and Community Based Services (HCBS) in Response

December 13, 2022

TO: 1915(c) Children’s Waiver Respite HCBS Providers

The New York State Department of Health (the Department) is evaluating various policy flexibilities allowed during the COVID-19 Public Health Emergency (PHE) and determining which flexibilities will be ending and which ones will be extended (temporarily/permanently).

Effective January 1, 2023, the Children’s Respite Services flexibility will end and providers are required to revert to the original guidance provided in the HCBS Manual:

- Respite Services may no longer be billed if delivered via telehealth or telephonically to an individual or group;
- All Respite Services must be delivered in-person, as remote delivery will no longer be allowable;
- Respite Services may be delivered by qualified practitioners in a home or residence, out-of-home/residence by staff in community-based sites (e.g., community centers, camps, parks), or in allowable facilities; and
- Billing for Respite must be based on in-person interactions with the Waiver-enrolled children/youth.

Additionally, Planned and Crisis Respite services may not exceed the 14 days (1,344 15-minute units) annual limits without medical necessity, which must be documented in the member’s record. For a member enrolled in a Medicaid Managed Care Plan (MMCP), authorization from the MMCP must also be documented in the child’s case record. HCBS provided beyond these limits MUST be supported by medical necessity such as documentation through a Licensed Practitioner of the Healing Arts (LPHA) Attestation form. The HCBS Manual will be updated to provide additional guidance regarding the specific days/unit requirements.

Direct any questions regarding the Children’s Respite Telehealth Services unwind, or Children’s Waiver HCBS in general, to BH.Transition@health.ny.gov.