

## System Transformation Update



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[Children's Managed Care](#)

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[NYS Department of Health Website](#)

## 1 1915c Children's Waiver Amendment – Effective December 1, 2020

The State recently received CMS approval of a waiver amendment that includes the following:

- Expands the definition of Licensed Practitioner of the Healing Arts (LPHA) to include LPHAs who have the ability to diagnose within their scope of practice under NY State law *or who are under supervision* of an LPHA who has the ability to diagnose within their scope of practice under NY State law
- Removes duplicate documentation of risk factors after initial eligibility determination
- Updates the definition of Adaptive and Assistive Technology to remove references to service animals that are not consistent with the ADA definition
- Clarifies provider qualifications for Massage Therapy and Pain & Symptom Management

More information can be found here:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/docs/application\\_for\\_1915\(c\)\\_hcbs\\_waiver\\_%20draft\\_ny.019.05.09\\_dec\\_01\\_20.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/application_for_1915(c)_hcbs_waiver_%20draft_ny.019.05.09_dec_01_20.pdf)

## 2 HCBS LPHA Form Updates

The HCBS LPHA Attestation form has been revised!

- To allow for easier completion, there are now separate forms for each target population to assist providers completing the form.
- Practitioners who are authorized to complete the form has been **expanded** to include those licensed professionals *who are under supervision* of an LPHA who has the ability to diagnose within their scope of practice under NY State law.
- The form is no longer required as part of the annual reassessment, unless there is a break in service.

LPHA forms and instructions can be found on the [Department website](#) under the **Eligibility Forms tab**.

## 3 Ensuring Access to HCBS

**Interactive Map** – The State has created an [interactive map of designated providers](#) by service and by county so referrals can more easily be directed to these providers.

**Let us Know When There is an Access Issue** – The State is asking Care managers encountering service waitlists or other HCBS access issues to complete this brief [survey](#), so the State can assist in addressing these issues and help build provider capacity.

### Electronic Visit Verification (EVV)

is a system that electronically verifies home or community-based service visits, identifying the time that service begins and ends to ensure accurate claiming, and that beneficiaries get expected services.

Children's Waiver Community Habilitation and Respite providers must comply with [EVV requirements](#) – including completing the EVV **Attestation** via eMedNY. Respite providers must also complete an [EVV Declaration](#) – which were due November 18, 2020.

[EVV Program Guidelines](#)

**Additional  
Resources**[Directive: Notify the State of Issues](#)[COVID-19 Ineligible Request Guidance](#)[HCBS POC Workflow Desk Aid](#)[Children's Waiver HCBS POC Workflow](#)[Children's System Definitions Tip Sheet](#)

## 4 Timeline Updates

**VFCA/29-I Health Facility Transition** — The Voluntary Foster Care Agency (VFCA) transition to 29-I Health Facilities and Medicaid Managed Care will be taking place via a phased approach.

VFCAs may elect to opt-in to implement Article 29-I licensure services on **2/1/2021 (Phase 1-FFS Only)** prior to the full transition to managed care on **7/1/2021 (Phase 2)**. For Phase 2, each VFCA must transition to a 29-I Health Facility to bill Medicaid Managed Care for those children enrolled. Phase 2 will also begin the carve in of the foster care population to Medicaid Managed Care, unless otherwise excluded or exempt.

VFCAs that do not elect to opt-in to Phase 1 will continue to serve the children/youth in their care as they do today. The State continues to work through billing, system, and regulatory items to ensure a successful transition.

## 5 Freedom of Choice & Participant's Rights Forms

The 1915(c) Children's Waiver requires that participants be informed of their Freedom of Choice regarding their options to receive care, how to report a complaint and/or grievance, how to report abuse or suspected abuse, and when and how to request a Fair Hearing. To comply with this requirement, care managers must provide the **Participant's Rights and Responsibilities** to Children's Waiver participants upon enrollment. Translated versions of this document will be available on the DOH website so participants and their families can receive this information in their preferred language.

Participants or their parents/guardians/legally authorized representatives must sign the **Freedom of Choice Form** indicating their decision to participate in the 1915(c) Children's Waiver; a forthcoming version of this form will include confirmation that the participant/family has received and understands the **Participant's Rights and Responsibilities**.

## 6 Upcoming Trainings

**HCBS Provider & Care Manager Trainings** — The purpose of these trainings is to prepare providers and care managers to effectively deliver children's HCBS and comply with provider requirements.

The topics of these trainings include:

- HCBS Overview
- Waiver Enrollment
- Referrals
- Service Delivery Requirements
- LOC/Eligibility Determination
- POC Development
- Care Management Requirements
- Transfer/Waiver Disenrollment

These trainings are expected to be available starting in January 2021.

**HCBS Case Record**

**Reviews** — CMS requires annual case reviews for the 1915(c) Children's Waiver to ensure quality standards are being met. For the 2019-2020 waiver year, case reviews will be conducted at the Health Home/C-YES level; HCBS providers may be asked to provide supporting documentation. These reviews are beginning in January 2021.



