



NYS Children’s System Transformation Updates

1st Quarter 2019

January:

Updated CFTSS Manual: New York State (NYS) last issued the CFTSS Manual on June 20, 2018. At that time, we requested stakeholder feedback on the newly added “Standards of Care” in the appendix of the document. After receiving comments, we have integrated the edits to the manual and are reissuing an update version.

https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/updated_spa_manual.pdf

Example Medical Necessity/Recommendation Form Shared by the State: the State has received a number of questions inquiring about how such a recommendation would need to be made. Therefore, in order to assist providers, the State has developed a sample template as an example of what a written recommendation may include. Please note, this example is NOT a required form to be used, but only a sample template which captures the information necessary to demonstrate medical necessity.

https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/example_lpha_recommendation_memo.pdf

Guide to Restriction Exception (RE) Codes and Health Homes Shared: include the new codes for the children’s HCBS transition

https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/docs/restriction_exception_codes.pdf

Memo on extension of the 90 day Utilization Management Requirements for CFTSS to 180 days: the State is extending the utilization management prohibition for Other Licensed Practitioner (OLP), Community Psychiatric Support and Treatment (CPST), and Psychosocial Rehabilitation (PSR) from 90 to 180 days. Therefore, MMCPs will now be restricted from conducting utilization management on OLP, CPST, and PSR from January 1, 2019 through June 30, 2019 for all MMCP enrolled children receiving these three services.

For children currently enrolled in Medicaid managed care, MMCPs must continue all historical waiver services included in the transitioning waiver child’s Plan of Care, including CPST and PSR, and any State Plan long term services and supports, for 180 days from the date the aligned children’s HCBS are added to the managed care benefit package. For two years after the aligned children’s waiver HCBS are added to the managed care benefit package, newly enrolled children in receipt of children’s HCBS will have the same 180 days of continuity of care from the date the child enrolls in the MMCP

Guidance on Other Licensed Practitioner (OLP) for children who are receiving treatment services from an OMH Licensed Clinic: provide guidance on when it may be appropriate to receive OLP and clinic services concurrently, and how the other rehabilitative services, Community Psychiatric Supports and



Treatment (CPST) and Psychosocial Rehabilitation (PSR), may also help to support children while in clinic treatment.

The NYS Children’s Medicaid System Transformation: A Discussion with Children and Families Webinar

Held: New York State (NYS) invites Children and Families enrolled in the 6 transitioning 1915c Waivers to learn about changes happening to the Children’s Medicaid System and what that means for families, including additional opportunities coming for families.

February:

Children’s VBP Measures Released: The Children’s measure set was designed to encourage providers to meet high standards of patient-centered clinical care and coordination across multiple care settings for the child and adolescent population. Created in collaboration with the Children’s Health VBP Subcommittee and Clinical Advisory Group (CAG), as well as the New York State VBP Workgroup.

https://www.health.ny.gov/health_care/medicaid/redesign/dsrip/vbp_library/quality_measures/2019/childrens_qms.htm

Required Steps for the Transition of 1915(c) Waiver Care Coordination to Health Home Care Management or the Independent Entity Under the Children’s Medicaid Transformation Document was Released:

Mentions explaining the transition to families (including resources with “talking points” for families) and highlights the steps of transitioning to Health Home care management or C-YES.

https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_children/docs/1915c_transition_steps.pdf

Children’s Medicaid Transformation Update: Transition to Health Home Care management and Children’s Waiver Webinar Held on Wednesday, February 13, 2019

Children’s Health and Behavioral Health Services Transitional Billing Supplement Updated

https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/nys_child_trans_bill_supp.pdf

Children’s Home and Community Based Services Provider Manual Updated

https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/draft_hcb_s_manual.pdf

March:

HHSC Standards Updated: Changes to SED and quarterly eligibility verification no longer required but CMs encouraged to check EPACES regularly and referred to requirement of interdisciplinary team meeting upon initial POC development, every 6 months with a completed CANS-NY and whenever a significant life event occurs where the POC should be updated. These meetings are an opportunity to assess the child’s eligibility.



Special Note: ADHD can be utilized as the primary condition for SED if the functional limitations and the determination of SED is made. It is no longer required that past services within the last three years is also needed. However, a diagnosis of ADHD is not a chronic condition for Health Home eligibility.

- https://health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_children/index.htm

Update to Children’s Transition to MMC Timeline: Services Carved-In to Medicaid Managed Care on October 1, 2019 (This is a Change)

- 1915(c) Children’s Waiver Services carved-in to managed care
- Children enrolled in the 1915(c) Children’s Waiver mandatorily enrolled in Medicaid managed care (remove mandatory Medicaid managed care exemption for participation in a children’s 1915(c) waiver)
- Public Health Law Article 29-I Licensure becomes effective for Voluntary Foster Care Agencies (VFCA)
- VFCA core services (residual per diem) and other limited health-related services carve in to Medicaid managed care
- Children placed with VFCA are enrolled in Medicaid managed care

Services Access Documentation – Plan of Care, Service Plan, Treatment Plan differences:

https://health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/services_access_documentation.pdf