

WGIUPD

**GENERAL INFORMATION SYSTEM**

10/16/24

**DIVISION:** Office of Health Insurance Programs

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**GIS 24 MA/08**

**TO:**

Local District Commissioners, Medicaid Directors

**FROM:**

Trisha Schell-Guy, Director

**SUBJECT:**

Division of Program Development and Management

1915(c) Children's Waiver Home and Community Based Services Waiver - Recipient Restriction Exception "K" Codes

**EFFECTIVE DATE:**

October 14, 2024

**CONTACT PERSON:**

1915(c) Children's Waiver Home and Community Based (HCBS) at (518) 473-5569

The purpose of this General Information System (GIS) message is to advise the LDSS of updates regarding entering certain RR/E K-Codes for the Children's Waiver Home and Community Based Services (HCBS). As a reminder, the following are the RR/E K-codes used for the Children's Waiver for identification purposes (see 19/OHIP ADM-02 "Consolidated Children's Waiver and Medicaid Case Processing Requirements"):

- R/RE KK: Child is Eligible for Medicaid as a Family of One
- R/RE K1: HCBS Level of Care Acuity
- R/RE K3: HCBS Diagnostic Group – Serious Emotional Disturbance
- R/RE K4: HCBS Diagnostic Group – Medically Fragile
- R/RE K5: HCBS Diagnostic Group – Developmentally Disabled and in Foster Care
- R/RE K6: HCBS Diagnostic Group – Developmentally Disabled and Medically Fragile

The Children's Waiver HCBS Eligibility Determination must be conducted initially and annually thereafter, to determine if the child/youth is eligible for HCBS. The HCBS Eligibility Determination is effective for 365-days from the date of the completed assessment for children/youth found HCBS eligible. The HCBS Eligibility Determination assessment must be conducted annual, and the child/youth continue to be found eligible for the RR/E K-codes to remain in place.

Effective October 14, 2024, the Local Department of Social Services (LDSS) will no longer be responsible for entering the start or end dates for K1-K6 RR/E codes. The NYS Department of Health's Children's Waiver Office will now enter all RR/E K1-K6 codes and the specific "end date" of 365-days timeframe and will be responsible for updating the timeframe for initial and annual reassessment or when a change in circumstance related to enrollment in the Children's Waiver occurs.

For example, upon any HCBS Eligibility Determination, the "end date" of the appropriate RR/E K codes (except for RR/E KK code) will be updated by the NYS Department of Health's Children's Waiver Office to reflect a new 365-day timeframe. For an ineligible annual reassessment, the RR/E K code end dates will be updated by the NYS Department of Health to reflect the date of the ineligible determination.

The LDSS will continue to be responsible for identifying children who are Medicaid eligible under a family-of-one budget and the data entry of RR/E KK code. The RR/E KK code is to be entered with no provider ID number. The "From" date is the first day the month in which Medicaid eligibility is approved. The "Thru" date will continue to equal 12/31/9999.

**Please remember that Districts are responsible for ending RR/E code "KK" the first day of the month in which a certified disabled child turns age 18.**