IRAMS: Referral and Authorization Portal
New Features and Updates

October 10, 2025

TO: Children's Home and Community Based Service (HCBS) Providers, Health Homes Serving Children, Children's Care Management Agencies (CMAs), Children and Youth Evaluation Services (C-YES), and Medicaid Managed Care Plans (MMCPs)

The New York State Department of Health (the Department) would like to announce the launch of updates to the HCBS Referral and Authorization Portal (the Portal) within the Incident Reporting and Management System (IRAMS). The following enhancements, designed to improve user experience and streamline processes, are **live** as of **October 3, 2025**.

NEW: Planned and Crisis Respite Allowances

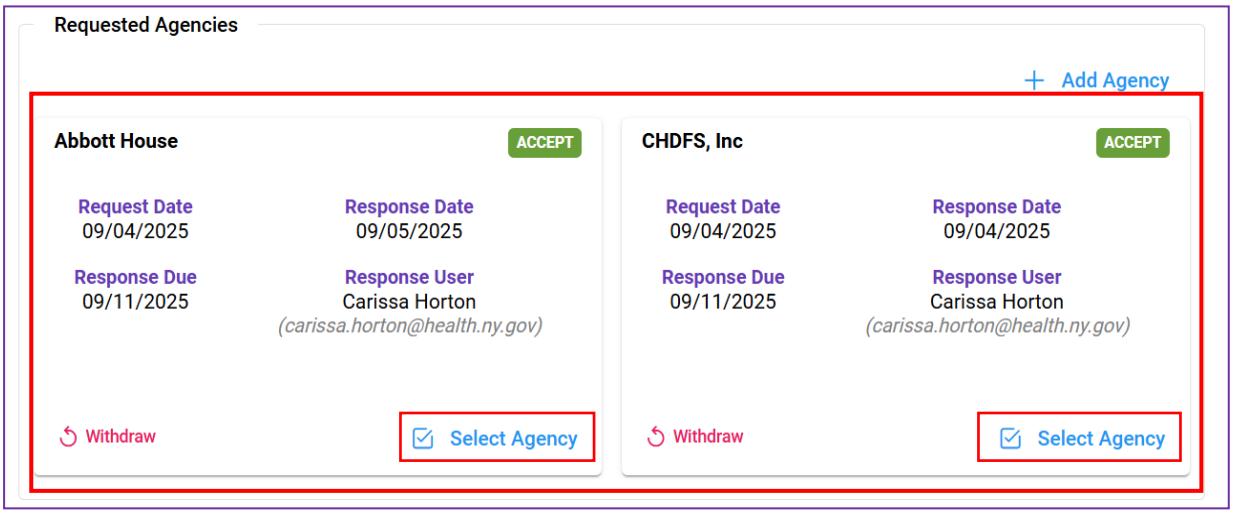
In alignment with Department policy, the Portal has not permitted multiple HCBS agencies to provide the same HCBS to the same participant. The Department acknowledges that there may be instances where a participant may require various types of Respite (Planned Day, Overnight and/or Crisis Respite) and the current assigned HCBS provider may not be designated to provide the different types of Respite to meet the member's needs. For example, a participant may be in need of both overnight, per diem Respite and daytime, hourly Respite. It's possible that the same HCBS provider agency is not able to provide both daytime and overnight Respite.

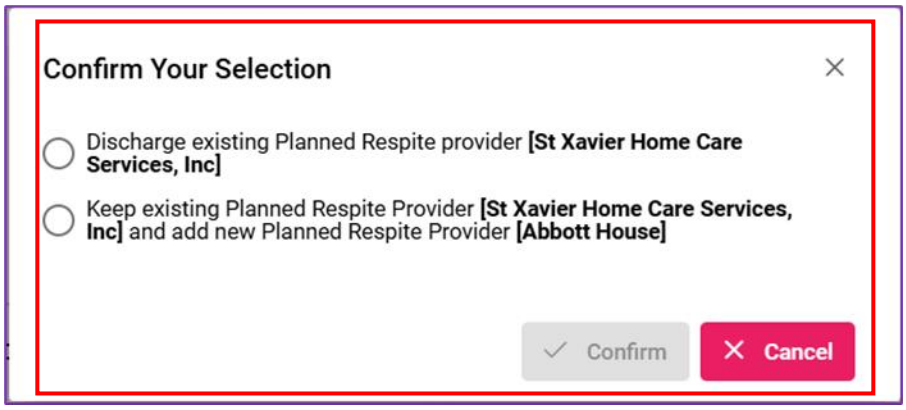
In response, the Department has updated IRAMS to allow participants to receive Planned and/or Crisis Respite from up to two HCBS provider agencies simultaneously. The system will no longer automatically discharge an existing Planned or Crisis Respite provider when a new provider is selected via the Select Agency button in a referral. A participant can maintain a connection to up to two Planned Respite and/or Crisis Respite providers.

This can **only** occur when the current "assigned" provider is not designated or does not have capacity for the additional Respite service that is needed by the participant. In this circumstance, the care manager for the participant must be contacted to discuss the need. The care manager must work with the participant/family to determine the need, ensure the request/need aligns with the service definition, and then choice of provider is discussed. If special circumstances arise that require the same HCBS from multiple providers, the care manager and HCBS Providers **must document the justification in the participant's record. This allowance applies to Planned Respite and Crisis**

Respite only. It is not permissible for a single participant to receive any other HCBS from more than one HCBS provider agency. **Medicaid Managed Care Plans must update their systems as necessary to allow for billing/claiming for Planned and Crisis Respite by up to two providers per participant.**

The below screenshots provide an overview of what care managers will see in the system when selecting a second Respite provider:





Once a Care Manager clicks on "**Select Agency**," for a referral accepted by a second Planned/Crisis Respite provider agency, the system will present a prompt to the Care Manager to confirm provider selection,

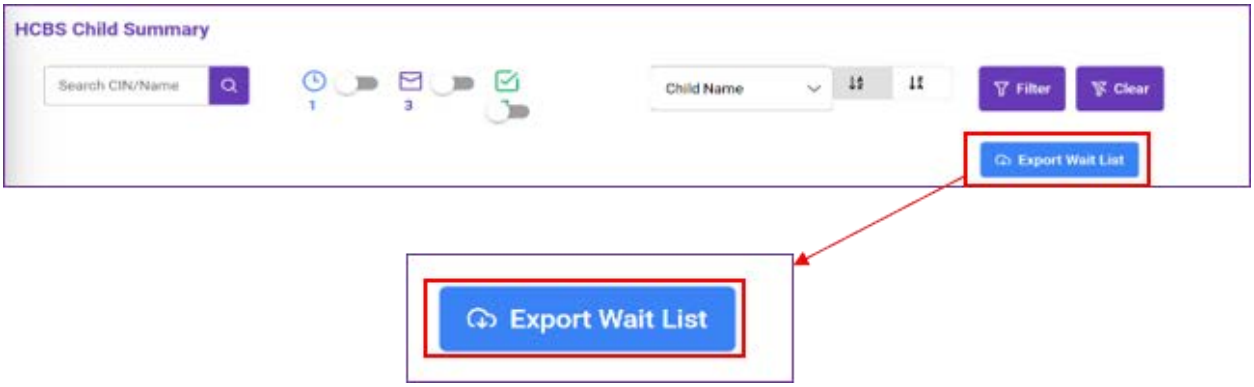
offering the following options:

- Discharge existing Planned Respite provider [Provider Name]
- Keep the Existing Planned Respite provider [CURRENT PROVIDER] and add the new Planned Respite provider [NEWLY SELECTED PROVIDER].

Care managers must make the appropriate selection based on the participant's circumstance. The Portal will not allow a connection to more than two Planned Respite and/or Crisis Respite providers.

NEW: Waitlist Reports

Portal users now have access to a new feature which allows for the export of waitlist information directly from the Child List Page. The exported waitlist file offers the ability to filter the data according to specific criteria, including whether the participant is on a statewide waitlist or an agency waitlist. Users can click on "Export Waitlist," and the export will automatically start to download in an Excel workbook format. This feature is available to HHs, CMAs, C-YES, HCBS Providers, and MMCPs to view participant information relevant to their organization. The below shows a screenshot of how to access this information in the portal:



A definition document has been developed to assist users in interpreting the information contained within the Waitlist Extract. The Waitlist Extract Definition Document can be found on the Department website at the following link:

- Waitlist Extract Definition Document - (Web) - (PDF) - October 9, 2025

Additional information about the Referral and Authorization Portal can be found on the Critical Incident, Staff Compliance Tracker, & HCBS Referral and Authorization Portal page of the Department website under the Children's HCBS Referral and Authorization Portal section.

Questions on these updates or any other topics related to the Referral and Authorization Portal can be sent to https://apps.health.ny.gov/pubpal/builder/email-health-homes with "IRAMS Questions only- No PHI" as the subject.