



Department
of Health

Approved Children's Waiver Amendment Overview

April 22, 2026

AGENDA

- ✓ **Amendment Overview and Timeline**
- ✓ **New Services**
- ✓ **Removal of Services**
- ✓ **EMod, VMod, AAT, and FMS Updates**
- ✓ **C-YES Updates**
- ✓ **Additional Language, Restriction, & Requirement updates**
- ✓ **Next Steps**



AMENDMENT OVERVIEW

Approval April 1, 2026

Purpose of This Webinar:

This webinar provides an overview of the approved [1915\(c\) Children's Waiver Amendment effective April 1, 2026](#), and highlights key service, policy, and operational updates.

Additional guidance, including updated manuals and policies, will be issued by the Department of Health to support rollout and operational readiness.

Department of Health Children's Waiver website [1115 Waiver/Home and Community Based Services \(HCBS\)](#)

- **Overview of 1915c Children's Waiver and 1115 Waiver purple box** has all the Amendment for the Children's Waiver
 - Children's Waiver Amendment [Application for 1915\(c\) HCBS Waiver: NY.4125.R06.03 - Apr 01, 2026 \(as of Apr 01, 2026\)](#)

NEW SERVICES



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NEW SERVICES-TRANSITIONAL CARE COORDINATION

Transitional Care Coordination (TCC)

Transitional Care Coordination supports children and youth preparing to transition from institutional settings, including hospitals and nursing facilities, back to their homes and communities. The service focuses on coordinating discharge planning activities and ensuring that services and supports identified in the Transitional Plan of Care are in place for a safe and successful transition.

The Department sent out a survey of interest to various provider groups and stakeholder to gather interest to become a TCC HCBS provider. The Department has been working with these interested providers.

TCC Providers

The Department will be designating **7 agencies** initially to provide TCC. Each TCC provider will be matched to an individual institutional setting based on a set of clinical, operational, and geographic considerations to support timely and effective discharge planning.

TRANSITIONAL CARE COORDINATION CRITERIA

Eligibility Criteria

Children and youth in an institutional level of care who:

- Have been in an institutional setting for at least one year (age 1+) or at least 12 weeks (under age 1), and
- Are experiencing non-medical barriers to discharge, and
- Can be medically discharged within the next six months, but where safety or continued care concerns remain.

Service Timeframes

TCC may be provided for:

- Up to 180 consecutive days while the participant remains in an institutional setting, and
- Up to 60 days following transition to the home or community setting.

Billing & Program Structure

TCC is carved out of Managed Care and services are billed Fee-For-Service (FFS) for all participants



TRANSITIONAL CARE COORDINATION

TCC Workflow

- ❑ Establish relationships with their assigned institutions
- ❑ Work collaboratively to identify children/youth who may be appropriate for TCC
- ❑ Work with DOH C-YES to establish HCBS eligibility for TCC participants
- ❑ TCC Providers will assist participants in addressing and removing non-medical barriers to discharge
- ❑ TCC Providers will collaborate with institutional staff and external entities to support discharge planning and completion
- ❑ 45-30 days prior to discharge, referral will be made to Health Home
- ❑ Prior to discharge a multidisciplinary team meeting will occur
- ❑ TCC Providers will transition participants to a Health Home for ongoing care management

NEW SERVICES - TRANSITIONAL SERVICES

Transitional Services (TS)

Transitional Services is additional funding to support children and youth transitioning from institutional settings to the community. TS may be used to provide one-time, non-recurring supports to remove barriers to discharge and funding essential, non-traditional supports needed for a safe and stable transition to the community.

TS Examples

Allowable TS expenditures may include:

- Moving costs for furniture and personal belongings
- Security deposits required to obtain a lease
- Broker's fees required to obtain a lease
- Essential home furnishings
- Utility or service set-up fees or deposits (e.g., telephone, electricity, heating)
- Health and safety assurances, such as pest removal, allergen mitigation, or one-time cleaning prior to occupancy

TS can only be utilized with TCC service



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TRANSITIONAL SERVICES

Transitional Services (TS) can only be utilized with Transitional Care Coordination

Service Timeframes/Limits

- Approved TS costs may be authorized up to 30 days prior to discharge and no later than 60 days after discharge from the institutional setting
- The maximum allowable amount for TS is \$8,000

Billing & Program Structure

- TCC is carved out of Managed Care and services are billed Fee-For-Service (FFS) for all participants.
- TS are administered by the Financial Management Service (FMS).

REMOVAL OF SERVICES



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REMOVAL OF SERVICES

Sunsetting of Day Habilitation as a Children's Waiver home and community-based service

- Participants in need of strengthening skills related to ADLs/IADLs can receive these supports through **Community Habilitation**, which addresses the same needs, however, does not have the added restriction to be delivered at an OPWDD certified site.
- Additional information about this change can be found in the following: [Discontinuation of HCBS Day Habilitation Service Effective January 1, 2026 Announcement](#)



REMOVAL OF SERVICES

Removal of Service Dogs from Assisted and Adaptive Technology

- The process for training and obtaining a service dog took a long time
- The cost for a service dog was consistently over the allotted amount
- There was no guarantee of a match to a child/youth or to assist with the identified condition

EMOD, VMOD, AAT, AND FMS UPDATES



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EMOD, VMOD, AAT, AND FMS UPDATES

Fiscal Management Services (FMS) Updates

- FMS responsibilities expanded to include administration of Transitional Services
- FMS rate increased for: Environmental Modifications (EMod), Vehicle Modifications (VMod), and Adaptive and Assistive Technology (AAT) See rate sheet: [HCBS Rate Sheet](#)

Provider Qualifications for Vehicle Modification

- VMod providers must be certified by the National Mobility Equipment Dealers Association (NMEDA). This is a clarification of previous Waiver language which inaccurately indicated that VMod providers were required to be certified by ACCESS-VR.



EMOD, VMOD, AAT, AND FMS UPDATES

Service Limitations

- Clarified that **EMods, VMods, and AAT** each have an established limit that cannot be exceeded without:
 - Special circumstances
 - Medical documentation meeting NYSDOH requirements
 - Prior approval from FMS/NYSDOH
- **EMods, VMods, and AAT** cannot be requested solely for behavioral needs
- **EMods** can now be initiated while a participant is in an institutional setting, up to 180 days prior to their planned discharge from the institutional setting.
- Clarified in **EMods** that the practice of “balance billing” or requiring/allowing families to fund some of the cost of a service from their own funds is prohibited under Federal and New York law.

Service Component Updates

- Service Dogs have been removed as allowable AAT

INDEPENDENT ENTITY CHILDREN AND YOUTH EVALUATION SERVICES (C-YES) UPDATES



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CHILDREN AND YOUTH EVALUATION SERVICES

Children and Youth Evaluation Service (C-YES)

- The Department of Health and Office of Mental Health along with County SPOAs have taken over the function of C-YES, the Independent Entity for the Children's Waiver.
- Children not currently enrolled in Medicaid in need of an HCBS Eligibility Determination must be referred to the State operated C-YES program for completion of the Determination and assistance with applying for Medicaid.
 - ❖ The State operated C-YES program does not conduct HCBS eligibility for children who have Medicaid. These children/families will be directed to the Health Home program.

Website: [The Department of Health \(DOH\) Children and Youth Evaluation Services \(C-YES\)](#)

Online referral for non-Medicaid children: [C-YES Online Referral | Survey Builder](#)

Toll-Free: 1-833-861-4467

Local: 518-408-5358

Email: CYESConnect@health.ny.gov



C-YES HCBS AND MEDICAID ELIGIBILITY PROCESS

1. C-YES will educate the child/youth/family and professionals regarding the purpose, goal, and services of HCBS. C-YES will review the eligibility requirements, documentation needed to support eligibility, and the Medicaid process.

2. C-YES will provide an overview of the HCB Services and their purpose, as well as provide education and resources on other available supports related to the child/youth's needs, as appropriate during the C-YES referral process.

3. C-YES will complete an appropriate screening with the child/youth to determine appropriateness for HCBS prior to pursuing HCBS/Medicaid eligibility.

4. C-YES will educate the child/youth/family about Health Home comprehensive care management, HCBS only care coordination by Qualified Individual Identified by the State, and the role and responsibilities of the care manager.

The participant/family should also be educated why comprehensive care coordination is more appropriate to coordinate the various services to support the child/youth's complex needs. Children and youth with Family of One budgeting should also obtain care coordination through the Health Home to ensure continuity of care in care coordination and limit the transferring back and forth between the Health Home and the Qualified Individual identified by the State when there is a change in receiving HCBS.



WAIVER REQUIREMENT

Children's Waiver participants must be offered care coordination services.

Most Children's Waiver participants are expected to meet this requirement through enrollment in Health Home Care Management, a comprehensive care management option that can assist in coordinating all aspects of the participant's care, inclusive of HCBS.

Children/youth who opt-out of Health Home comprehensive care management will receive HCBS **only** care coordination from a Qualified Individual Identified by the State and their Medicaid Managed Care Plan (MMCP), if enrolled.

The Department will be issuing updated policies and presenting a webinar regarding the Transfer Process between C-YES, the Qualified Individual Identified by the State, and Health Homes, and the Role and Responsibilities of HCBS care coordination of Health Homes, the Qualified Individual Identified by the State, and the Medicaid Managed Care Plans.

ADDITIONAL LANGUAGE, RESTRICTION, & REQUIREMENT UPDATES



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ADDITIONAL LANGUAGE, RESTRICTION, & REQUIREMENT UPDATES

Technical Clarifications & Policy Clean-Up

- Clarifying limits in HCBS and provisional plan of care service necessity limits for all HCBS to align with the limits outlined in [HCBS Service Definition and Necessity Criteria Policy #CW0020](#) issued in June 2025.
- Removal of references to Teaching Family Homes as allowable settings for Overnight Respite since these no longer exist in New York.
- Clarified that Community Habilitation direct service worker and supervisory staff must have at least a high school diploma or equivalent education.
- Clarified that Community Habilitation is used to teach participants how to complete ADL/IADL/Health-Related tasks rather than to directly provide ADL/IADL/health-related tasks by staff for the participant, which are not allowable.

ADDITIONAL LANGUAGE, RESTRICTION, & REQUIREMENT UPDATES

Non-Medical Transportation (NMT)

Updated language regarding the ability to utilize Non-Medical Transportation (NMT), adding more flexibility based upon feedback from stakeholders.

- NMT can be used for a specific period and specified duration as outlined in the NYS Children's HCBS manual.
- NMT cannot typically be used for recurring trips (i.e. regular commuting for work, etc.) however can be used for these purposes when typical transportation or support cannot be provided for a period of time (i.e. car repair needed or caregiver can no longer transfer child due to temporary schedule change, etc.).
- Individuals receiving residential services are not eligible for NMT.



NEXT STEPS



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NEXT STEPS

Updated Guidance & Manuals

- DOH will issue an updated Children's Waiver manual and associated policies reflecting elements of the approved 1915 (C) amendment

Training & Technical Assistance

Training will be provided to:

- Health Homes Serving Children (C-YES to HH Transfer process, TCC, etc.)
- Fiscal Management Services (FMS)
- Transitional Care Coordination providers

Systems & Operational Updates

Updates will be implemented across:

- MMIS, UAS NY, FMS workflows, HCBS authorization and billing processes

Monitoring & Quality Oversight

- DOH will monitor implementation to ensure alignment with CMS assurances, service definitions, and program integrity requirements



UPCOMING WEBINARS:

Transitional Care Coordination Overview and Process webinar

May 12, 2026
10-11:30 am

For: Health Homes Serving Children and Potential Children's HBCS Transitional Care Coordination Providers

Purpose: The New York State Department of Health (the Department) recently announced Centers for Medicare and Medicaid Services (CMS) approval of a Children's Waiver amendment effective April 1, 2026. One of the updates included in this amendment is the implementation of Transitional Care Coordination (TCC), a new Children's Waiver service. The Department will be hosting a **Transitional Care Coordination Overview and Process webinar** on **May 12th from 10-11:30am**. This webinar will provide an overview of TCC and expectations for coordination between TCC providers and Health Homes Serving Children.

Please register to attend this webinar here: <https://meetny.gov/webex.com/weblink/register/r7325fccbf64fd27a551333d9ca79e7e8>



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UPCOMING WEBINARS:

Health Home, C-YES and Qualified Individual Identified by the State Transfers and Care Coordination webinar

May 18, 2026
1-2 pm

For: Health Homes Serving Children (HHSC), Children and Youth Evaluation Services (C-YES), and Medicaid Managed Care Plans (MMCP)

Purpose: The New York State Department of Health (the Department) recently announced Centers for Medicare and Medicaid Services (CMS) approval of a Children's Waiver amendment effective April 1, 2026. Included in this amendment are updates to C-YES administration and processes. The Department will be hosting a **Health Home, C-YES and Qualified Individual Identified by the State Transfers and Care Coordination webinar** on **May 18th from 1-2pm**. This webinar will provide an overview of the new transfer process between C-YES, Health Home, and the Qualified Individual Identified by the State. This webinar will also outline care management requirements for Children's Waiver participants including the role of the HHSC, the MMCP, and the Qualified Individual Identified by the State.

Please register to attend this webinar here: <https://meetny.gov/webex.com/webex/register/r07b4c08c457133f884adff2f199b5169>



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CONTACT US

All **Children's Waiver HCBS** questions and concerns should be directed to the NYS Department of Health at BH.Transition@health.ny.gov mailbox or (518) 473-5569.

Questions related to specific **Fee-for-Service case issues** can be submitted through the Health Commerce System (HCS) Secure File Transfer to hcbsffsauthorization@health.ny.gov

For questions about the **Referral and Authorization Portal, Staff Compliance, and HCBS Critical Incidents/Grievances** email [Health Homes](mailto:HealthHomes@health.ny.gov) with a subject line of "IRAMS Questions Only – No PHI"

Questions regarding the **HCBS Settings Final Rule** can be directed to ChildrensWaiverHCBSFinalRule@health.ny.gov.

NYS Department of Health Managed Care Complaint Line
1-800-206-8125 or managedcarecomplaint@health.ny.gov.



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