Capacity Management Webinar

September 25th 2019

Agenda

❑ Refresher – What is Capacity Management
❑ Tracking
❑ Process and Operations
❑ Communication
❑ Secure File Transfer Protocol
❑ New Recipient Restriction/Exemption (RR/E) codes
❑ Override

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Today's Presentation

- Will outline the process of Capacity Management under Children's Waiver that began April 1, 2019

- The previous six 1915(c) waivers had varying numbers of slots and allocation processes. Under the consolidated waiver there is one set of waiver slots and one process for assigning them

- The importance for the Health Home care managers to communicate with Capacity Management and ensure that children who are HCBS eligible and receiving services have a waiver slot assigned

- When to notify Capacity Management about changes in a child's status

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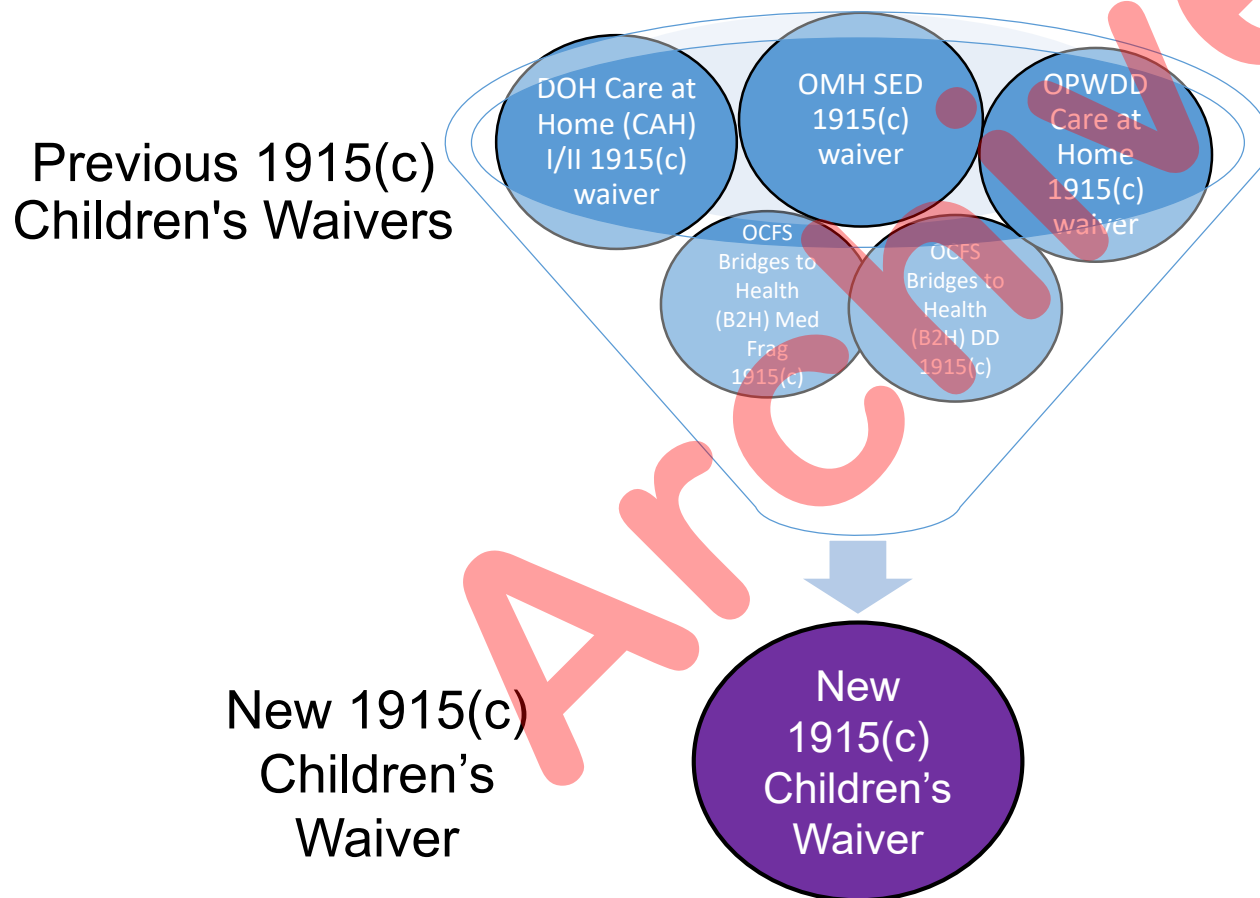NEW YORK STATE | Department of Health | Office of Mental Health | Office of Alcoholism and Substance Abuse Services | Office of Children and Family Services | Office for People With Developmental Disabilities

What is Capacity Management?

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What is Capacity Management?

Capacity Management is the process by which New York State DOH manages the combined slots for the New 1915(c) Children's Waiver, which went into effect April 1, 2019

Previous 1915(c) Children's Waivers

DOH Care at Home (CAH) I/II 1915(c) waiver

OMH SED 1915(c) waiver

OPWDD Care at Home 1915(c) waiver

OCFS Bridges to Health (B2H) Med Frag 1915(c)

OCFS Bridges to Health (B2H) DD 1915(c)

New 1915(c) Children's Waiver

New 1915(c) Children's Waiver

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Capacity Management Method

The populations of the six waivers were reviewed and grouped together to align with four **Target Populations**:

Medically Fragile	Serious Emotional Disturbance (SED)	Developmental Disability and Medically Fragile	Developmental Disability and in Foster Care

Slot Capacity is tracked by each Target Population separately and then also by five (5) Regions (the regions are based upon the OMH Regions)

Slot Capacity is monitored by the Regions to ensure that all regions have equitable access to the Children's Waiver.

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Capacity Development Over Time

Year 3 began April 1, 2019, when the Consolidated Children's Waiver was implemented. The number of slots available each month will increase beginning July 2019

Year 3			
Month	Base Number	Change	Participant Limit
April	1755	5840	7595
May	7595	0	7595
June	7595	0	7595
July	7595	191	7786
August	7786	191	7977
September	7977	191	8168
October	8168	191	8359
November	8359	191	8550
December	8550	191	8741
January	8741	191	8932
February	8932	191	9123
March	9123	190	9313

Year 4			
Month	Base Number	Change	Participant Limit
April	9313	191	9504
May	9504	191	9695
June	9695	191	9886
July	9886	191	10077
August	10077	191	10268
September	10268	191	10459
October	10459	191	10650
November	10650	191	10841
December	10841	191	11032
January	11032	191	11223
February	11223	191	11414
March	11414	190	11604

Year 5			
Month	Base Number	Change	Participant Limit
April	11604	191	11795
May	11795	191	11986
June	11986	191	12177
July	12177	191	12368
August	12368	191	12559
September	12559	191	12750
October	12750	191	12941
November	12941	191	13132
December	13132	191	13323
January	13323	191	13514
February	13514	191	13705
March	13705	189	13894

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Management Method

NYS DOH Capacity Management team monitors the number of Waiver participants by Target Population and Region

Should Capacity Management become concerned about enrollment reaching a threshold, then a waitlist for the Children's Waiver might occur and limits by Region and Target population will be set

To review how a waitlist will be managed and Crisis slots developed, please review the previous Capacity Management webinar

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Capacity Management by Five Regions

Region	County	Health Home
Region 1 Central New York	Broome, Cayuga, Chenango, Clinton, Cortland, Delaware, Essex, Fulton, Franklin, Hamilton, Herkimer, Jefferson, Madison, Montgomery, Lewis, Oneida, Onondaga, Oswego, Otsego and St. Lawrence	1. Encompass 2. Children's Homes of Upstate New York, LLC (CHHUNY) 3. Adirondack Health Institute, Inc 4. St. Mary's Healthcare
Region 2 Hudson River	Albany, Columbia, Dutchess, Greene, Orange, Putnam, Rensselaer, Rockland, Saratoga, Schenectady, Schoharie, Sullivan, Ulster, Warren, Washington and Westchester	1. Encompass 2. Children's Homes of Upstate New York, LLC (CHHUNY) 3. CNYHHN Inc. (Designated for Children) 4. Hudson River HealthCare, Inc. dba. Community Health Care Collaborative 5. Adirondack Health Institute, Inc 6. The Collaborative for Children and Families (CCF)
Region 3 Long Island	Nassau & Suffolk	1. Care Collaborative (space holder) 2. Children's Home of Upstate New York, LLC (CHHUNY) 3. The Collaborative for Children and Families (CCF) 4. Hudson River Healthcare Dba Community Health Care Collaborative
Region 4 New York City	Bronx, Kings, New York, Queens, Richmond	1. Community Care Management Partners, LLC (CCMP) 2. Coordinated Behavioral Care, Inc. dba Pathways to Wellness Health Home 3. Montefiore Medical Center dba Bronx Accountable Healthcare Network Health Home 4. St. Luke's-Roosevelt Hospital Center dba Mount Sinai Health Home 5. The Collaborative for Children and Families
Region 5 Western New York	Allegany, Cattaraugus, Chautauqua, Chemung, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Schuyler, Seneca, Steuben, Tioga, Tompkins, Wayne, Wyoming, and Yates	1. Encompass 2. Children's Home of Western New York dba Oishei Healthy Kids 3. Children's Homes of Upstate New York, LLC (CHHUNY) 4. Greater Rochester Health Home Network LLC 5. CNYHHN Inc.

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Children's Waiver Enrollment Data

Enrollment By Target Population and Region

Total Number of Transitioning Children/Youth – 6,178

Total Enrollment as of September 24, 2019 - 6455

SED – 4104	Med Frag – 1551	DD & Med Frag – 335	DD & Foster C – 364	Unknown – 101
Region 1 – 510	Region 1 – 152	Region 1 – 33	Region 1 – 59	Region 1 – 8
Region 2 – 648	Region 2 – 355	Region 2 – 48	Region 2 – 50	Region 2 – 15
Region 3 – 304	Region 3 – 296	Region 3 – 110	Region 3 – 9	Region 3 – 18
Region 4 – 1976	Region 4 – 443	Region 4 – 24	Region 4 – 208	Region 4 – 45
Region 5 – 614	Region 5 – 305	Region 5 – 117	Region 5 – 36	Region 5 – 5
Unknown - 52		Unknown - 3	Unknown - 2	Unknown - 10

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Children's Waiver Discharge

Discharge By Target Population and Region

Total Discharge as of September 24, 2019 - 217

SED – 189	Med Frag – 13	DD & Med Frag – 1	DD & Foster C – 9	Unknown – 5
Region 1 – 34	Region 1 – 2	Region 1 – 0	Region 1 – 3	Region 1 – 1
Region 2 – 14	Region 2 – 0	Region 2 – 0	Region 2 – 3	Region 2 – 0
Region 3 – 30	Region 3 – 1	Region 3 – 0	Region 3 – 0	Region 3 – 0
Region 4 – 45	Region 4 – 2	Region 4 – 0	Region 4 – 3	Region 4 – 3
Region 5 – 66	Region 5 – 8	Region 5 – 1	Region 5 – 0	Region 5 – 1

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Process and Operations

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Process and Operations – Overview

Children are determined eligible/ineligible for HCBS based upon the HCBS Eligibility Determination

> *The HCBS LOC Eligibility Determination must be completed in the UAS-NY by a HHCM/C-YES*

NYS DOH Capacity Management team receives the Uniform Assessment System report of all completed HCBS/LOC Eligibility Determinations

> *The HCBS/LOC Eligibility Determination must be signed and finalized for a member to be found eligible*

This report outlines every HCBS/LOC completed

The Capacity Management Team will review and notify HHCM/CYES staff of an available slot

> *Once a member has received a slot, there is no need to re-confirm slot assignment with each re-assessment*

The HHCM/CYES will receive an HCS secure file transfer email indicating whether the child has been secured a slot

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Process and Operation

Slot Allocation Rules for Transitioned Children/Youth (Jan-Apr 2019):

- If a child transitioned from one of the previous six waivers this child already has a slot allocated, if the HHCM agency verified this information during the transition period
- Once a child/youth has been given a slot to receive HCBS, that slot is theirs until such a time that they are discharged/disenrolled from the Children's Waiver
- Each time the HCBS re-assessment is conducted, <u>a slot does not need to be re-verified by Capacity Management</u>

Capacity Management will only perform outreach to those HHCM/CYES that have conducted an eligibility determination for a new child who does not already have a slot assignment and is being tracked by Capacity Management

- ➢ To verify your child has a slot, please contact Capacity Management through the HCS at <u>Capacity Management@health.ny.gov</u> (Shared Mailbox)

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Process and Operations

Slot Allocation Rules for Newly Eligible Children/Youth:

The Health Home care manager/C-YES staff conducts an HCBS/LOC Eligibility Determination for a child that was not previously in waiver

If found HCBS Eligible:

- The child is found eligible
- By the next business day, Capacity Management reviews an HCBS Eligibility Report
- Any child/youth not already tracked with a Waiver slot, will be flagged
- Capacity Management will notify the HHCM through the HCS secure file transfer of a slot assignment for each child/youth that is flagged
- A slot must be given for the child/youth to receive Waiver services
- HHCM/C-YES sends the child/youth/family *Notice of Determination*

Process and Operations

Slot Allocation Rules for Newly Eligible Children/Youth:

The Health Home care manager/C-YES staff conducts an HCBS/LOC Eligibility Determination for a child that was not previously in waiver

If <u>Not</u> Found HCBS Eligible:

- The HHCM/C-YES will give the child/youth/family *Notice of Decision*
- The HHCM/C-YES will work with the child/youth/family to connect to other needed services, as appropriate
- The HHCM will work with the child/youth/family to determine eligibility and the families desire to be enrolled in Health Home only

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Management of Capacity

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Communication is KEY

Capacity Management is a Partnership with HHCM/C-Yes staff

- Good communication between HHCM/C-YES staff with NYS DOH Capacity Management is crucial
- HHCM/C-YES must ensure that HCBS eligible and enrolled children/youth have obtained a slot in the Children's Waiver
- HHCM/C-YES must report changes to a child/youth status to Capacity Management to ensure proper tracking of the Children's Waiver capacity
- Lack of communication between HHCM/C-YES can potentially lead to a waitlist for eligible children/youth due to the inaccurate tracking of Capacity
- Capacity Management will ensure that children/youth keep their slot and/or position on any eligibility waitlist that may occur

Communicating with Capacity Management

Secure File Transfer (SFT) Protocol

- Secure File Transfer, or SFT, is a secure way of transferring sensitive data

- DOH will be utilizing the Health Commerce System (HCS) Secure File Transfer process as a platform for the exchange of protected health information

- Having HCS Secure File Transfer access for HHCM/C-YES is <u>mandatory</u>

- All correspondence regarding member information and status between NYS DOH Capacity Management and the HHCM/C-YES must be through the HCS Secure File Transfer process

- **For the Capacity Management Team to communicate to HHCMs regarding slots, HHCM need to already be registered for the SFT, as not being registered causes a delay in slot allocation**

NOTE: Personal Health Information (PHI) cannot be shared over email

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Secure File Transfer Protocol

The State has released guidance on the HCS Secure File Transfer

- Each HHCM that will conduct an HCBS/LOC Eligibility Determination must activate the Secure File Transfer within their HCS account
- The HHCM must be connected to receive communication from Capacity Management
- HCS Secure File Transfer must be part of all new employees access training similar to MAPP HHTS and the UAS
- When a HHCM is not connected and conducts an HCBS/LOC Eligibility Determination for a child/youth, then Capacity Management needs to locate someone in the HHCM's agency to notify the HHCM
  - o This has been a cause of confusion for HHCM

Secure File Transfer 2.0 Quick Reference Guide

Secure File Transfer 2.0 FAQ

Contact for questions or need assistance in connecting to the Secure File Transfer contact HHSC@Health.ny.gov

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Change of Child/Youth's Status

When does the HHCM/C-Yes need to send a secure file email to the Capacity Management Team?

- Child/youth already receiving HCBS with slot and has a name or CIN # change
- Child/youth is discharged from HCBS due to goal reached or by choice
- Child/youth is disenrolled due to loss of Medicaid
- Child/youth is no longer HCBS eligible during re-assessment**
- Transitioning child/youth HCBS ineligible and at risk of higher level of care absent HCBS – follow override process (see slide 28)
- If the HHCM/C-Yes is unsure of slot allocation

- ❑ If the child/youth requests a transfer from the Children's Waiver to the OPWDD Comprehensive Waiver or vice versa, Capacity Management must be involved – please follow the Transfer Step by Step Process here

**Must follow policies for NOD and transitioning children before HCBS discharge and notification to Capacity Management that the child/youth no longer needs a slot

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Communication

Communication is a vital component of the Capacity Management Process.

Capacity Management contacts the Care Manager when:

- Notification of available slots
- Notification of LOC override status

DOH Capacity Management

Care Manager

Provider

Family/Child

Care Manager Contacts Capacity Management when:

- A change in the child's status
- Child's Medicaid eligibility status has changed
- Child has completed service goals and no longer needs waiver services
- Request LOC override for transitional at-risk youth

Communication is ongoing between HHCM, HCBS provider, and family/child

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Needed Information for Capacity Management

When reporting a change in status, the HHCM/C-YES must provide:

For ALL types of changes:
- Child/Youth's Name
- CIN #
- Date of Birth
- Type of Change in Status

Change in Name and/or CIN#:
- Previous Name and New Name
- Previous CIN # and New CIN #
- Date of the Change

Discharge and Disenrollment:
- Date of Discharge or Disenrollment
- Reason for Discharge or Disenrollment
- Target Population

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Recipient Restriction/Exemption (RR/E) codes

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K-Codes RR/E for the Children's Waiver

Members enrolled in the HCBS Children's Waiver will have new Recipient Restriction/Exemption (RR/E) codes, identified as "K codes" to indicate which children are enrolled in waiver services and their specific population category.

RR/E Code	RE Code Description
K1	HCBS LOC
K2	HCBS LON (will not be in use < 2021
K3	HCBS Serious Emotional Disturbance (SED)
K4	HCBS Medically Fragile (MF)
K5	HCBS Developmentally Disabled (DD)
K6	HCBS Developmentally Disabled and Medically Fragile (DD & MF)
K7	HCBS Complex Trauma (will not be in use <2021 with LON)
K8	Voluntary Foster Care Agency
K9	Foster Care
KK	Family of One

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1915c RR/E Waiver Comparison to K Codes

Previous 1915c RR/E Codes	Previous 1915c RR/E Code Description	K Code RR/E Series	K Code RR/E Series Description
23	OMH SED HCBS Waiver	K1	HCBS LOC
		K3	HCBS SED
62	DOH Care at Home MF HCBS Waiver	K1	HCBS LOC
		K4	HCBS MF
63	DOH Care at Home MF HCBS Waiver	K1	HCBS LOC
		K4	HCBS MF
65	OPWDD Care at Home MF HCBS Waiver	K1	HCBS LOC
		K6	HCBS DD/MF
72	OCFS B2H SED HCBS Waiver	K1	HCBS LOC
		K9	Foster Care
		K3	HCBS SED
73	OCFS B2H DD HCBS Waiver	K1	HCBS LOC
		K9	Foster Care
		K5	HCBS DD Foster Care
74	OCFS B2H MF HCBS Waiver	K1	HCBS LOC
		K9	Foster Care
		K4	HCBS MF

Waiver Capacity and K-Code Linkage

All HCBS Eligible and Enrolled children/youth in the Children's Waiver must receive a slot and the appropriate aligned K-Code(s)

Once a slot is assigned to a child/youth, the appropriate K-codes are placed on the child/youth's Medicaid file

Once a slot is removed for a child/youth, the appropriate K-codes are removed from the child/youth's Medicaid file

➤ The K-codes indicate to HCBS providers, Managed Care Plans, Health Homes and other medical and behavioral health providers for the child/youth that they are enrolled in the Children's Waiver

➤ The K-codes allow for billing to occur by the HCBS provider

➤ The K-codes allow for proper tracking of capacity, needs for services and expenditures for the Children's Waiver

Please Note: If a child/youth is enrolled and receiving HCBS without K-codes, then Capacity Management must be notified

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Override Policy

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HCBS/LOC Eligibility Determination Override Policy

- This policy is for requesting an override for HCBS/LOC Eligibility Determination under the Children's Waiver, for **a transitioning child/youth** from one of the previous six 1915(c) HCBS waivers, to ensure continuity of services to enable the child/youth to remain safely in the home and community

The Override Policy is located HERE

The Override Form is located HERE

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Override Policy

Who does this apply to:

- Any child who transitioned from January through March 31, 2019 from one of the six previous waivers to the new Children's Waiver, without break in HCBS, where the annual Level of Care (LOC) recertification is due on or after April 1, 2019, and the new HCBS/LOC Eligibility Determination will need to be completed

At-risk kids not meeting HCBS/LOC:

- If an annual HCBS/LOC recertification is due for a transitioned child/youth between April 1, 2019 – March 31, 2020, and the child does not meet the new HCBS/LOC criteria **but is at risk for institutionalization (hospital/nursing home/residential) in absence of the waiver**, the Health Home care manager (HHCM) or C-YES will contact the waiver capacity management team at capacitymanagement@health.ny.gov through the HCS Secure File Transfer, for a review of eligibility to determine if the child can remain enrolled in the waiver

LOC Exception:

If the child is eligible under the eligibility criteria of the former Waiver, a Level of Care exception will be issued for one year (unless significant life event occurs that requires a new HCBS/LOC eligibility determination to be conducted). **This exception process will no longer exist after March 30, 2020**

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Override Process

Required Steps for Requesting a LOC Override:

1. The HHCM/C-YES staff complete the HCBS/LOC eligibility determination through the UAS and the child/youth is determined no longer HCBS eligible

2. The HHCM/C-YES staff believe that the child/youth is at imminent risk of being hospitalized/institutionalized if the current HCBS is discontinued

   - If the HHCM/C-YES does not believe that the child/youth is at imminent risk of being hospitalized/institutionalized, then there is no need to request an override. The child/youth should be discharged from HCBS with proper Notice of Decision (NOD) issued. The HHCM/C-YES will notify capacity management regarding the discharge from a slot.

Note: If the child/youth meets Health Home eligibility criteria, they can be enrolled in HHSC or remain enrolled in HHSC even if discharged from HCBS

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Override Process

Required Steps Continued:

3. The HHCM/C-YES will submit the "HCBS/LOC Eligibility Determination Override Form" to Capacity Management through the capacitymanagement@health.ny.gov Secure File Transfer mailbox due to PHI, to notify DOH that a child/youth meets this policy (one email request per child/youth)
   o The Subject line: Request Override

4. Once received, Capacity Management will send the Override form to the appropriate State agency who will have ten (10) business days to determine if the child/youth is granted the HCBS/LOC Override or not and inform Capacity Management

5. Capacity Management will notify the HHCM/C-YES of the outcome of the Override review

During the Override review process outlined above, the HHCM/C-YES should continue to serve the child/youth, continue HCBS, and should not issue a NOD until the override decision is made

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Override Determination

If Override **IS** Granted
• The HHCM/C-YES will notify the child/youth/family of HCBS eligibility and issue the appropriate Notice of Decision (NOD), following the process established • The HHCM/C-YES will notify the Medicaid Managed Care Plan, if the child/youth is enrolled • The HHCM/C-YES will notify all HCBS providers and other involved Care Team providers • The HHCM/C-YES will document in the case record the override and a copy of Capacity Management granted override email

If Override is **NOT** Granted
• The HHCM/C-YES will notify the child/youth/family of HCBS denial and issue the appropriate Notice of Decision (NOD), following the process established • The HHCM/C-YES will notify the Medicaid Managed Care Plan, if the child/youth is enrolled • The HHCM/C-YES will notify all HCBS providers and other involved Care Team providers • The HHCM/C-YES will document in the case record the override denial and a copy of Capacity Management override denial email

IMPORTANCE NOTICE: LPHA Attestation form guidance must be followed - In order to comply with conflict-free care management requirements, the attesting LPHA may not be a supervisor / director associated with oversight of the HHCM or C-YES who is completing the HCBS Eligibility Determination

Note: HHCM/C-YES should ensure they are following the NOD policy and proper notification to Capacity Management

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To reach DOH Capacity Management Team:
capacitymanagement@health.ny.gov
through the HCS Secure File Transfer

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