Community Mental Health Assessment For Adult BH HCBS No Longer Required

Effective March 7, 2017, the “FULL” portion of the NYS Community Mental Health Assessment is no longer required for Health and Recovery Plan (HARP) Medicaid Managed Care enrollees. The Adult BH HCBS Assessment workflow required that the NYS Eligibility Assessment (also known as the brief assessment) be followed by the Community Mental Health Assessment (also known as the full assessment) completed within 90 days. As a result of this change, only the NYS Eligibility Assessment is now required. Revised guidance will be forthcoming shortly.

On 3/27/17, New York State (NYS) distributed guidance regarding a process change for billing the Community Mental Health Assessment. Care Management Agencies (CMA) will bill NYS Medicaid directly through the eMedNY system. The original guidance said that direct billing would be available by April 1, 2017. Unfortunately, the rate file is in process of being loaded. The State and eMedNY will notify providers as soon as the rates are loaded into the eMedNY system. Any questions regarding these changes can be sent to OMH-Managed-Care@omh.ny.gov.

BH Value Based Payment Readiness

Stakeholder Feedback Sessions

New York State is planning to invest $60 million over the next three years for behavioral health providers to get ready for the transition to Value Based Payments (VBP) through the BH VBP readiness program. NYS has held Regional VBP Stakeholder Feedback sessions to serve as opportunities for providers to give input to NYS regarding this program, where the Managed Care Technical Assistance Center (MCTAC) and state partners are also providing an overview of the program and Value-Based Payment. Information from these sessions will be posted to the MCTAC website shortly.

VBP Readiness Program – Notification of Interest

The New York State Office of Mental Health (OMH) and Office for Alcoholism and Substance Abuse Services (OASAS) are requesting a “Notification of Interest” for the NYS Behavioral Health (BH) VBP Readiness Program. A submission form for the Notification of Interest will be distributed by the end of the month. Groups of BH providers interested in participating in the program should review the program guidelines, and complete the Notification of Interest no later than May 15, 2017.
Uniform Clinical Network Provider Training

As part of the NYS Medicaid Managed Care Program, the New York State Health Plan Association (HPA) is collaborating with the Center for Practice Innovations (CPI) at Columbia Psychiatry/NYS Psychiatric Institute and the National Center on Addiction and Substance Abuse (CASA) to offer Uniform Clinical Network Provider training to Article 31 and Article 32 behavioral health providers. The training is a unified state-of-the-art web-based training for Medicaid managed care network providers in clinical core competencies and evidence-based practices for mental health and substance use disorder services. NYS requires that Medicaid Managed Care Organizations (MMCOs) offer training to network providers in behavioral health core clinical competencies and evidence-based practices. NYS OMH and OASAS have additionally mandated that the mainstream and HARP MMCOs must provide a uniform behavioral health network provider training program to standardize the trainings and minimize duplicative requirements from multiple MMCOs.

Adult BH HCBS Toolkit Training Series

ICL, MCTAC and its partners are pleased to announce a pre-recorded web-based training series for all New York State Adult BH HCBS providers that shares strategies and lessons learned in planning, implementing and delivering Adult BH Home and Community Based Services. The series includes three web-based presentations and supplemental materials (e.g. tip sheet, work plan template, training outline). The presentations include How to Get HCBS Off the Ground; How to Change Lives with HCBS; and How to Invest in the Future with HCBS.

Adult BH HCBS Staff Transportation Reimbursement

OMH, OASAS, and DOH have released guidance to clarify expectations and guidelines in regard to billing for Staff Transportation when providing Adult Behavioral Health (BH) Home and Community Based Services (Adult BH HCBS). Staff Transportation reimbursement is intended to compensate provider agencies for the cost of provider staff travel for selected BH HCBS services only and travel must be related to the individual’s service. Costs associated for programs, services, and purposes other than BH HCBS cannot qualify for reimbursement under this category.

NYC Adult BH HCBS “Hiatus” Designation Status Extension

Adult Behavioral Health Home and Community Based Services started in January 2016 in New York City. At the time, the State offered designated providers the option of going into “hiatus” status for any or all of their designated services. NYC Adult BH HCBS designated providers that requested “hiatus” were given one year in this status that was scheduled to expire on 3/15/17. NYS has now extended “hiatus” status until April 28, 2017. Designation status updates and questions can be sent to omh.sm.co.HCBS-Application@omh.ny.gov.

BH Managed Care Plan/Provider Roundtables

New York State continues to hold roundtable discussions between Medicaid Managed Care Plans and Article 31 and Article 32 providers concerning the Behavioral Health transition in both NYC and the Rest of New York State (ROS). Direct communication between providers and MCOs can lead to faster identification of any systemic issues related to the State transition, expedited solutions to difficulties that may occur, and the formation of critical relationships between Managed Care plans and providers that are essential to the new healthcare structure. The next ROS Roundtable will be held on May 2nd and the next NYC Roundtable will be held on May 9th.

Regional Planning Consortiums

The Regional Planning Consortium (RPC) boards have been seated across the state and each region has elected their Co-Chair. Each board has or will be receiving a training from MCTAC on the transition to Medicaid Managed Care. To see a complete list of the RPC board members and upcoming board meetings in your region please visit www.climhd.org/rpc.
Children’s Health and Behavioral Health System Transformation
If you would like to receive regular information specifically regarding the Children’s System Transformation, sign up for the Children’s Medicaid Managed Care Transition Listserv.

Important: SPA/HCBS Provider Designation Deadline Lifted
New York State remains committed to the Children’s Medicaid Redesign. The anticipated timeline for full implementation of the design runs through January 2019, including the Voluntary Foster Care Agency (VFCA) transition in January 2019, which is dependent upon the timeframes for acquiring necessary federal approvals for the two submitted State Plan Amendments (SPAs) and the pending submission of the 1115 Waiver. The anticipated implementation dates will need to be modified accordingly based on the timing of approvals and the review of incoming Federal Administration priorities and processes. Please note that federal approval of the SPAs and the 1115 Waiver continue to be linked, wherein, while federal approvals may occur at varying times, the implementation of the new SPA services and transition to Medicaid managed care will take place concurrently.

Therefore, given the uncertain timeframes, providers interested in applying for SPA/HCBS provider designation to provide the proposed services under the redesign should be aware that the April 1 deadline for applications is being lifted and a new due date will be assigned when the State has more clarity on the likely federal approval timing. The State will continue to provide updates as it receives more information and greater understanding of federal priorities.

Consumer HARP Advocacy Assistance through ICAN
The Independent Consumer Advocacy Network (ICAN) provides free, confidential help to consumers who are eligible for or enrolled in Health and Recovery Plans (HARPs). They can help you decide whether HARP is right for you, answer your questions about your benefits, provide advice and information, and advocate for you in the appeals process. Call ICAN at 1-844-614-8800 or email ican@cssny.org. ICAN is the ombuds program for people with Medicaid who need long term care services or behavioral health services.

Behavioral Health Managed Care
Contact Information

Office of Mental Health
Office of Alcohol and Substance Abuse Services
Department of Health

OMH-Managed-Care@omh.ny.gov
PICM@oasas.ny.gov
managedcarecomplaints@health.ny.gov

Other Contact Information:
Questions regarding HARP eligibility and enrollment:
New York Medicaid Choice 1-855-789-4277

Issues related to Personalized Recovery-Oriented Services:
PROS@omh.ny.gov

Adult BH HCBS Designation questions or to update status:
omh.sm.co.hcbs-application@omh.ny.gov

Questions related to Adult BH HCBS Start-Up funding or documentation submission:
hcbs_grant@omh.ny.gov