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POLICY AND PROCEDURE

Title: Transfer Process between HHSC and OPWDD Comprehensive Waiver

Department: Health Home

Intended Population: Health Home Serving Children (HHSC)

Effective Date: 7/1/2021

Date Revised: 5/2023

Purpose of Policy

The purpose of this document is to outline the procedural steps necessary when a child/youth is receiving care management/waiver services from either NYS Department of Health (DOH) or NYS Office for People with Developmental Disabilities (OPWDD) and wants to receive care management/waiver services under the other system. When there is a request on behalf of the individual/family to transfer from one waiver program to the other, this policy should be followed.

Scope

1. This policy must be distributed to all AHI Health Home Program staff and all subcontracting Health Home Service Providers.
2. All recipients of this policy must acknowledge their receipt and understanding of the policy by referring any questions or problems with the policy within ten days of the issue date to the AHI's Health Home program.
3. All questions regarding this policy or its implementation may be directed to the AHI Health Home Program Manager.

Statement of Policy

AHI shall develop, disseminate, and review at least annually a Transfer Process between Health Home Serving Children (HHSC) and OPWDD Comprehensive Waiver Policy that addresses purpose, scope, roles and responsibilities, management commitment, coordination among organization entities, and compliance. AHI shall formalize documented procedures to facilitate the implementation of the Transfer Process between HHSC and OPWDD Comprehensive Waiver Policy.



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Definitions

Children's Liaison: are the direct OPWDD Regional Office contact staff who track and assist with maintaining the OPWDD ICF/IID LCED for the Department of Health (DOH) Children's Waiver and the contact for HHSC regarding OPWDD services.

Developmental Disability (DD): the OPWDD eligibility review process determines if an individual has a developmental disability as defined by NY Mental Hygiene Law 1.03(22) and is eligible for supports and services. This determination must be made prior to an ICF/IID LCED determination. For the purposes of enrollment in the Children's Waiver (with a Developmental Disability), or enrollment into OPWDD's Waiver, the determination process is the same. OPWDD determines if a person is DD eligible and therefore eligible to receive OPWDD services.

Intermediate Care Facilities for Individuals with Intellectual and Developmental Disabilities (ICF-IID): is an optional Medicaid benefit that enables states to provide comprehensive and individualized health care and rehabilitation services to individuals to promote their functional status and independence.

Home and Community Based Services/ Level of Care (HCBS/LOC): is a tiered assessment where multiple factors must be met for child/youth's HCBS/LOC eligibility to be determined. To access Children's HCBS, a child/youth must meet target population, risk factors, and functional criteria as described in the Children's Waiver. The HCBS/LOC Eligibility Determination is housed within the Uniform Assessment System (UAS).

Plan of Care (POC): the document outlining the enrolled child/youth's needs and the referred and monitored services to address those needs.

Provisional Eligibility: a determination of temporary eligibility for OPWDD services and supports until a child's 8th birthday that is predicated on the likelihood of a developmental disability, but allows for those situations where a named condition has not yet been diagnosed but the clinical presentation and adaptive limitations are all indicative of developmental disorder or condition.

R/RE Codes: Restriction codes

- A1- Care Management Agency
- A2- Health Home
- KK-Family of one (FO1)
- K1- HCBS LOC
- K3-HCBS SED
- K4-HCBS MF
- K5-HCBS DDFC
- K6-HCBS DDMF

Secure File Transfer: a platform for the exchange of protected health information in a secure format, all correspondence is required to be communicated through the HCS Secure File Transfer.



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Care Coordination Organization (CCO): For individuals who choose to receive services under the OPWDD Comprehensive Waiver, a CCO Care Manager.

Care Coordination Support Liaison: are the direct OPWDD Regional Office contact staff who support Care Coordination organization (CCO) staff (Care Managers, Intake staff, etc.) and families with guidance and technical assistance regarding CCO policy and the process to enrollment, transfer and withdraw from CCO.

Developmental Disability Regional Office (DDRO): are the regional offices of OPWDD and are where the Children's Liaisons are located throughout the State.

Level of Care Eligibility Determination (LCED): is an eligibility tool used for the initial determination and annual redetermination that an individual meets the ICF/IID Level of Care.

Notice of Decision (NOD): the determination that is issued to the child/youth/parent/guardian/legally authorized representative regarding their eligibility and their Fair Hearing rights.

OPWDD Intermediate Care Facilities for Individuals with Intellectual and Developmental Disabilities (ICF-IID): is an optional Medicaid benefit that enables states to provide comprehensive and individualized health care and rehabilitation services to individuals to promote their functional status and independence.

People First Waiver Liaisons: are the direct OPWDD Regional Office contact staff for the OPWDD Comprehensive Waiver. If contact is needed with the waiver liaison to facilitate a transfer, the CL will coordinate.

Provisional Eligibility: a determination of temporary eligibility for OPWDD services and supports until a child's 8th birthday that is predicated on the likelihood of a developmental disability, but allows for those situations where a named condition has not yet been diagnosed but the clinical presentation and adaptive limitations are all indicative of developmental disorder or condition.

R/RE Codes: Restriction Codes

- 46- OPWDD Home & Community Based Services Waiver - HCB (Pure Waiver)
- 95- OPWDD Waivered Service
- I5- CCO Enrollment Level 1
- I6- CCO Enrollment Level 2
- I7- CCO Enrollment Level 3
- I8- CCO Enrollment Level 4
- I9- CCO/Basic HCBS Plan Support
- KK-Family of one (FO1)/ (for OPWDD also known as Parental Deeming)

Workforce member means Employees, board members, volunteers, interns, independent contractors, vendors, and other persons whose conduct, in the performance of work for a covered entity, is under the

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direct control of such entity, whether or not they are paid by the covered entity. This includes full and part time employees, affiliates, associates, volunteers, and staff from third party entities who provide service to the covered entity.

Background

The Transfer Process between HHSC and OPWDD Comprehensive Waiver Policy at AHI is intended to facilitate the effective implementation of the processes necessary to meet the Health Home Program standards and requirements as stipulated by the NYS DOH, federal regulations, and best practices. This policy directs that AHI meet these requirements.

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Communication and coordination by all parties is necessary for the individual to have a smooth transition. It is important that the current care manager has explained the various options, services, providers, and eligibility processes of the waiver programs to the individual/family and that the individual/family has made an informed decision to move to another waiver. Proper consent should be obtained from the individual/family while planning for transition to ensure that the current care manager can share all the necessary information with the parties outlined below to assist in the transition process.

The individual's current care manager will continue to work with the individual on the current Plan of Care (POC) and enrolled services while transitional activities are occurring to guarantee no disruption in services. Transitional activities will be documented in the individual's care management notes while eligibility and services will be identified in the POC by the current care manager.

Throughout the transition process, if the individual remains eligible for their current Waiver, enrollment should be maintained until such time the individual is found eligible for the new Waiver and transitions to ensure no gap in service. Once eligibility and availability (i.e. a slot is available) for the new Waiver is confirmed, the transition to the new Waiver can occur. The existing care manager and the new identified care manager (HHSC or CCO) will work collectively to identify a specific timeframe and date for the transfer.

The OPWDD Developmental Disabilities Regional Office (DDRO) Children's Liaison (CL) will remain informed by the person's care manager and serve as liaison during the process. The DOH Capacity Management Team will assist with coordination alongside the DDRO CL.

The following outlines the **Steps required for a transfer from one waiver to another:**

1. Notification of Intent to Transfer
2. Opening Conference and Verification of Information
3. Selection of Care Management
4. Sharing Plan of Care / Life Plan



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5. Application, Eligibility, and Documentation
6. Establishing an Effective Transfer Date
7. Transfer Process Confirmation
8. System Changes
9. Notice of Decision
10. Enrollment into the waiver

Transfer Process Steps: DOH 1915(c) Children's Waiver to OPWDD Comprehensive Waiver

1. **Notification of Intent to Transfer** - The HHCM notifies the DDRO Children's Liaison (CL) and Lead Health Home in the Health Commerce System (HCS) Secure File Transfer that the individual is interested in services under OPWDD's Waiver. This request must include the following:
 - a. Individual's first and last name;
 - b. CIN (Medicaid number);
 - c. OPWDD's TABS ID (if known);
 - d. Date of Birth (DOB);
 - e. Anticipated transfer date (When the individual would like to transfer by);
 - f. Reason(s) for transfer; and
 - g. Name of CCO (if known at the time of initial notification).

Note: Notification by the Health Home Care Manger (HHCM) must happen up to two months prior to anticipated transfer date to ensure a timely collaborative transfer. If the child/youth had been referred to a Care Coordination Organization (CCO) first, the CCO must look in ePaces to determine if the member is currently enrolled in the Children's Waiver/care management. If so, the CCO Intake Staff will notify the HHCM and the Children's Liaison (CL). The CCO Intake Staff can remain involved (but cannot bill for services), but the HHCM will take the lead with the child/youth/family in gathering the supporting documentation required for transfer.

2. **Opening Conference and Verification of Information** - The Developmental Disability Regional Office (DDRO) Community Liaison (CL) and DOH Capacity Management will schedule a phone conference with the lead Health Home/HHCM/C-YES to provide an overview of the next steps. The individual and the parent/guardian/authorized representative should be encouraged to participate in the call.
 - a. If the individual does not have OPWDD ICF-IID eligibility established and a current Level of Care Eligibility Determination (LCED), the DDRO CL will work closely with the HHCM to coordinate with the DDRO and assist with the DD eligibility and LCED documentation.



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- 3. Selection of OPWDD Care Management (CCO HH and/or Basic HCBS Plan Support)** - The DDRO CL will provide HHCM/C-YES information on available CCOs and coordinate with the DDRO Care Coordination Support Liaisons (CCSLs).

The HHCM will advise the member regarding the choices of available CCOs and the need to choose a CCO for care management services through OPWDD to be able to transition to the other Waiver. Once a CCO is chosen by the member and/or parent/guardian/legally authorized representative, the CCO will begin the processes for CCO enrollment (see CCO Process Model).

- 4. Sharing of the Individual's Current Plan of Care** - The HHCM will provide the member's current Health Home Plan of Care (POC) inclusive of the HCBS to the CCO, current services and providers. As well as the OPWDD Comprehensive Waiver services being requested.

HHCM will notify the interdisciplinary team members (IDT), inclusive of HCBS providers of the family's choice to transition to the OPWDD Waiver/CCO.

- 5. Application, Eligibility, and Documentation** - The HHCM, who has current oversight, will assist where necessary, in gathering information that is needed for the OPWDD Waiver application as described below.

- a. Application for Participation and Documentation of Choices Form** – Completed by HHCM https://opwdd.ny.gov/system/files/documents/2020/11/final-waiver-application-doc-form_final-11.19.20.pdf

- b. ICF-I/ID Level of Care Eligibility Determination (LCED)** – Provided by DDRO CL if ICF-I/ID LCED eligibility has been established. If the child/youth does not have ICF-IID eligibility established, the HHCM works to gather the required documentation. This is referenced in the [DDRO Manual](https://opwdd.ny.gov/system/files/documents/2020/02/final-lced-fillable-form-2.3.20-locked-editing.pdf). <https://opwdd.ny.gov/system/files/documents/2020/02/final-lced-fillable-form-2.3.20-locked-editing.pdf>

- c. DDRO HCBS Waiver Coordinator Confirms Eligibility for the OPWDD Waiver** - The DDRO HCBS Waiver Coordinator will review the Waiver Application packet for completeness. When the DDRO HCBS Waiver Coordinator has determined that all enrollment criteria have been satisfactorily met, the DDRO HCBS Waiver Coordinator will confirm eligibility to the CL for the OPWDD Waiver.

Note: Eligibility for the OPWDD Waiver means that the child/youth meet criteria for transfer from the Children's Waiver and HH care management, although no transfer will occur until the effective transfer date is established.

- d. Request for Service Authorization (RSA)** – Completed by the CCO identifying the services the child/youth is requested. <https://opwdd.ny.gov/system/files/documents/2020/02/request-for-service-authorization.pdf>



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e. **In-Process Life Plan**– Completed by CCO The CCO will be creating the “In-Process Life Plan” or “Justification for Services” in accordance with CCO Policy Update regarding Service Authorizations and the need for waiver services prior to enrollment in a CCO at the following link:

https://opwdd.ny.gov/system/files/documents/2020/03/care-coordination-organization-policy-update_-_service-authorizations-post-july-1-2018.pdf

f. **Required prior to OPWDD HCBS Waiver Enrollment** - The DDRO CL will ensure the following are completed:

I. Front Door Information Session: The child/youth/family must attend a Front Door Information Session

II. Front Door Quality Review: Services must be approved by the OPWDD Quality Review before the person can be enrolled in the OPWDD HCBS Waiver.

III. Distribution: The Application for Participation and the Documentation of Choices form should be sent by the HHCM/C-YES to the DDRO CL. The CL uploads the documents into CHOICES and provides copies to the CCO. The CCO will upload the “In-Process Life Plan” into CHOICES. The LCED should already be uploaded into CHOICES by OPWDD, if not, the CL will make sure it is included.

6. **Establishing an Effective Date of the Transfer** - DDRO CL will schedule a phone conference with the HH/HHCM, CCO Intake Coordinator and any other DDRO staff (if applicable) to discuss/confirm child/youth’s eligibility for enrollment in the OPWDD Waiver and to discuss an agreed upon and effective date of the transfer. The following must be reviewed:

- a. Confirmation of ICF-IID LCED determination
- b. OPWDD Waiver approval
- c. Signed Consents
- d. Target Population
- e. The HCB service(s) under the Children’s Waiver
- f. Desired OPWDD Waiver services and units
- g. Reason(s) why the change is being pursued (e.g., choice, no-longer meets criteria for the Children’s Waiver, aging out of Children’s Waiver)
- h. End date for HHSC/Children’s Waiver (month/day/year)
- i. Start date for CCO and OPWDD Waiver (month/day/year)

Note: The effective date of the transfer must be a future date and must be the first of the month. If the child/youth is moving to an OPWDD certified residence.



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7. Transfer Process Confirmation

a. DDRO CL Notification to DOH Capacity Management and OPWDD Central Office
DDRO CL will notify DOH Capacity Management and OPWDD Central Office CL Coordinator via the HCS Secure File Transfer that the child/youth is ready to officially transfer to OPWDD's Waiver. This notification must go to Capacity Management (capacitymanagement@health.ny.gov) and OPWDD (childrensliaisoncentraloffice@opwdd.ny.gov) include the following:

- I. Name, DOB, CIN, and TABS ID
- II. Name of HH and CMA
- III. Name of CCO
- IV. Confirmation of ICF-IID LCED determination
- V. OPWDD Waiver approval
- VI. Consent
- VII. Target Population
- VIII. The HCB service(s) under the Children's Waiver
- IX. Reason(s) why the change is being pursued (e.g., choice, no-longer meets criteria for the Children's Waiver, aging out of Children's Waiver).
- X. Desired OPWDD Waiver services and units
- XI. End date for HHSC/The Children's Waiver month/day/year
- XII. Start date for CCO month/day/year.

b. Notification/Directions from Capacity Management and OPWDD Central Office
Capacity Management and OPWDD Central Office will confirm/deny/request further information to DDRO.

Note: Transfers cannot take place without approval from Capacity Management and OPWDD Central Office.

c. DDRO Confirmation of Approval or Denial
DDRO confirmation of approval or denial notification must be sent to the HH/HHCM/C-YES, CCO Intake Coordinator.

Note: The HHCM/C-YES and/or CCO should only include the CL in correspondences related to transfers.



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- 8. System Changes to Implement the Transfer** - The completion of the transfer involves system changes (R/RE Codes) to allow billing and payment under the new CCO care management and OPWDD HCBS Waiver. The steps below specify the process for coding changes for proper discharge from the Children's Waiver and Health Home Serving Children (HHSC) care management and enrollment in CCO and the OPWDD Comprehensive Waiver

a. System Coding to Affect Transfer

The transfer between care management and HCBS Waiver services requires four coding changes in the eMedNY system and additional coding in TABS. The Children's Waiver codes will end on the last day of the month, and the OPWDD HCBS Waiver codes will start on the first of the following month.

I. Children's Care Management (A codes)

- HHCM completes the steps and procedures for member disenrollment. The Lead Health Home will end the enrollment/MAPP segment (R/E A Codes) effective in eMedNY per the agreed upon transfer date. (This can be a future date, e.g., effective the last day of the month and is system automated).

II. Children's Waiver (K codes)

- HHCM will complete the processes to disenroll the child/youth. Once the agreed upon date for the transition is confirmed, HHCM must notify DOH Capacity Management with:
 - Name, date of birth and CIN.
 - Date of transition (end of the month).
 - County member is located in
- After HHSC notification upon the agreed upon date, DOH Capacity Management submits the request to end-date the R/E codes (K Codes). The end date changes in eMedNY for both A Codes and K Codes may take up to a week. (This can be a future date, e.g., effective the last day of the month of discharge.)

b. OPWDD TABS:

The CL must end date the Children's Waiver-Medically Fragile or Children's Waiver-Foster Care code in TABS using the agreed upon transition date. This must happen prior to the person being enrolled in TABS in the OPWDD CCO Care Management and OPWDD waiver.

The OPWDD waiver enrollment date must be the day after the date that the Children's Waiver ends to ensure that a child's benefits are not disrupted.



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I. Community Care Organization (CCO) (I codes)

- Coding Changes for the Transfer into the OPWDD Comprehensive Waiver – Effective the first day of the following month
- CCO submits CCO 1 in CHOICES/TABS for CCO enrollment to be effective the first of the month after the CCO submits the CCO 1 enrollment form in CHOICES. Early that month, TABS will send the appropriate CCO R/E code to eMedNY after processing the enrollment and determining the tier.
- The CCO 1 enrollment form can be submitted while the conflicting Children’s Waiver codes are still present. This will allow for the form to process on the first of the following month as soon as the Children’s Waiver coding is removed at the end of the month. The CCO should submit the CCO 1 enrollment form during the month that the Children’s Waiver and Health Home disenrollment is occurring.
- During the Final Transfer Meeting, the CL will advise the CCO regarding the CCO-1 and the Children’s HH and Waiver codes. The CL and the CCO will inform the DDRO CCSL of the pending transfer.

Note: The CCO will not be able to have the correct R/E code put up in the eMedNY system to cover their services until the individual is discharged from HHSC, MAPP segment ended, and after DOH first removes the Children’s Waiver R/E K codes. All coding may take up to a week to show as end dated.

II. OPWDD HCBS Waiver (R/E Code 46)

- DDRO HCBS waiver coordinator processes waiver enrollment Notice of Decision (NOD) effective the agreed upon date and send the NOD to the OPWDD Revenue Support Field Office (RSFO).
- RSFO enters the OPWDD HCBS Waiver R/E Code 46 in eMedNY effective the agreed upon date after receiving the NOD.

9. **Notification of Decision (NOD)** - The appropriate Notice of Decision must be sent to inform the child/youth and/or their parent, guardian, or legally authorized representative, and other identified persons of the enrollment and/or disenrollment status. The following is required:

a. HHCM sends NOD regarding the disenrollment from Health Home and Children’s Waiver disenrollment with additional copy to DDRO CL.

b. DDRO Waiver Coordinator sends NOD regarding the enrollment in the OPWDD Waiver with additional copy to the DDRO CL.

c. CCO sends NOD regarding the individual’s enrollment in the CCO with copy to the DDRO CL.

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d. The DDRO CL will send the OPWDD Waiver NOD.

10. Enrollment Made Effective in Community Care Organization (CCO) Health Home and OPWDD Waiver - The child/youth is now enrolled in the OPWDD Waiver and CCO. The CCO now provides Care Management to the child/youth.

Special Note: *Residential Transfers and Coding (skip this if the transfer is not a residential move)*

If the individual is moving to an OPWDD certified residence, the Children's Waiver must end the day before the date the individual moves into the new residence.

If the residence is an Intermediate Care Facility (ICF):

- The A and K codes must be ended the day prior to the child's admission to the chronic care facility. If the HH/CMA are unable to retroactively end date the codes, they should end date as soon as possible, and the CL will bring this to the Central Office CL to work with Capacity Management to backdate the codes.
- The HHCM assist with gathering documentation to complete the ICF IID/LCED. The LCED must be completed prior to residential placement. The LCED must be dated on or before the child's admission to the residential placement.
- The residential provider enters the child's admission to the ICF into CHOICES.
- The CL will end any CW-MF or CW-FC codes in TABS and confirm with the DDRO that the child has been admitted in TABS to the ICF.
- A R/E code 38 will be added by Revenue Support Field Office (RSFO) when TABS is updated.

The residence will need to contact the appropriate Medicaid district to have their provider # entered. The provider # will not be able to be entered until the R/E codes A and K have been end dated properly.

If the residence is an Individualized Residential Alternative (IRA) or Family Care Home (FCH):

- The A and K codes must be end dated the day prior to the child's admission to the congregate care facility. If the HH/CMA are unable to retroactively end date the codes, they should end date as soon as possible and the CL will bring the issue to Central Office to work with DOH to backdate the codes.
- The HHCM must assist in gathering documentation for the completion of the OPWDD ICF-I/ID LCED, which must be dated on or before the child's admission.
- The child's admission to the IRA or FCH must be added into CHOICES by the residential provider.
- The CL will end date any CW-MF or CW-FC codes in TABS.



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- DDRO HCBS waiver coordinator processes waiver enrollment Notice of Decision (NOD) effective the agreed upon date and sends the NOD to the OPWDD RSFO. RSFO enters the OPWDD HCBS Waiver R/E code 46 in eMedNY effective the agreed upon date after receiving the NOD.
- R/E code 48 or 49 for the IRA will be added by RSFO when TABS is updated if the 46 code has already been entered. IRA R/E codes cannot be entered without R/E code 46, which conflicts with both A and K codes.

Transfer Process: OPWDD's Comprehensive Waiver to DOH Children's Waiver

All of the following documents and meetings must be completed before the child/youth can be enrolled in the OPWDD Comprehensive Waiver.

- 1. Notification of Intent of Transfer** - The child/youth's Community Care Organization (CCO) Care Manager notifies the Developmental Disability Regional Office (DDRO) CL that the member is interested in exploring opportunities with the Children's Waiver. This request must include the following:
 - a. Individual's first and last name
 - b. CIN (Medicaid number)
 - c. OPWDD's TABS ID (if known)
 - d. Date of Birth (DOB)
 - e. Anticipated transfer date (When the individual would like to transfer by)
 - f. Reason(s) for transfer
 - g. Name of HHSC (if known at the time of initial notification)

Note: Notification by the CCO and Community Liaison (CL) must happen up to two months prior to anticipated transfer date to ensure a timely collaborative transfer. If the child/youth had been referred to a Health Home Serving Children first, the HH must look in ePaces to determine if the member is currently enrolled in the OPWDD Comprehensive Waiver. If so, the HH will notify the DDRO CL. The CCO will take the lead with the child/youth/family in gathering the supporting documentation required for transfer.

Parent/Consumer resources on the Children's Waiver can be found at:

https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/consumer_info.htm



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2. Opening Conference and Verification of Information

DOH Capacity Management and the DDRO CL will schedule a phone conference with the CCO to provide an overview of the next steps. The individual and the parent/guardian/authorized representative should be encouraged to participate in the call.

Confirmation of Children's Waiver HCBS/LOC eligibility determination confirmed prior to disenrollment of the child/youth from CCO. The CCO will need to work with the child/youth and their parent, guardian or legally authorized representative by providing information about the Children's Waiver and the Health Home Serving Children's program. The CCO will work with the HH to gather the necessary consents and supporting documentation for the HH to conduct the HCBS/LOC eligibility determination.

3. Selection of Health Home (HH) / HH Care Management Agency (CMA)

Capacity Management and DDRO CL will provide CCOs information on available HHs and CMAs or C-YES.

The DDRO CL and CCO will advise the member regarding the choices of available HHs and CMAs or C-YES to be able to transition to the other Waiver.

Once a HH/CMA is chosen by the member and/or parent/guardian/legally authorized representative, the HH/CMA will begin the processes for HH enrollment.

4. Sharing of the Individual's Current Life Plan

The CCO will provide the member's current Life Plan inclusive of current services and providers. As well as the Children's Waiver services being requested.

The CCO will notify the interdisciplinary team members (IDT), inclusive of HCBS providers of the family's choice to transition to the Children's Waiver.

5. Application, Eligibility, and Documentation - The CCO and DDRO CL, who has current oversight, will assist where necessary, in gathering information that is needed for the Children's Waiver eligibility and enrollment as described below:

For a child and youth with ICF-IID LCED - The CCO and HHCM will coordinate to send the required information and documentation to complete the Children's Waiver HCBS/LOC eligibility determination to the CL.

a. For DD/Medically Fragile Target Population:

I. Verification that the individual meets LCED

II. HHCM completes the HCBS subset of the CANS-NY questions within the UAS for the DD/MF Target Population



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https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_childr/en/docs/hcbs_loc_functional_algorithm.pdf

b. For DD in Foster Care Target Population:

- I. Verification that the individual meets LCED
- II. Documentation of the individual entering foster care
- III. The DDRO CL will attest that the child meets Target Population, Risk Factors, and Functional Criteria (the LCED) for Children's Waiver eligibility.

The HHCM and DDRO CL will confirm that the individual meets targeting requirements (is in foster care or is medically fragile). The DDRO CL will inform CCO if transfer can proceed or if additional documentation may be required to confirm eligibility.

Note: As per guidance, DDRO CLs will use the DD/MF Target Population of the HCBS/LOC Eligibility Determination. For DD/MF, the LPHA form is not required for the CL to obtain as the LPHA form is waived only for the DDROs during the transfer process.

- c. **HH Enrollment Documentation** – HHCM begin to develop the POC and choice of Children's Waiver services and providers with the completion of the Freedom of Choice form and signing of consents.

For a child and youth ICF-IID LCED Determined Not Eligible

CCO must provide the child/youth and/or parent/guardian/legally authorized representative information on the HHSC program and the Children's Waiver. CCO will assist with referring the child/youth to the selected HHSC. A referral to the HHSC and Children's Waiver from CCO/OPWDD's Waiver can be made for the following two target populations of Serious Emotional Disturbance or Medically Fragile for a HHCM to conduct the HCBS/LOC Eligibility Determination.

6. **Establishing an Effective Date of the Transfer** - DDRO CL will schedule a phone conference with the HH/HHCM, CCO Intake Coordinator and any other DDRO staff (if applicable) to discuss/confirm child/youth's eligibility for enrollment in the Children's Waiver and to discuss an agreed and effective date of the transfer. The following must be reviewed:

- a. Confirmation of ICF-IID LCED determination
- b. OPWDD Waiver approval
- c. Signed consent(s)
- d. Target Population
- e. The HCB service(s) under OPWDD Waiver
- f. Desired Children's Waiver services



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- g. Reason(s) why the change is being pursued (e.g., choice, no-longer meets criteria for the OPWDD Waiver i.e., provisional eligibility)
- h. Start date for Health Home and Children's Waiver (month/day/year)
- i. End date for CCO/OPWDD Waiver (month/day/year)

Note: The effective date of the transfer must be a future date and must be the first of the month.

7. Transfer Process Confirmation

a. DDRO CL Notification to Capacity Management and OPWDD Central Office

DDRO CL will notify Capacity Management and OPWDD Central Office via the HCS Secure File Transfer that the child/youth is ready to officially transfer to the Children's Waiver. This notification must include the following:

- I. Name, DOB, CIN, and TABS ID
- II. Name of HH and CMA
- III. Name of CCO
- IV. Confirmation of ICF-IID LCED determination
- V. OPWDD Waiver approval
- VI. Consents
- VII. Target Population
- VIII. The HCB service(s) under OPWDD Waiver
- IX. Reason(s) why the change is being pursued (e.g., choice, no-longer meets criteria for the OPWDD Waiver i.e., provisional eligibility)
- X. Desired Children's Waiver services
- XI. Start date for Health Home/C-YES and Children's Waiver month/day/year
- XII. End date for CCO/OPWDD Waiver month/day/year

b. Notification/Directions from Capacity Management and OPWDD Central Office - Capacity Management and OPWDD Central Office will confirm/deny/request further information to DDRO.

Note: Transfers cannot take place without approval from Capacity Management and OPWDD Central Office.

c. DDRO Confirmation of Approval or Denial- DDRO confirmation of approval or denial notification must be sent to the HH/HHCM, CCO Intake Coordinator and any other DDRO staff (if applicable).

8. System Changes to Implement the Transfer-

The completion of the transfer involves system changes (R/RE Codes) to allow billing and payment under the new HH care management and Children's Waiver. The steps below specify the process for coding changes for proper discharge



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from the CCO care management and OPWDD Waiver and enrollment in the HH/CMA and the Children's Waiver.

a. System Coding to Affect Transfer - The transfer between care management and HCBS Waiver services requires coding changes in the eMedNY system and additional coding in TABS. The OPWDD HCBS Waiver codes will end on the last day of the month, and the Children's Waiver codes will start on the first of the following month.

I. Children's Care Management (A codes)

- HHCM completes the steps outlined by the Lead Health Home's policy and procedures manual for member enrollment. The Lead Health Home will begin the enrollment/MAPP segment (R/E A Codes) effective in eMedNY per the agreed upon transfer date. (This can be a future date, e.g., effective the first day of the month and is system automated).

II. Children's Waiver (K codes)

- After the HHCM signs and finalizes the HCBS/LOC eligibility determination "Finalization Outcomes" with the determination of "eligible", DOH Capacity Management submits the request to apply R/E codes (R/E K Codes) This can be a future date, e.g., effective the first day of the month of HCBS/LOC sign and finalize date.
- HHCM will complete its processes to enroll the child/youth.
- The Children's Liaison enters the Children's Waiver code in TABS.

III. Coding Changes for the Transfer from the OPWDD Comprehensive Waiver are effective the last day of the following month:

- CCO submits CCO 2 in CHOICES/TABS for CCO disenrollment which will result in the ending of the CCO code in eMedNY
- OPWDD Revenue Support Field Office (RSFO) removes the OPWDD HCBS Waiver R/E code upon receipt of the waiver notice of disenrollment.

9. Notification of Decision (NOD) - The appropriate Notice of Decision must be sent to inform the child/youth and/or their parent, guardian, or legally authorized representative, and other identified persons of the enrollment and/or disenrollment status. The following is required:

a. HHCM sends NOD regarding the enrollment in Health Home care management and Children's Waiver enrollment.

b. DDRO Waiver Coordinator sends NOD regarding the disenrollment in the OPWDD Waiver with additional copy to the DDRO CL

c. CCO sends NOD regarding the individual's disenrollment in the CCO with copy to the DDRO CL.



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d. The DDRO CL will send the OPWDD Waiver NOD.

- 10. Enrollment Made Effective in HH and the Children’s Waiver** - The child/youth is now enrolled in the HHSC and the Children’s Waiver. The HH now provides Care Management to the child/youth.

Training

AHI Health Home will review a selection of cases from each HHSP’s member attributions that have had a member with a K Code in e-paces. Each case will be assessed for completeness and adherence to the Health Home Policy. Any record found to not have adequate documentation in the member’s Electronic Care Management Record is expected to review this policy with their direct supervisor to ensure future adherence and void all billing claims made in error.

Quality and Performance Improvement

This policy will be disseminated for review and questions before a policy training is given. If more time is needed outside of the initial policy training, a future in-depth training will be developed and/or identified for Health Home Care Managers to gain an understanding of the Children’s HCBS and Waiver workflow.

Contact Person: Assistant Director, Care Management and Health Home

Responsible Person: Health Home Service Provider

Approved By: Director, Care Management and Health Home



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Attachment

Office for People with Developmental Disabilities DDRO Children’s Liaisons Contact List through Secure File Transfer

Table with 2 columns: Counties Per Region, Mailbox Email Address. Rows include Region 1 (Chemung, Livingston, Monroe, etc.), Region 2 (Broome, Chenango, Delaware, etc.), Region 3 (Fulton, Montgomery, Saratoga, etc.), Region 4 (Queens, Kings, New York, Bronx, Richmond), and Region 5 (Nassau, Suffolk).