

ANNOUNCEMENT

Effective April 1, 2023, Changes to Plan of Care (POC) Flexibilities and In-Person Requirements for Health Home Participants

February 21, 2023

TO: Health Homes Serving Children and Adults, including Health Home Plus, and Health Home Care Managers

This announcement is being issued in contemplation of the end of the federal Public Health Emergency (PHE) on May 11, 2023, as announced by President Biden on January 30, 2023.

Immediately following the end of the NYS Disaster Emergency on June 24, 2021, Health Homes were <u>notified</u> to begin actively working toward full reinstatement of non-emergency policies, procedures, and timelines in anticipation of the end of the federal PHE.

Effective April 1, 2023, the following Health Home flexibilities permitted during the PHE will end/be modified as indicated herein. Providers are instructed to follow this guidance and all enacted policies:

*OPWDD will be issuing their own separate guidance to CCO/HHs.

Plan of Care

- Plans of Care must be signed by the member/parent/guardian/legally authorized representative. Signatures may be collected on paper forms or electronically. Verbal consent in lieu of a signature on the Plan of Care and documents related to the Plan of Care is no longer allowed.
- Plans of Care must be completed within 60 calendar days of Health Home enrollment. The extension to complete these within 120 calendar days of enrollment is rescinded.
- Please refer to Plan of Care Policy for additional information.

Comprehensive Assessment

- Comprehensive Assessments must be completed within 60 calendar days of Health Home enrollment. The extension to complete these within 120 calendar days is rescinded.
- Please refer to Comprehensive Assessment Policy for additional guidance.



Multi-disciplinary Team / Care Team Meetings

- Multi-disciplinary / Care Team Meetings are no longer waived and must be conducted upon request of the member/family, or as determined by the Health Home care manager, when developing the initial and the annual review of the Plan of Care, and when conducting the initial and subsequent CANS-NY assessments.
- The purpose of the multi-disciplinary team / care team meeting is to ensure all
 care team members are collaborating, sharing information, and the plan of care
 is developed in a person-centered planning process. The care team consists of
 all involved professionals, supports, and family members identified by and
 determined by the member/parent/guardian/legally authorized representative.
- The decision about whether a multi-disciplinary team / care team meeting is held in person or virtually should be made by the member/parent/guardian/legally authorized representative. It is expected that all professionals and supports involved in a member's care participate in care team meetings, whether in person or virtual. Participation can include submission of documentation or communication directly with the care managers, if unable to attend the meeting.

Consent

 Consent to share information must be provided in writing, either collected on paper forms or electronically by the member/parent/guardian/legally authorized representative. Verbal consent in lieu of a signature is no longer allowed.

In-Person

 Guidance regarding delivery of Health Home care management services inperson or via telehealth is under development and will be issued separately.

Kindly direct any questions to health.ny.gov