# LDSS Referrer Role in the Medicaid Analytics Performance Portal (MAPP)

December 2016

Accessing the MAPP HHTS

The MAPP HHTS is web-based and is launched through the Health Commerce System (HCS) website at https://commerce.health.state.ny.us.

Once you sign into HCS, you need to save the MAPP link to the HCS Home Page (Part 1), as well as enroll in the Multi-factor Authentication (MFA) for user verification (Part 2).
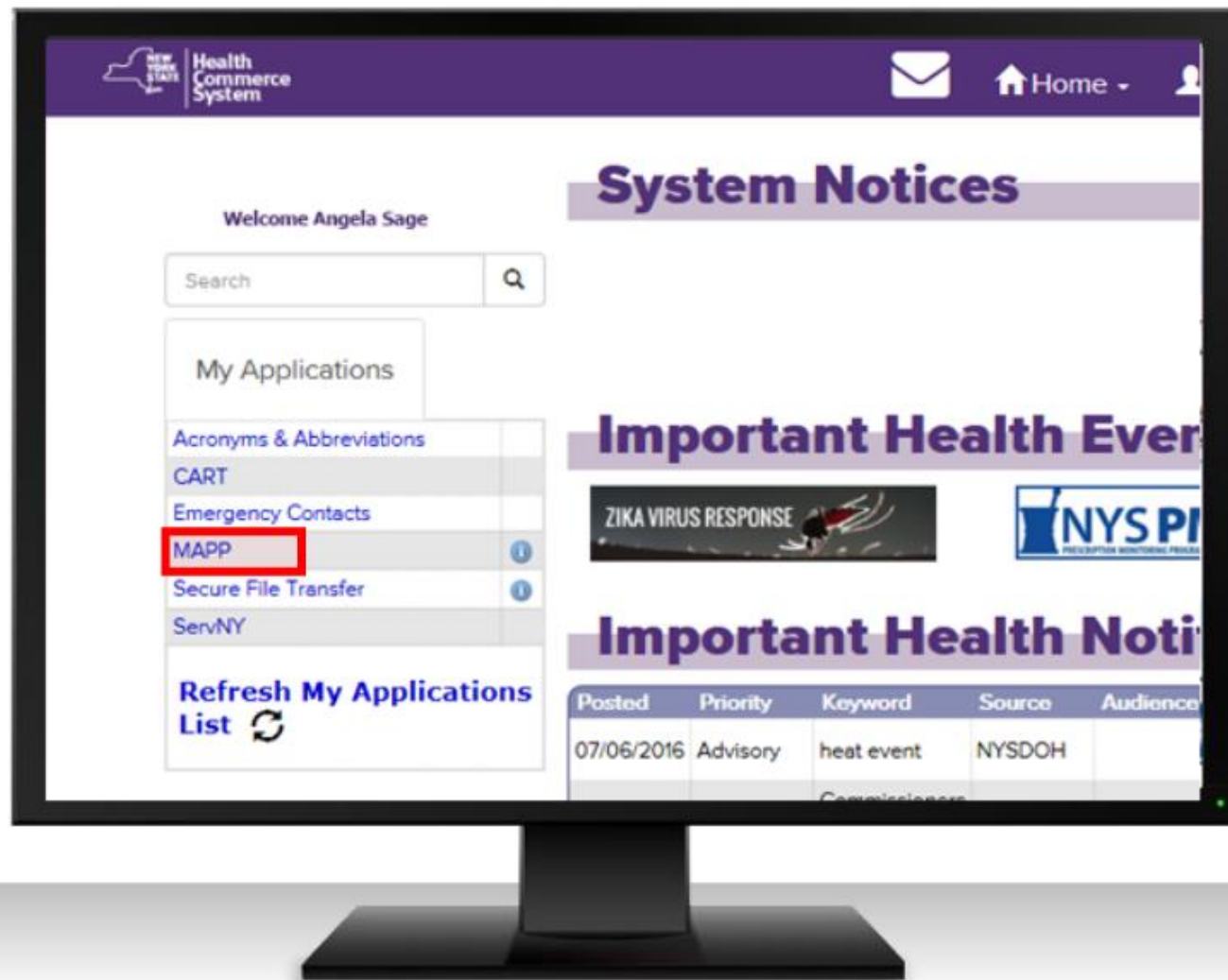
MAPP Homepage Portal & MFA

Instructions
- Please enter the code received from your SMS message on your registered phone number.
- You will be logged out of HCS after 3 unsuccessful attempts.

Purpose:
Portal/homepage for PPS/Health Homes users to access securely all things MAPP.
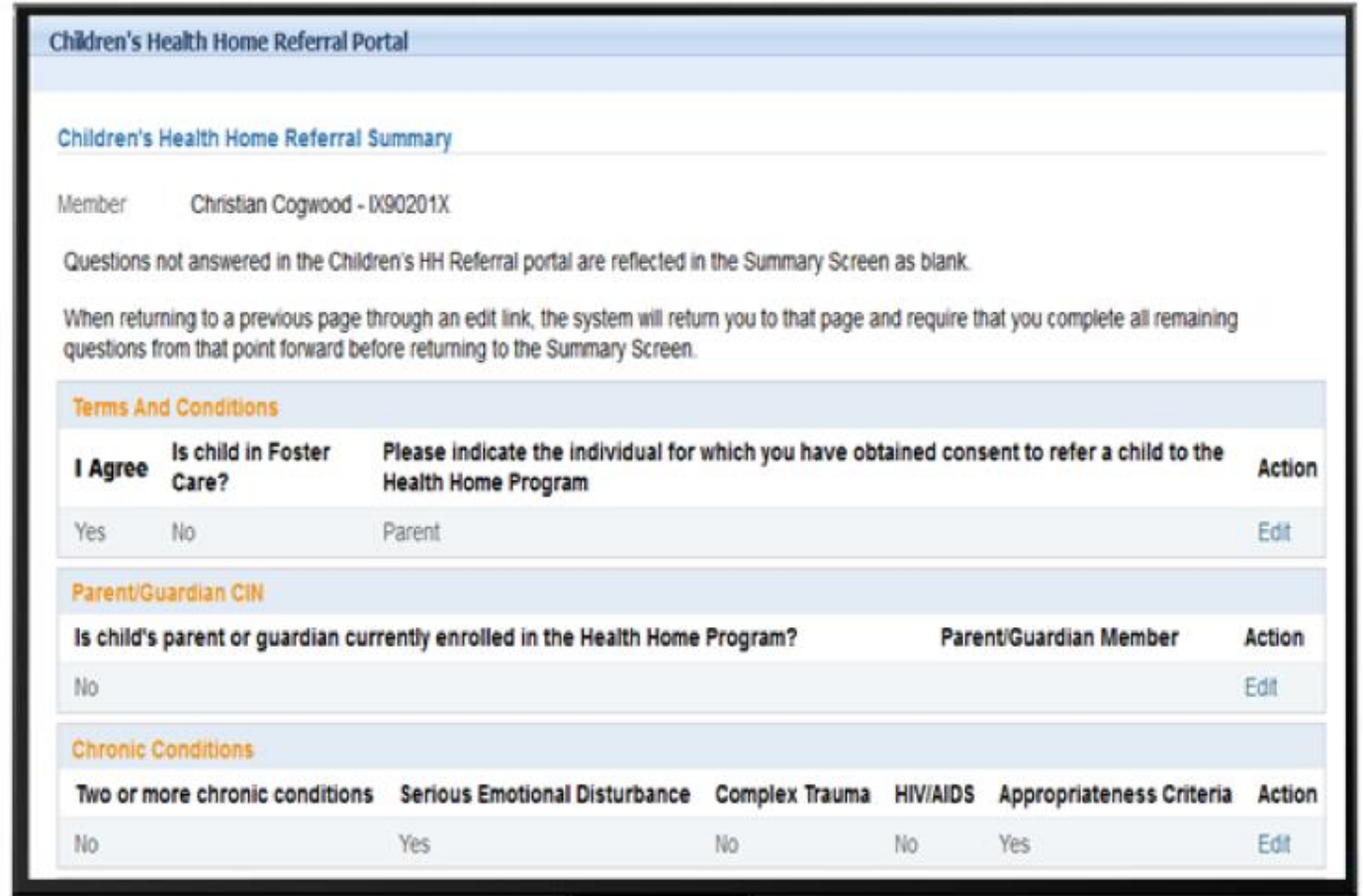
What Is A Referral?

A Referral is receipt of a potential Health Home member outside the State Assignment file process.

- The member who is referred is part of the larger Medicaid community and meets different eligibility criteria than those assigned to the Health Home Program by the DOH.

- The Children's Health Home Referral Portal is the tool used within the MAPP HHTS to create a Referral for a child member who is under 21 years of age.

Children's Health Home Referral Portal

Children's Health Home Referral Summary

Member   Christian Cogwood - IX90201X

Questions not answered in the Children's HH Referral portal are reflected in the Summary Screen as blank.

When returning to a previous page through an edit link, the system will return you to that page and require that you complete all remaining questions from that point forward before returning to the Summary Screen.

Terms And Conditions

I Agree	Is child in Foster Care?	Please indicate the individual for which you have obtained consent to refer a child to the Health Home Program	Action
Yes	No	Parent	Edit

Parent/Guardian CIN

Is child's parent or guardian currently enrolled in the Health Home Program?	Parent/Guardian Member	Action
No		Edit

Chronic Conditions

Two or more chronic conditions	Serious Emotional Disturbance	Complex Trauma	HIV/AIDS	Appropriateness Criteria	Action
No	Yes	No	No	Yes	Edit

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Types of Referrers

The Referrer role is primarily responsible for creating a referral for child members under 21 years of age who are outside the State Assignment file to the Health Home Program. There are two different categories of Referrer roles:

Health Home Program Users
(MCP, HH and CMA Referrers)

- Access to the Children's Health Home Referral Portal
- Can only refer Non-Foster Care children
- However, CMAs that act as a VFCA in NYC under contract with ACS can refer a Foster Care child

Non-Health Home Program Users
(LGU/SPOA Referrers)

- Access to the Children's Health Home Referral Portal
- Can only refer Non-Foster Care children
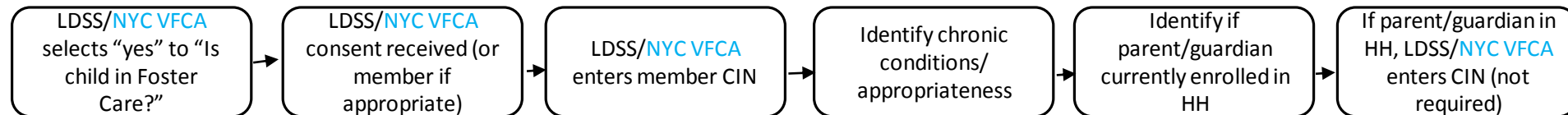
Non-Health Home Program Users
(LDSS Referrers)

- Access to the Children's Health Home Referral Portal
- Can refer a Foster Care child
- Can refer a Non-Foster Care child

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Referral Made by LDSS Upstate / NYC VFCA that is delegated by ACS For Children in Foster Care

Foster Care Flow

LDSS/NYC VFCA selects "yes" to "Is child in Foster Care?" → LDSS/NYC VFCA consent received (or member if appropriate) → LDSS/NYC VFCA enters member CIN → Identify chronic conditions/ appropriateness → Identify if parent/guardian currently enrolled in HH → If parent/guardian in HH, LDSS/NYC VFCA enters CIN (not required)

MAPP Workspace and Quick Links

Part A - Home Tab
The **Home** tab navigates the Referrer back to the Workspace at any time.

Part B - User Role
As a Referrer, you will notice the MCP, HH, CMA, LDSS, or LGU/SPOA Referrer role is listed at the top of the Workspace.

Part C - Quick Links Pod
Referrers have different Quick Links as compared to other roles.

- Children's Health Home Referral Portal
- View Submitted Referrals

A

B

C

York State Health Homes | LGU/SPOA Referrer | Welcome Josh Daisy | Preferences | Log out

Home | Inbox

Home

Save | Reset

* required field

Customize

Quick Links

Children's HH Referral Portal ...
View Submitted Referrals...

Used to create a Referral for a member that is under 21 years of age.

Allows the Referrer to view Referral information for Referrals that were submitted by their Provider or Organization Unit.

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Overview of the Children's Health Home Referral Portal

Entry point in which Organizations (LDSS and LGU/SPOA) and Providers (MCP, HH, CMA) refer Non-Foster Care and Foster Care children under the age of 21 into the Health Home Program with the purpose of enrolling them into the Program and providing Health Home services.
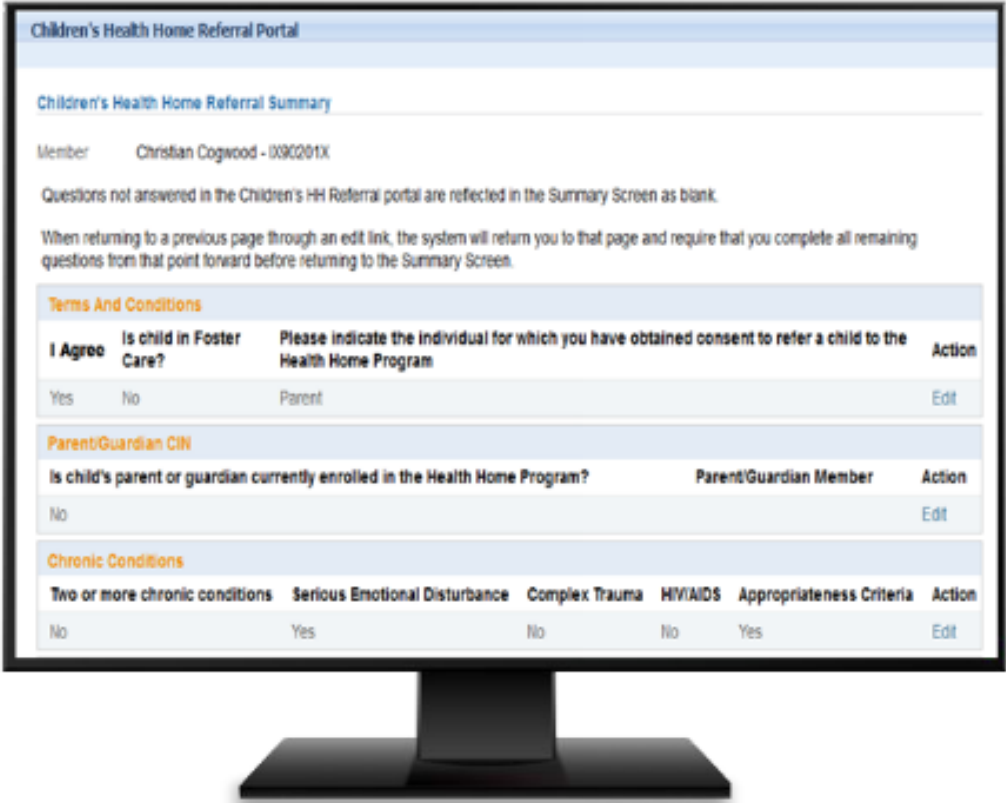
Those Referrers that indicate a child is in Foster Care will answer different questions in the Referral portal than if the Referrer indicates a child is not in Foster Care.

The MAPP HHTS requires a Referrer to identify at least one single qualifying eligibility criteria or two chronic conditions.

The MAPP HHTS prevents a Referrer who is not associated with a LDSS or VFCA from entering a Referral for a child in Foster Care.

Terms and Conditions Page

New York State Department of Health MAPP

Terms And Conditions

Welcome to the Children's Health Home (HH) Referral and Assignment Portal (herein after 'The Children's HH Referral Portal), which is housed in the New York State Medicaid Analytics Performance Portal (MAPP) Health Home Tracking System (HHTS). You have been provided access to the Children's HH Referral Portal to provide you the ability to refer a child, who is under the age of 21, enrolled in Medicaid, and that in your best informed judgement you believe meets the chronic condition eligibility and appropriateness criteria for Health Homes and would benefit from the comprehensive care management services provided by a Health Home. For information regarding the Health Home eligibility criteria please see:

http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/health_homes_and_children.htm

Please note that in order to proceed with referring a child for Health Home care management services through the Children's HH Referral Portal, you, the referring entity, will be required to:

1. Indicate you have obtained consent to make the referral. Consent must be obtained from the parent/guardian/legally authorized representative for individuals up until the age of 18. For individuals ages 18 to 21, or that are married, a parent, or pregnant may provide consent on their own behalf. Referrals cannot be made without an indication by the referring entity that consent has been obtained from the appropriate individual.

2. Provide a Medicaid Client Identification Number (CIN number). If a CIN number is unknown or the referred child is not enrolled in Medicaid, you will not be able to proceed with making a Health Home referral. To be eligible for Health Home Care management, a child must be enrolled in Medicaid. Health Home Care management services are not available to children who are not enrolled in Medicaid.

3. Indicate the Chronic Conditions for which, in your best informed judgment, you believe make the child you are referring eligible for Health Home services. Please check all that applies to the referred child. http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/docs/09-23-2014_eligibility_criteria_hh_services.pdf

4. Indicate, in your best informed judgment, you believe the child meets the appropriateness criteria for Health Home care management.

5. As the referring entity, provide your contact information.

6. Provide contact information for the Parent/Guardian/Legally Authorized Representative or the individual (i.e., the individual was able to self-consent) that provided you the consent to make the referral

7. If you are a designated Health Home to serve adults, referrals must be made to a designated Health Home to serve children.

If you have read, understand, and agree to the above terms and conditions please check the box to proceed with the referral.

Exit   Back   Next

- The Terms and Conditions Page is the first screen within the Referral Portal.

- Ability to refer a child, who is under the age of 21, enrolled in Medicaid, meets the chronic condition eligibility and appropriateness criteria for the Health Home Program.

- Child would benefit from the comprehensive care management services provided by a Health Home.

- It is important that the Referrer read all the terms and conditions before proceeding forward with the Referral.

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Terms and Conditions Page

If you have read, understand, and agree to the above terms and conditions please check the box to proceed with the referral.

☑ **I Agree***

Is child in Foster Care?*	No ▼
Please indicate the individual from whom you have obtained consent to refer a child to the Health Home Program*	Parent ▼
Enter member's CIN number*	IX90201X

Exit   **Back**   **Next**

♦ Indicates the Referrer has read, understood and agreed to the Terms and Conditions. Once this option is selected, three conditional fields display.

1 Allows the Referrer to indicate whether the child is Foster Care by selecting "Yes" or "No."

2 Verifies the individual from whom the Referrer has obtained Consent to refer the child to the Health Home Program.

Provides a Medicaid CIN. If a CIN is unknown or the referred child is not enrolled in Medicaid, the Referrer will not be able to proceed with creating a Health Home Referral.

3 At this time, the MAPP HHTS checks to ensure that the member being referred is not currently involved with a Health Home Provider. If the member is involved, the MAPP HHTS allows the Referrer to send a notification to that Provider.

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Children's Health Home Referral Portal

Warnings

WARNING: Information contained in the MAPP HHTS indicates the individual you are trying to refer is already participating in the Health Home Program with the following organizations: CenterPeace Health Home-190 - 11146389 .

Referral Reason

Member Elliot Rose - IX92004X

Please indicate the reason you were attempting to make a referral or any other short message you would like to convey. This information, along with your contact information will be forwarded to the organizations(s) with a current relationship with the member. (Max. 300 characters)*

ⓘ **INFORMATION**

The Warning message displayed indicates to the LDSS Referrer that the individual being referred is already participating in the Health Home Program and has an *"Active"* Health Home Assignment with the CenterPeace Health Home Organization.

Continue

Exit   Back   Next

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Chronic Conditions Page

- Used to indicate the chronic conditions that determine if the child being referred is eligible for Health Home care management services.

- The Referrer must select one of the following Conditions:
  - Two or more Chronic Conditions
  - Serious Emotional Disturbance
  - Complex Trauma
  - HIV/AIDS

- The Referrer must also select the "Appropriateness Criteria" option, which states the individual meeting the Health Home eligibility criteria must be appropriate for the Health Home care management.

Consenter Contact Information Page
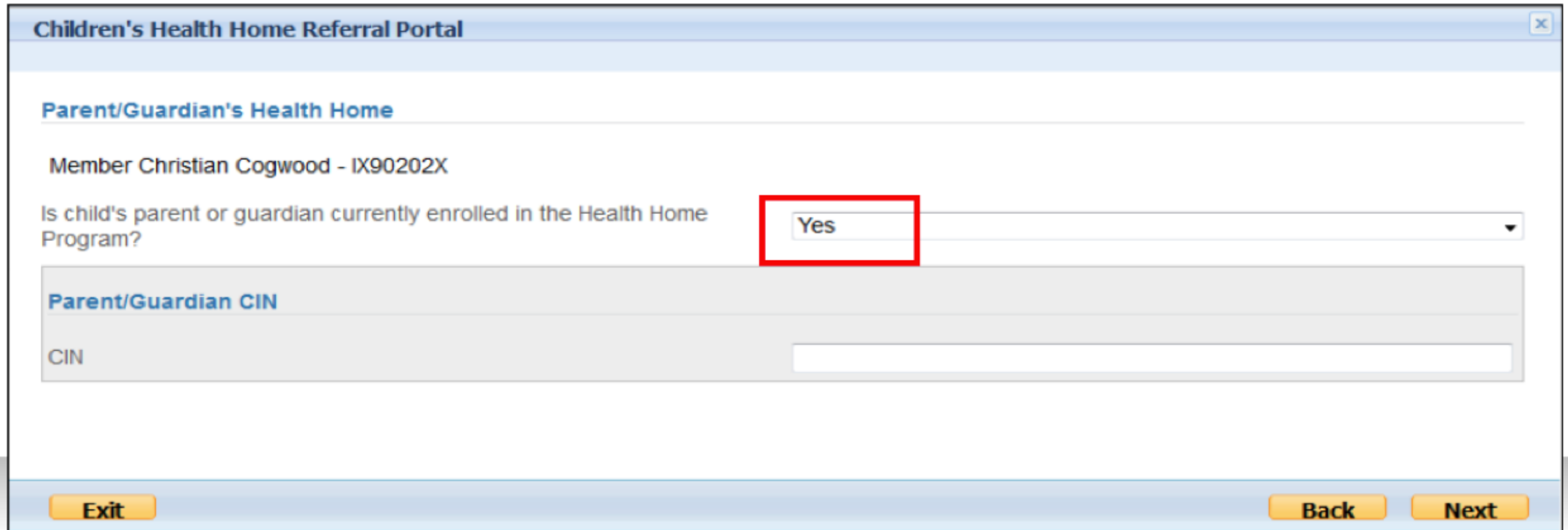

- Used to enter the contact information for the individual providing Consent, such as phone number, address, and relationship to the child member.

- At least one form of contact is required (e.g., address, phone number or email) when entering Consenter Contact Information in order to move to the next page.

Parent / Guardian's Health Home Page

- Used to indicate if the child's parent or guardian is currently enrolled in the Health Home Program

- If "Yes" is selected, an additional field displays to enter the CIN for the Parent or Guardian, if known.

Children's Health Home Referral Portal

Parent/Guardian's Health Home

Member Christian Cogwood - IX90202X

Is child's parent or guardian currently enrolled in the Health Home Program?   Yes ▼

Parent/Guardian CIN

CIN

Exit   Back   Next

Children's Health Home Referral Portal

Assign Voluntary Foster Care Agency

Member Carrie Redwood - IX92002X

Select a Voluntary Foster Care Agency

Voluntary Foster Care Agency *

[▼]

ⓘ **INFORMATION**

As a reminder, for Non-Health Home Program Users, only the **LDSS Referrer** can refer a Foster Care child to the Health Home Program. When creating a Referral, the Referrer selects the Voluntary Foster Care Agency (VFCA) to whom the child member should be referred.

Continue

Exit   **Back**   **Next**

Things the LDSS should consider when selecting a VFCA

- Is the child in Foster Care already link with a VFCA through placement or received services?
  - Is that VFCA also providing Health Home Care Management services?

- Does the child currently have a Health Home Care Manager?
  - Do you want the child to remain with the same HH CM for continuity of Care?
  - Is there a reason to change the HH CM?

- Is the current Health Home Care Manager not a VFCA?
  - Do you want the child to remain with the same HH CM for continuity of Care?
  - Process change within the MAPP Referral Portal may be needed
    - Further Guidance on process to come

Children's Health Home Referral Summary Page

- ◆ Used to view information for the member being referred to the Health Home Program to ensure the information is correct prior to submission.

- ◆ On the Referral Summary Page, use the Edit hyperlink in the Action column to edit the information within that section.

- ◆ The Referrer should verify all information entered in the Referral Summary Page is correct before clicking the **Next** button. Once the Referral is submitted on the next page, a submitted Referral cannot be edited.

Welcome Josh Daisy   Preferences   Log out

Home   Inbox

Home

⭐ Save   ⭐ Reset

* required field

Customize ◀

▼ **Quick Links**   ⌧

Children's HH Referral Portal ...
View Submitted Referrals...

Referral Success   ? ⌧

Thank you, your referral has been successfully submitted.

Member: Carrie Redwood IX92002X
Health Home:
Care Management Agency: Medi-Pro Care Management Agency-205 - 11160104

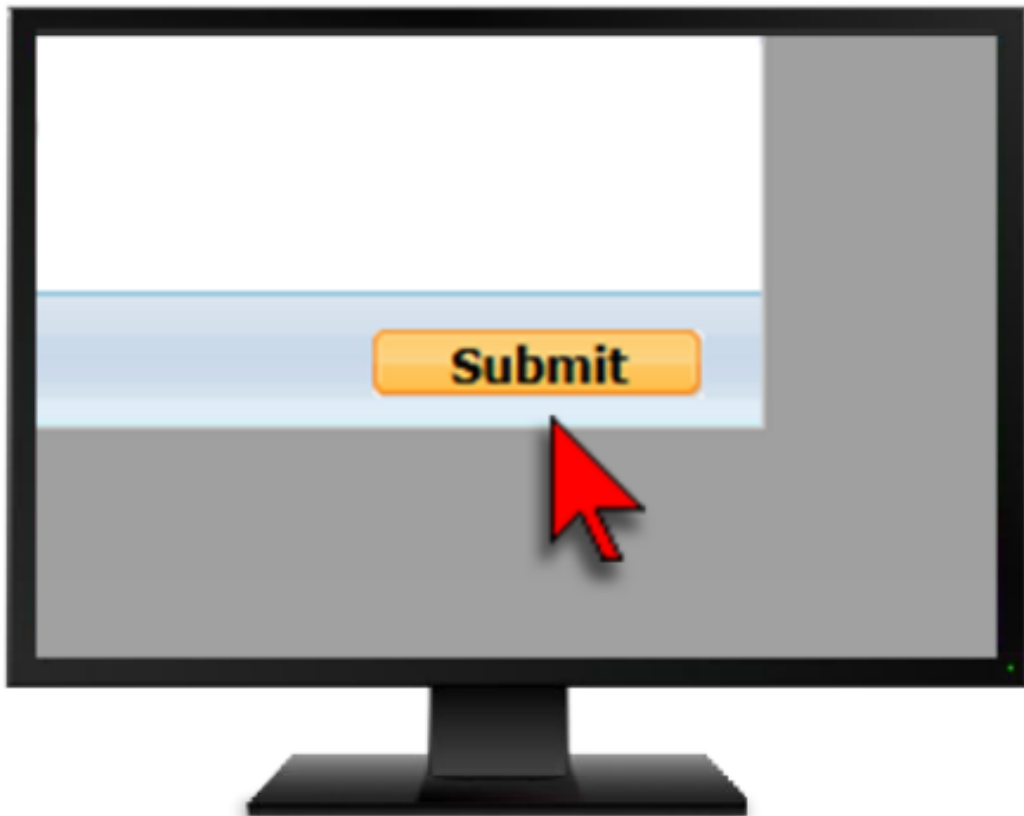Close

ⓘ **INFORMATION**

The Referral Success page displays the member's name and the assigned Care Management Agency (VFCA) that was selected earlier in the Referral process.

Continue

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Submitted Referrals for Foster Care Child Members

Child member that is in a **Mainstream MCP**:
- "Active" MCP Referral is created.
- "Pending" CMA Referral is created if a VFCA is selected.

Child member that is **Fee-For-Service**:
- "Active" HH Referral is created if the VFCA selects a Health Home.
- "Pending" CMA Referral is created if the VFCA or LDSS selects another VFCA.

Child member that is in a **Non-mainstream MCP**:
- "Active" MCP Referral is created.
- "Pending" CMA Referral (only if the LDSS/VFCA selects a VFCA).
- An "Active" HH/CMA Referral are created if a VFCA selects a Health Home.

Submit

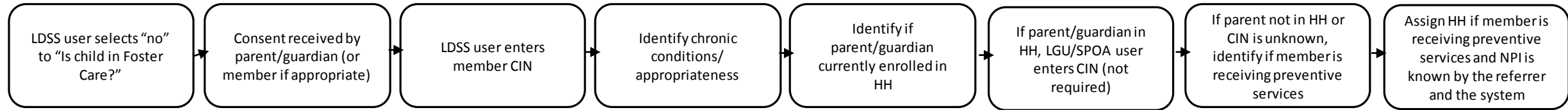# Referral Received for Children in Foster Care
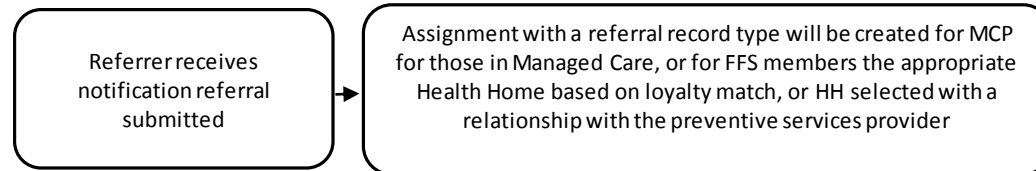
Referral Received/Processed
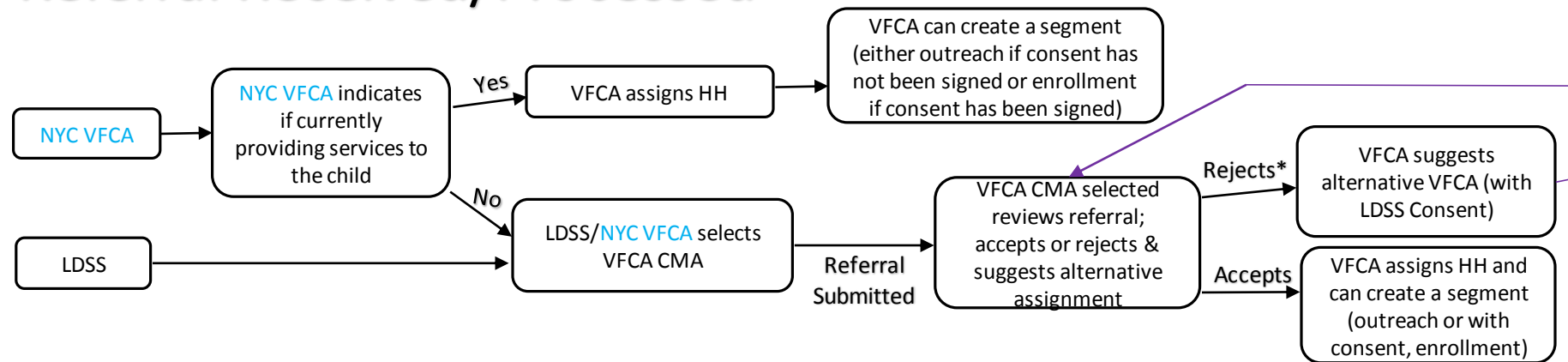
*With the LDSS's approval, a VFCA may reject the referral for a child in foster care. The VFCA must work with the LDSS and identify an alternative VFCA.

Process for Making a Referral for Children NOT in Foster Care

Non-Foster Care Flow

| LDSS user selects "no" to "Is child in Foster Care?" | → | Consent received by parent/guardian (or member if appropriate) | → | LDSS user enters member CIN | → | Identify chronic conditions/ appropriateness | → | Identify if parent/guardian currently enrolled in HH | → | If parent/guardian in HH, LGU/SPOA user enters CIN (not required) | → | If parent not in HH or CIN is unknown, identify if member is receiving preventive services | → | Assign HH if member is receiving preventive services and NPI is known by the referrer and the system |

Referral Received/Processed

| Referrer receives notification referral submitted | → | Assignment with a referral record type will be created for MCP for those in Managed Care, or for FFS members the appropriate Health Home based on loyalty match, or HH selected with a relationship with the preventive services provider |

Resources

- NYS DOH Health Homes (MAPP) website: http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_mapp.htm

- Health Homes serving children website: http://www.health.ny.gov/health_care/medicaid//program/medicaid_health_homes/health_homes_and_children.htm