



# Children’s Medicaid Health and Behavioral System Transformation Update



### This Issue:

1. Waiver Renewal
2. LPHA Attestation and UAS Updates
3. HH SPA
4. DOH Response to Feedback
5. HCBS Case Review
6. ARPA Funding Update
7. March 2023 Waiver Amendment

Please send questions regarding the Children’s Waiver to: [bh.transition@health.ny.gov](mailto:bh.transition@health.ny.gov)

NYS Department of Health Website

[Health Home Serving Children](#)

[Children’s Waiver](#)

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[State Discussion with Children’s Waiver HCBS Providers - September 2022](#)

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## 1 Children’s Waiver Renewal

The Children’s Waiver Renewal that was submitted to the Centers for Medicare and Medicaid Services (CMS) in January 2022, and extended in April 2022, was **approved on June 29, 2022**. This five-year renewal of the [Children’s Waiver \(NY.4125.R06.00\)](#) is **retroactively effective from April 1, 2022 to March 31, 2027**.

### Some changes included are as follows:

- “Palliative Care: Bereavement” is now referred to as “Palliative Care: Counseling and Support Services”.
- “Adaptive and Assistive Equipment” is now referred to as “Adaptive and Assistive Technology”.
- Broadens Children and Youth Evaluation Services’ (C-YES) Nurse qualifications by requiring two years *relevant* experience. The previous requirement that was two years’ experience *specifically* in home care.
- Reduces the required years of experience for Palliative Care: Expressive Therapists from 3 years to 1 year.
- Consolidated “Caregiver and Family Support and Services” and “Community Self-Advocacy Support” into one service referred to as “Caregiver/Family Advocacy and Support Services” to allow a broader array of providers to deliver the service. It also broadens the definition of caregivers eligible for training to include all individuals who supervise and care for members.

## 2 LPHA Attestation and UAS Updates

For Health Home/C-YES care managers conducting the Home and Community Based Services (HCBS) / Level of Care (LOC) Eligibility Determination, the Licensed Practitioner of the Healing Arts (LPHA) Attestation form (DOH 5275) is no longer required for the Target Populations of Medically Fragile (MF) or Developmental Disability who are Medically Fragile (DD/MF).

The LPHA form for the Target Populations of Serious Emotional Disturbance (SED) is still required for both the initial and annual re-assessment. **There will be an upcoming webinar regarding the LPHA form for this Target Population AND how to secure the SED determination.**

## 3 Health Homes (HH) State Plan Amendment (SPA) for Assessment Fee

DOH submitted Disaster SPA 21-0054 and is awaiting approval to establish a \$200 HCBS/LOC Eligibility Determination annual assessment fee for Health Homes, retroactive April 1, 2022, through September 20, 2022. DOH is pursuing a SPA 22-0088 to allow for the continuation of this annual assessment fee effective October 1, 2022.

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## 4 DOH Response to Stakeholder Feedback

DOH made numerous adjustments in response to feedback received regarding the Children's Waiver renewal as outlined in the 1915(c) Children's Waiver Renewal Stakeholder FAQ - ([XLSX](#)) and continue to work with a variety of stakeholders for additional enhancements to the Children's Waiver:

### Some actions in response to feedback received are as follows:

- Updated the MAPP Health Home Tracking System to add and update existing "segment end date reason codes," that will be used to automatically notify NYS DOH's Capacity Management Team for children/youth in the Children's Waiver, which will automatically affect the member's Recipient Restriction/Exemption (RR/E) K-code and eliminate the need for the HHCM to send a separate secure file transfer email through the Health Commence System.
- Removal of LPHA form for Medically Fragile and Developmentally Disabled Target Populations to streamline HCBS Level of Care Eligibility Determination.
- Developed a HCBS Capacity Tracker to real time data regarding children stats of receiving services and assisting to identify potential of gaps in services and providers.
- Continuation of monthly HCBS Provider meetings to obtain feedback.
- Change required years of experience and type of experience for various services and C-YES as appropriate to develop provider capacity and meet industry standards.
- Workgroup conversation and development of electronic processes – Plan of Care and HCBS referral to streamline workflows and reduce paper.
- Updated the provider designation map on the DOH website.
- Extended April 1, 2021, 25% rate enhancements beyond September 2022 to continue to support providers in building workforce capacity.
- Disbursing a one-time payment totaling a minimum of \$75,000 for workforce and infrastructure investments to eligible providers that delivered children's HCBS, CFTSS, or 29-I services between April 1, 2021, and December 31, 2021.
- Development of a new Children's Waiver Amendment (see Section 7, below).

Feedback is a critical element for DOH; please contact [BH.Transition@health.ny.gov](mailto:BH.Transition@health.ny.gov) with ideas and feedback.

## 5 HCBS Case Review

The Children's Waiver necessitates an annual review and reporting regarding meeting the standards, requirements, and performance measures. The data will be used to calculate quality measures which are used to drive continuous improvement for the Children's Waiver.

- ✓ Waiver Year April 2019-2020 review was conducted at the Health Home/C-YES level and focused on the transitions of participants transitioning to the Children's Waiver.
- ✓ Waiver Year April 2020-2021 review was conducted at the Health Home/C-YES level and focused on improvements in implementing Children's Waiver policies and processes.
- ✓ Waiver Year April 2021-2022 review is being conducted with Health Home/C-YES and HCBS providers regarding the focus of the care manager's plan of care, the HCBS provider's services plan, and communication between all team members.

Results of this review will be provided in December 2022 by webinar to HH/C-YES and HCBS providers. Adjustments to programming and policies and procedures will occur based upon findings.

If you have any questions, please send to [KidsHCBSCaseReview@health.ny.gov](mailto:KidsHCBSCaseReview@health.ny.gov) through Secure File Transfer.



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## 6

### ARPA Funding Update

#### 25% Rate Increase Continuing

- Children's HCBS, Children and Family Treatment and Support Services (CFTSS), and 29-I Health Facilities Core Per Diem 25% rate adjustments during the COVID-19 Emergency as part of the American Rescue Plan Act of 2021 (ARPA), Section 9817 were retroactive to April 1, 2021, through September 30, 2022.
- For HCBS and CFTSS, this 25% rate adjustment is continuing beyond September 2022 to support providers in increasing capacity and quality for services delivered to children/youth across New York.

#### Workforce & Infrastructure Money to be Disbursed

- Providers delivering Children's HCBS, CFTSS, and/or 29-I services between April 1, 2021, and December 31, 2021, are eligible to receive a one-time payment totaling a minimum of \$75,000 for workforce and infrastructure investments. Funds will be distributed as lump sum payments to providers by Medicaid Managed Care Plans (MMCP) and via state-directed funding pursuant to 42 CFR § 438.6(c).
- Attestations will be sent to eligible providers November 2022 and award amounts will be disbursed by end of the year.
- Eligible providers must use these funds to develop and implement programs and strategies that assist in workforce capacity building and/or agency infrastructure, additional details will be included in the attestation.

## 7

### March 2023 Waiver Amendment

DOH has proposed to amend the 1915(c) Children's Waiver on or before March 1, 2023, pending CMS approval.

The Waiver will be amended to:

- Enhance Respite services by adding a medical component to meet the needs of children/youth in the Waiver.
- Update Vehicle Modifications provisions relating to modification costs and payment for driver modifications.
- Update rates for new respite group sizes and planned respite changes to align with the Home and Community-Based Settings Final Rule requirements.
- Update rate reimbursement methodology including allowances for rural rates—the new methodology will allow for rate adjustment changes, subject to state budget requirements and legislative approval.
- Expand palliative care provider qualifications to improve workforce availability and remove “life threatening illness by age 21” language in the definition of these services.
- Update the qualifications of professionals permitted to perform HCBS Level of Care determination to include Local Counties of Mental Health Single Points of Access (SPOAs) staff for children/youth being discharged from institutional levels of care.
- Implement new services of Transitional Care Coordination, Transitional Services, and Goods and Services.
- Authorize payment for Financial Management Services (FMS) provided to children/youth in the Medicaid fee for service delivery system requiring Adaptive and Assistive Technology, Environmental Modifications, and Vehicle Modifications, and also Transitional Services and Goods and Services to be provided by designated Lead Health Homes Serving Children under a 1915(b)(4) waiver instead of the LDSS.

Public comment is welcomed regarding this waiver amendment. In the meantime, DOH will be issuing a schedule regarding upcoming webinars, trainings, and policies regarding the Waiver Renewal, Waiver Amendment, and the Case Review Findings that impact changes to the Waiver program.

Any questions or stakeholder feedback should be submitted to [BH.Transition@health.ny.gov](mailto:BH.Transition@health.ny.gov).