



Department
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Office for People With
Developmental Disabilities

State Discussion with Children's Waiver HCBS Providers

October 2021

Purpose

- To have an open dialogue between the State and HCBS Providers to communicate issues and concerns.
- HCBS Providers to have the ability to discuss barriers and be a part of the problem-solving discussion.
- The State to have the ability to share upcoming changes, guidance, information, and to obtain feedback directly from the HCBS Providers.

October 2021

Agenda

- American Rescue Act – Enhanced FMAP (eFMAP)
- Waiver Renewal
- Current Pending Waiver Amendment
- HCBS Provider Designation Attestation
- HCBS Capacity Tracker
- HH/MCO Workgroup is Restarting
- HCBS Provider Feedback
- Future Meetings and Contact Information

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American Rescue Act Enhanced FMAP (eFMAP)

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eFMAP

What is FMAP?

- The Federal Medical Assistance Percentages (FMAPs) are used in determining the amount of Federal matching funds for State expenditures for assistance payments for certain social services, and State medical and medical insurance expenditures.
- *American Rescue Plan Act of 2021, section 9817 Home and Community Based Services* – allows for an increase of Federal match until 2023 based upon expenditures. There are specific requirements and programs that are allowable.
- Please see NYS Spending Plan submitted to CMS
https://health.ny.gov/health_care/medicaid/redesign/hcbs/enhanced_funding/
- The submitted NYS Spending Plan regarding Children's Redesign:
 - Increase rates 25% for 29I foster care, HCBS, and CFTSS
 - Workforce funding for providers
 - Infrastructure funding for providers

Please note: Other State agencies have funding initiatives regarding children.

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eFMAP

- The State has received partial approval from Federal CMS regarding the Spending Plan.
- The State must submit an Appendix K for HCBS and Disaster State Plan Amendment (SPA) for CFTSS and 29I to get retro-approval for the rate adjustments back to April 1, 2021.
- Additional SPA is being submitted to continue the 25% rate increase.
- Due to provider feedback regarding rate concerns and administrative issues surrounding the Children's Redesign;
 - The State is extending the enhanced 25% until September 30, 2022, instead of March 31, 2022
 - The State is committed to examining every service (29I, CFTSS, & HCBS) to determine appropriate rates and enhancing rates long term
- The State would like to hear from providers specifics regarding what additional duties, administrative items, and staff productive items / percentage.
 - Please share today or email BH.Transition@health.ny.gov

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Waiver Renewal

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Waiver Renewal (effective 4/1/2022)

- The State received feedback by the methods below:
 - 9 letters
 - 5 emails
 - 7 stakeholder sessions, which had attendance of over 700 individuals
 - 227 survey responses
- Slide decks from the Stakeholder Sessions have been posted to the [DOH website](#).
- The State will share the feedback from stakeholders and responses, which will be posted to the DOH website.

Waiver Renewal Process

Due to the significant number of comments, ideas, and suggestions, the following process will be implemented....

- Development of workgroups/committees' specific to topic and populations.
- Evaluation of specific ideas and suggestions, scheduling of discussion with specific groups.
- New services and rate adjustments will be implemented in the eFMAP Plan and outside the Renewal.
 - Not to delay the Children's Waiver renewal
 - Giving time to work with stakeholders to develop the service (suggestions and ideas)
 - Evaluation of the rates and services can occur prior to implementation in the Waiver
- Waiver Amendments will be developed in 2022 based upon evaluation outcomes.

Current Pending Waiver Amendment

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Waiver Amendment*

- This amendment is pending CMS approval, delayed for Sept.1, 2021 effective date based upon the American Rescue Act changes.
- Caregiver/Family Supports and Services *and* Community Self-Advocacy Training and Supports **will not be combined** into one service until the Renewal for 4/1/2022.
 - While the services will remain separate, the service descriptions will be combined to allow for two levels of practitioners, being reimbursed at different rates, to perform either service
 - There will not be a need for two different staff for these 2 services
 - Guidance will be forthcoming after CMS approval
- Updated guidance and webinars on Bereavement Counseling is forthcoming.

**tentatively effective 11/1/2021, pending CMS approval*

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Provider Designation Attestation

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Provider Designation Attestation

- When providers were designated for HCBS or CFTSS, an attestation needed to be signed by the provider. The attestation was outdated.
- As part of the Children's HCBS Designation, there is an updated Attestation that providers will need to review and sign to maintain designation.
- Currently designated Children's HCBS providers will receive the updated Attestation within the next 1-2 weeks – *a signed Attestation is required to maintain designation.*
- The attestation and re-designation of providers is required by the Children's Waiver every 3 years.
- Providers who have **not** delivered services within the last 6 months will be de-designated for those services – if you have plans to deliver those services and would like to maintain your designation, please contact the state to discuss.
- Re-designation once the provider is ready to serve participants is easy.

[Children's HCBS Provider Designation and Re-designation Procedure #CW0013](#) – Revised July 2021
[HCBS Provider De-Designation Procedure #CW0003](#) – September 2020

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HCBS Capacity Tracker

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HCBS Capacity Tracker

Why create a system:

- HCBS Provider feedback that too many entities were asking for waitlist and service availability.
- HHCMs feedback that they don't know which HCBS providers have capacity or not, referring the same child to multiple HCBS providers.
- HCBS providers indicating they could build capacity if they knew the number of referrals they might receive.
- State is unable to indicate how many children are on a waitlist or response to the need to build capacity or report to the Federal Government.
- Medicaid Manage Care Plans are responsible for network adequacy but do not know if their members are on a waitlist to work with providers to build capacity.
- Lead Health Homes do not know the children on a waitlist to ensure care managers are appropriately linking to services.

HCBS Capacity Tracker (cont.)

Functionality

- Seeing if a child/youth is on multiple waitlists
- More user-friendly way to manage waitlists with multiple providers
- Filter options for how many children/youth are on waitlists by county and by service
- Manage waitlists and referrals
- Will be connected to the public facing map

Why this is beneficial to you

- There will be fewer places to enter information (providers will need to input information every 3 weeks)
- Will provide data to help providers with business planning
- This will assist the State in understanding where to focus efforts to help providers build capacity
- Strengthen overall collaboration

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HCBS Capacity Tracker (cont.)

What is next?

- The State will incorporate feedback from a focus group that reviewed the system for useability.
- Assisting providers with learning how to use the Capacity Tracker interface.
- Feedback received yesterday regarding the system is being discussed at the State – Do some of the focus group members want to share?

Version 2.0

- Will include referral process and real time response functionality.
- Building a referral process that is as consistent as possible across Providers.

Discussion Items

- Large agencies with satellite offices may need multiple people inputting information.
- Providers will need to enter waitlist information by site.

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Health Home (HH) / Managed Care Organization (MCO) Subcommittee

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HH/MCO Subcommittee

- HH/MCO subcommittee is restarting and will be limiting the number of active participants to make this a working committee as opposed to an open stakeholder feedback committee.
- If you are interested in being part of this subcommittee, complete the [HH/MCO Children's Subcommittee Participation & Engagement Survey](#).
- The purpose of this survey is to collect contact information and to identify those stakeholders who are willing to be included in the committee as well as assess areas of interest and commitment levels of participation.

Some of the Topics to be Discussed:

- HCBS POC Workflow
 - MMC not accepting authorization form or non-responsive to HCBS providers or have their own form
 - HH not outlining frequency, scope, duration and updating POC
 - HH not sending POC to MMC
 - Looking to automate referral and authorization process
- Capacity tracking of HCBS
- Regular contact between HH and HCBS providers – guidance
- Requiring K-code to receive payment - guidance
- Waiver renewal recommendation

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HCBS Provider Feedback

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HCBS Provider Feedback

- Please provide feedback on the supports that are needed (policy/guidance, training, other requests, etc.).
- Feedback can be provided verbally or in the chat.
- If other ideas and feedback come to your mind after this meeting, please reach out to us at the BH.Transition@health.ny.gov mailbox or 518.473.5569.



Future Meetings & Contact Information

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Future Agenda

- Monthly Meetings scheduled:
 - November 17th from 1:00pm – 2:30pm
 - December 15th from 1:00pm – 2:30pm
- **Register to attend all these monthly meetings here:**
<https://attendee.gotowebinar.com/rt/7920611704845011726>
- NYS would like to discuss topics of interest to the HCBS providers and also hear suggestions and ideas for improvement.
- Please submit your agenda requests, suggestions, or questions to BH.Transition@health.ny.gov.

All Children's Waiver HCBS questions and concerns, should be directed to the NYS Department of Health at BH.Transition@health.ny.gov mailbox or 518.473.5569.

Questions regarding the HCBS Settings Final Rule can be directed to ChildrensWaiverHCBSFinalRule@health.ny.gov.

NYS Children's Provider Designation Team at OMH-Childrens-Designation@omh.ny.gov.



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