Behavioral Health Transition to Managed Care
Agenda

• Behavioral Health Managed Care Transition
• Community Mental Health Assessment
• Uniform Assessment – Community Mental Health Pilot
• Training
• Organization Readiness
• Milestones
Behavioral Health Managed Care Transition

Qualified Mainstream MCOs

- integrates all Medicaid State Plan covered services for mental illness, substance use disorders (SUDs), and physical health conditions.

Health and Recovery Plans (HARPs)

- manages care for adults with significant behavioral health needs.
- offers access to an enhanced benefit package comprised of Home and Community Based Services.
- offers Health Home care management services.
Community Mental Health Assessment

• Researched and validated by interRAI
• Comprehensive assessment
  ➢ designed to incorporate the person’s needs, strengths and preferences when assessing the key domains of function, mental and physical health, social support and service use.
  ➢ includes items to describe the performance and capacity of the person in a variety of domains, with the majority of items serving as specific triggers for care planning.
  ➢ information used to assist in the identification of needs and to inform and support individual goals and appropriate interventions
• Adapted for New York State
• Subset of items are used to support HARP and HCBS Eligibility
  ➢ Referred to as the “HARP/HCBS Eligibility Assessment Tool”
  ➢ New York State is currently pilot testing the algorithms
Uniform Assessment – Community Mental Health Pilot

- Web-based application accessed through the Health Commerce System
- Role-based application that guides user privileges
- Contains Community Mental Health Assessment and HARP/HCBS Eligibility Assessment Tool
- Offline Application permits users to work while not connected to the Internet
- Reports available to support management and care planning

Will be integrated into the UAS-NY in early 2016.
# UA-CMH Pilot Roles

<table>
<thead>
<tr>
<th>Role</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>OMHCMH-01 Assessor</td>
<td>Ability to initiate, conduct, and sign assessments</td>
</tr>
<tr>
<td>OMHCMH-02 Manager</td>
<td>Ability to review assessments and access reports</td>
</tr>
</tbody>
</table>

- Both roles are available to Health Homes and Health Home Care Management Agencies.
- Managed Care Organizations will only have access to the Manager role.

HCS Coordinator will assign roles
Assessor Qualifications

• **Education:**
  - A bachelor’s degree in any of the following: child & family studies, community mental health, counseling, education, nursing, occupational therapy, physical therapy, psychology, recreation, recreation therapy, rehabilitation, social work, sociology, or speech and hearing; OR
  - NYS licensure and current registration as a Registered Nurse and a bachelor’s degree; OR
  - A Bachelor’s level education or higher in any field with five years of experience working directly with persons with behavioral health diagnoses; OR
  - A Credentialed Alcoholism and Substance Abuse Counselor (CASAC).

• **Experience:**
  - Two years experience (a Master’s degree in a related field may substitute for one year’s experience) either:
    - Providing direct services to persons diagnosed with mental disabilities, developmental disabilities, alcoholism or substance abuse;
    - OR
    - Linking persons who have been diagnosed with mental disabilities, developmental disabilities, alcoholism or substance abuse to a broad range of services essential to successfully living in a community setting.

• **Supervision:**
  - Must have supervision from a Master’s level clinician

*The State may waive, on a selected basis and under circumstances it deems appropriate which may include care manager capacity issues, such qualifications.*
# Training

## Course

<table>
<thead>
<tr>
<th>Managed Care 101</th>
</tr>
</thead>
</table>

**HCBS Services**

- Provide foundational knowledge on each HCBS service, how they fit into plan of care, how they relate to other State services
- Clear distinction btw MH V SUD

**Workflows for Health Home Care Managers**

**Using the Uniform Assessment – Community Mental Health Application Pilot**

Scheduling Details to Follow
Understanding the Community Mental Health Assessment

- Online, self-paced course
- Available through the UAS-NY Training Environment
- Upon completion of the course, learners will:
  - describe the structure and intent of the Community Mental Health Assessment
  - identify strategies to administer the Community Mental Health Assessment
  - demonstrate the ability to administer the Community Mental Health Assessment
- Course contains 11 modules
- Provide staff with time to complete course; this will aid in their understanding and comfort with the assessment
Application Access

- UAS-NY Training Environment
- Uniform Assessment - Community Mental Health Assessment Pilot
Health Commerce System

- **Secure, Web Portal**
  - Authenticates users
  - Contains a wide range of restricted and non-restricted applications

- **Organizations are grouped by Organizational Type:**
  - Organizational type based on operating certificates issued by DOH
    - ✓ Managed LTCP
    - ✓ Managed Care
    - ✓ Health Home Program
    - ✓ Health Home CMA
    - ✓ NYS CFA
  - Provides additional security by limiting the organization types that can access applications

Only these organization types have access to the UA-CMH Pilot application and roles.
HCS User Accounts

• All Users must have their own active HCS User Account

• Only one HCS account per user

• Staff without an active account must work with their HCS Coordinator and use the Paperless HCS User Account process
Assigning Roles

Coordinator’s Update Tool

Form Name: Role Assignments
Select a Role to Assign/Modify for Z Test Managed LTCP

<table>
<thead>
<tr>
<th>Role Description</th>
<th>Person in Role? Modify Role Assignments</th>
<th>Role Description</th>
<th>Person in Role? Modify Role Assignments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief Executive Officer or President</td>
<td>No Modify</td>
<td>HPN Coordinator</td>
<td>DOH Assigned Modify</td>
</tr>
<tr>
<td>HPN Organizational Security Coordinator</td>
<td>DOH Assigned Modify</td>
<td>MAPP Gatekeeper</td>
<td>No Modify</td>
</tr>
<tr>
<td>MAPP SPOC</td>
<td>No Modify</td>
<td>MAPP User</td>
<td>No Modify</td>
</tr>
<tr>
<td>ME DS Reporting &amp; Analysis</td>
<td>No Modify</td>
<td>Medical Director</td>
<td>No Modify</td>
</tr>
<tr>
<td>Order Official Prescriptions</td>
<td>N/A Modify</td>
<td>PNSDS Reporting &amp; Analysis</td>
<td>Yes Modify</td>
</tr>
<tr>
<td>UAS-15</td>
<td>No Modify</td>
<td>UAS-20</td>
<td>No Modify</td>
</tr>
<tr>
<td>UAS-30</td>
<td>No Modify</td>
<td>UAS-40</td>
<td>No Modify</td>
</tr>
<tr>
<td>UAS-45</td>
<td>Yes Modify</td>
<td>UAS-50</td>
<td>No Modify</td>
</tr>
<tr>
<td>UAS-NY</td>
<td>Yes Modify</td>
<td>UAS-NY IT</td>
<td>Yes Modify</td>
</tr>
</tbody>
</table>

Behavioral Health Managed Care Transition Guide Page 21.
Trust Level 3 Assurance

Coordinator’s Update Tool

- Manage People
- Update Contact Info
- Manage Role Assignments
- Delete Account
- Request Account
- Verify Trust Level

Trust Level for

How to Grant Trust Level 3 Access

- The user must be in person with their NYS driver license or non-driver Photo ID available.
- Enter the user’s information from their NYS driver license or non-driver Photo ID in the NYS DMV Identity Verification fields below.

  The last and first name fields must match what is on the user’s driver license or non-driver photo ID.

  If it does not match, contact 1-866-529-1000 option 1 and request the name be updated to match the driver license name.

- All fields marked with an asterisk (*) are required.
- Check the box to attest the user’s identity was verified, and click submit.

Only successful verifications will acquire Trust Level 3.

NYS DMV Identity Verification

Last Name:
First Name:
NYS DMV ID or Non-driver Photo ID: *
Date of Birth (YYYY/MM/DD): *
Gender (M/F): *
Zip Code: *

☐ I attest by checking the box that the user’s identity was verified and approved for Trust Level 3 access.

Submit  Reset
Select "Documents by Group" to access HCS Coordinator resources.

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
<th>Date Posted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delete Account Quick Reference Guide</td>
<td>Remove an HCS Account (Delete) using the Coordinator's Update Tool</td>
<td>08/20/2014</td>
</tr>
<tr>
<td>Trust Level Quick Reference Guide</td>
<td>Feature in the Coordinator's Update Tool to verify a user against DHMV for Trust Level 3</td>
<td>08/20/2014</td>
</tr>
<tr>
<td>Trust Level Quick Reference Guide</td>
<td>Feature in the Coordinator's Update Tool to verify a user against DHMV for Trust Level 3</td>
<td>08/20/2014</td>
</tr>
<tr>
<td>Secure HCS User Account Quick Reference Guide</td>
<td>Quick Reference guide - What properties HCS user accounts for non-medical professionals on all those needing access to HCS</td>
<td>11/18/2013</td>
</tr>
<tr>
<td>HCS Coordinator's FAQs</td>
<td>Frequently Asked Questions regarding accounts</td>
<td>09/17/2013</td>
</tr>
<tr>
<td>Coordinator Responsibilities</td>
<td>HCS Coordinator Responsibilities</td>
<td>01/18/2013</td>
</tr>
<tr>
<td>How to remove a role</td>
<td>using the Coordinator's Update Tool</td>
<td>01/15/2013</td>
</tr>
<tr>
<td>Account Types</td>
<td>What types of HCS accounts are there?</td>
<td>09/17/2013</td>
</tr>
<tr>
<td>Account Access Form Criteria</td>
<td>What is the criteria for an account request form to be processed?</td>
<td>09/12/2013</td>
</tr>
<tr>
<td>NYCC Quick Reference Guide</td>
<td>The reference manual will provide a guide through commonly asked questions that are based on the HCS Coordinator's Guide.</td>
<td>10/18/2011</td>
</tr>
<tr>
<td>FOIA Letter and Activations Instructions</td>
<td>A list of the PDF letter and activation instructions that the HCS Coordinator receive</td>
<td>12/23/2011</td>
</tr>
<tr>
<td>Information About Account Security Violations</td>
<td>STOP: DO NOT share account information (userids and passwords). Allowing someone to use your HCS account is a breach of security</td>
<td>11/19/2013</td>
</tr>
</tbody>
</table>
Accessing the Applications

Behavioral Health Managed Care Transition Guide Page 23.
Accessing the Applications
### Milestones

<table>
<thead>
<tr>
<th>Description</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establish a leadership group and make an organizational commitment to successfully implement the UA-CMH Pilot <em>(see page 8)</em>.</td>
<td>April 27, 2015</td>
</tr>
<tr>
<td>Appoint a UA-CMH Single Point of Contact to serve as the project manager for your organization’s UA-CMH Pilot implementation <em>(see page 8)</em>.</td>
<td>April 27, 2015</td>
</tr>
<tr>
<td>Create an internal and external communication plan to share information about your organization’s implementation of the UA-CMH Pilot <em>(see pages 9 and 10)</em>.</td>
<td>May 1, 2015</td>
</tr>
<tr>
<td>Identify and confirm your organization’s HCS Coordinator(s), or take steps necessary to establish one.</td>
<td>May 1, 2015</td>
</tr>
<tr>
<td>Assess staff computer literacy and provide training as needed <em>(see page 12)</em>.</td>
<td>May 8, 2015</td>
</tr>
<tr>
<td>Make “UA-CMH Pilot Support for Users” available to all of your staff <em>(sent with Behavioral Health Managed Care Transition Guide)</em>.</td>
<td>May 14, 2015</td>
</tr>
</tbody>
</table>
## Milestones

<table>
<thead>
<tr>
<th>Description</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assign roles in HCS (<a href="#">see page 21</a>).</td>
<td>May 8, 2015</td>
</tr>
<tr>
<td>Begin Assessor Training</td>
<td>Available May 15, 2015</td>
</tr>
<tr>
<td>Start reviewing your organization's current business practices (<a href="#">see page 10</a>).</td>
<td>June 1, 2015</td>
</tr>
<tr>
<td>Start reviewing and prepare your organization's information technology infrastructure (<a href="#">see page 25</a>).</td>
<td>June 15, 2015</td>
</tr>
</tbody>
</table>
Single Point of Contact

- Oversee organization’s transition to using the Community Mental Health Assessment and associated application
- Serve as the primary information contact between your organization and State project staff

By April 27, 2015:
Email the name, agency, telephone number, and email address of your Single Point of Contact to the Health Home email web form (link below) under the subject: Behavioral Health Managed Care

https://apps.health.ny.gov/pubdoh/health_care/medicaid/program/medicaid_health_homes/emailHealthHome.action
Questions?

• Email the name, telephone number, and email address of your Single Point of Contact to the Health Home email web form (link below) under the subject: **Behavioral Health Managed Care**

  https://apps.health.ny.gov/pubdoh/health_care/medicaid/program/medicaid_health_homes/emailHealthHome.action

• Transition Support
  via email:  uasny@health.state.ny.us
  telephone:  518-408-1021 (option 2)

• User Support
  via email:  helpstar@ciminc.com
  telephone:  734-930-0855 (please specify that call is related to the Community Mental Health Pilot software in New York)

• Programmatic Questions
  via email:  UA-CMH@omh.ny.gov