



Department  
of Health

Office of  
Mental Health

Office of Alcoholism and  
Substance Abuse Services

ANDREW M. CUOMO  
Governor

HOWARD A. ZUCKER, M.D., J.D.  
Commissioner of Health, DOH

ANN MARIE T. SULLIVAN, M.D.  
Commissioner, OMH

ARLENE GONZÁLEZ-SÁNCHEZ, M.S., L.M.S.W.  
Commissioner, OASAS

To: Medicaid Managed Care Organizations (MMCO)/HARPs  
From: NYS Office of Mental Health (OMH), Department of Health (DOH), and Office of Alcohol and Substance Abuse Services (OASAS)

Date: 3/27/2018

**Subject: Continuity of Care for Adult Behavioral Health Home and Community Based Services Recipients Awaiting Reassessments**

**HARP members receiving Adult BH HCBS, services must not have care disrupted while they await reassessment.** The State requires all HARP members to be assessed annually for Adult Behavioral Health (BH) Home and Community-Based Services (HCBS). As outlined in the NYS Adult BH HCBS Workflow Guidance, the NYS Eligibility Assessment is valid for the period of one (1) year. Health Home Care Managers and State Designated Entities will use the NYS Eligibility Assessment to perform reassessments at least annually (from completion date of most recent assessment) or sooner when a significant change in a member's condition warrants a change be made to the Plan of Care (POC). This applies to all HARP members and HARP-eligible HIV SNP members, including those previously deemed not eligible for BH HCBS at their last assessment.

The State recently analyzed eligibility assessment data and determined that a substantial number of HARP members who had initial HCBS assessments now require a reassessment, based on the annual timeframe referenced above. **For HARP members receiving Adult BH HCBS, services must not be disrupted solely due to administrative delays with reassessment. Services must continue to be approved until the individual receives a NYS eligibility reassessment.**

In cases where a HARP member has been receiving Adult BH HCBS and has declined to be re-assessed the Health Home Care Manager or State Designated Entity must record that the assessment has been offered and declined. The Health Home Care Manager or State Designated Entity must share with the HARP member that declining the assessment will result in termination of BH HCBS. In this case, the HARP, in review of the member's continued BH HCBS, shall consider if the HARP member will, but for the provision of BH HCBS for stabilization and maintenance purposes, decline to prior levels of need. If so, the



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HARP must appropriately authorize alternate services as medically necessary (i.e., subsequent medically necessary services and coordination of care for stabilization and maintenance is needed to prevent decline to previous needs-based functioning). Such alternate services may include any Benefit Package service; voluntary continuation of BH HCBS-like services or other appropriate services; or other “in lieu of” services the HARP may be authorized by the State to provide.

Per the Medicaid Model Contract and as shown in the Adult BH HCBS Workflow Guidance, it is the responsibility of the MMCO to monitor for timely completion of the NYS Eligibility Assessment and POC to ensure needed services are not disrupted. The MMCO must work closely with Health Homes and State Designated Entities to improve any quality issues, such as unnecessarily delayed assessments or incomplete POCs.



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If a MMCO is having difficulty monitoring timely assessment they can contact the State for further guidance and assistance at: [BHO@omh.ny.gov](mailto:BHO@omh.ny.gov)

Adult BH HCBS Workflow Guidance link:

[https://www.health.ny.gov/health\\_care/medicaid/program/medicaid\\_health\\_homes/workflow\\_guidance.htm](https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/workflow_guidance.htm)