

## Children's Medicaid System Transformation Overview Webinars

### OVERVIEW

New York State is hosting a series of webinars to discuss the various components of the Transition Plan for the Children's Medicaid System Transformation. The Transition Plan includes:

- The transfer of six existing 1915(c) waivers serving children into a single component of the State's 1115 waiver;
- The creation of Health Home care management, including the transition of existing care management services and enrollment of new children's populations;
- The creation of a single Home and Community Based Services (HCBS) package, incorporating new services and existing 1915(c) services, with expanded eligibility criteria;
- The creation of six new State Plan Amendment (SPA) services, incorporating new services and existing waiver services, open to all Medicaid children meeting medical necessity criteria;
- The carve-in of the 1915(c) and foster care children populations into managed care; and
- The carve-in of additional children's behavioral health services into managed care.

The State held a webinar on September 18<sup>th</sup> to discuss various details of these initiatives and upcoming tasks and responsibilities for providers in preparation for the transition. The slides from the webinar are available [here](#). Furthermore, the State will hold monthly webinars on the Transition Plan, starting September 29<sup>th</sup> from 10am to noon, at which participants can ask questions. Registration for this webinar is available [here](#).

Below is a summary of some important provisions that SPG has not previously summarized. Please feel free to contact SPG for details on other parts of the Transition Plan.

### HCBS ELIGIBILITY CRITERIA

The current HCBS eligibility criteria will continue to be used during the Interim Transition Process between January 1, 2018 and June 30, 2018. Effective July 1, 2018, the State will implement the new HCBS Level of Care (LOC) eligibility criteria, which determines if a child is eligible for or deemed at risk of institutional placement and will replace the current criteria used under the 1915(c) waivers. Beginning January 1, 2018, the State aims to expand access to HCBS to more children by implementing new Level of Need (LON) eligibility criteria, which will target children who are not yet at risk for institutional placement but who have extended functional impairments, seeking to prevent escalation to LOC. Both the LOC and LON criteria include the following three components:

1. Target population;
2. Risk factors; and
3. Functional criteria.

The LOC target populations are current 1915(c) waiver populations, while the LON target populations will include Serious Emotional Disturbance (SED) and Abuse, Neglect, Maltreatment, or Complex Trauma as defined by Health Homes. More details on these criteria are available [here](#) (slides 40-53).

The State's goal is to have all children who are HCBS-eligible enrolled in Health Homes. Children who are eligible for HCBS are automatically eligible for Health Home services; however, children who are eligible for Health Home services are not automatically eligible for HCBS and must be determined

HCBS-eligible by Health Home care managers. Children transitioning from an existing waiver will be grandfathered into HCBS eligibility for one year from their completed CANS-NY assessment.

**TIMELINE**

If approved by CMS, the six current children’s 1915(c) waivers will transition to the 1115 waiver effective January 1, 2018. Key implementation dates include:

Effective Date	Transitioning Programs
<b>January 1, 2018 – June 30, 2018 (Interim Transition Process)</b>	<ul style="list-style-type: none"> <li>• Readiness activities for current 1915(c) waiver providers</li> <li>• Transition to Health Home care management for children/families in 1915(c) waivers</li> <li>• Continuation of Interim HCBS</li> </ul>
<b>July 1, 2018</b>	<ul style="list-style-type: none"> <li>• Implementation of six new SPA services as part of the regular benefit package for children in Medicaid</li> <li>• Implementation of new package of 12 HCBS services, through both fee-for-service (FFS) and managed care as applicable; eligible children in Health Homes may begin to receive services</li> <li>• Implementation of new LOC HCBS eligibility criteria</li> <li>• Managed care carve-in of children’s behavioral health services</li> <li>• Managed care carve-in of 1915(c) waiver populations</li> </ul>
<b>January 1, 2019</b>	<ul style="list-style-type: none"> <li>• Children in foster care are enrolled into managed care</li> <li>• Implementation of LON HCBS eligibility criteria.</li> </ul>

All dates are subject to change based on eventual federal approval.