

March 2019 Vol. 14

CBC Has Moved!! Our new address is: 55 Broadway, 7th Fl, Ste 1701 New York, NY 10006

CARE COORDINATION SERVICES

NYS FINAL BUDGET

There were no cuts to this year's Health Home budget. And while many challenges still exist but this is a victory for both CMAs and Designated Lead HHs. Lobby Days proved exceptionally helpful in generating discussion with elected officials, leadership and agency boards.

CONSENTS

CBC CMAs continue to make progress in completing and uploading both HHSC and AHH the new consent versions of the DOH 5055 and DOH 5201. As of March 2019, the HHSC CCMAs have achieved 98% consent completion, bringing us 2% shy of our goal of 100% by the end of Q1 -2019. Adult CMAs have attained 50% completion thus far with a goal of 100% by July 31st. CBC will continue to monitor uploaded consents through the monthly documentation reports. As a reminder, an updated DOH 5055 is due by the next Comprehensive Assessment Due Date. Since the Comprehensive Assessment is due annually, updates for both consents and assessments must be completed by July 31, 2019.

EXTENSION: CRIMINAL RECORD CHECK

The deadline for both temporary and prospective employees to receive the Criminal History Record Check clearance allowing these employees to provide direct care without being under direct supervision has been extended to July 1, 2019. NYS DOH has suspended enforcement of the current deadline (April 1). This applies to:

- Health Home Care Management to enrollees less than 21 years of age;
- Health Home Care Management to enrollees with a developmental disability as defined under section 1.03 (22) of the Mental Hygiene Law; and
- HCBS to those less than 21 years of age under the 1915c Children's Waiver Amendment.

UPCOMING VALUE – ADD TRAININGS

CBC hosted three in-person trainings at for both AHH and HHSC providers as part of our <u>Trauma Informed Care</u> series. Additionally, we offered WebEx training on Plan of Care during our HH Value-Add and a Gaps in Care training in conjunction with MetroPlus. Total number of participants at these March trainings was 165 unique staff representing 28 CMAs.

Please RSVP by emailing cbchealthhome@cbcare.org for upcoming in – person trainings for April 2019.

Hands-On Workshop: Self-Reflection and Self-Care Techniques (20 seats max) Audience: Care Managers and Supervisors Session: April 17, 2019 1PM – 4:30PM

Essentials of Trauma Treatment: Part 1 Three Phases and Key Skills (20 seats max)

Audience: Supervisors Session: April 30, 2019 9:30AM – 1PM Essentials of Trauma Treatment: Part 2 Engaging Complexly Traumatized Youth and Families (20 seats max)

Audience: Care Managers and Supervisors

Session: May 7, 2019 9:30AM – 1PM

MEMBER DISENROLLMENT FROM THE HEALTH HOME PROGRAM

The updated policy is available here.

CHANGES TO CHILDREN'S MEDICAID TRANSFORMATION

March has brought several updates to Children's Medicaid System Transformation; questions can be sent to <u>BH.transition@health.ny.gov</u>, changes are:

• Timeline changes for components of transformation (carve-in of foster care population);

• HCBS and CFTSS children's providers enrollment requirements for Medicaid/ eMedNY; and

• Process for HCBS Level of Care (LOC) eligibility determinations.

CHILDREN'S MENTAL HEALTH REHABILITATION SERVICES PROGRAM

NYS OMH established standards for providers seeking to offer the new single set of Children and Family Treatment and Support Services (CFTSS) on November 21, 2018. Implementation began January 1, 2019. A new CFTSS Manual was released on January 9th and can be reviewed <u>here</u>.

March 2019 Vol. 14

HHSC 1915C WAIVER TRANSITION

ARE

COORDINATED BEHAVIORAL

To date, CBC has transitioned close to 800 children to its HHSC program from 5 former 1915C Waiver programs. Approximately 70 end users are anticipated to receive new GSI user accounts. The SDOH Children's program has updated its guidance for all transitioning staff which is available on the SDOH <u>website</u>.

BTQ

BTQ Health Home Team and CBC want all CBC CMAs to be aware of the following NYSDOH/BTQ Portal critical updates:

- MAPP 3.0 is scheduled to go live on April 18th. All CMAs must:
 - Complete a detailed HML Assessment for all members Enrolled during the month of May 2019
 - Answer an additional HML Assessment question (HH+ Criteria) for all HMLs for dates of service on/after 5/1/19.
- HMLs are the largest issue preventing billing. If the" HML" column of the BTQ Portal Enrollment File Report does not have a value of "Submitted", complete a detailed HML.
- Continued Search is no longer permitted by NYSDOH.
- Diligent Search is now only permitted for members whose Enrollment File status is "Pended – Diligent Search". You can identify these members in the BTQ Portal's Enrollment File Report by selecting the value "P – DS" from the "Enc. Type" column.
- If your agency is performing HCBS assessments, notify <u>Bob Potter</u>, Performance Manger, Health Home. HCBS Assessment billing is now supported in the BTQ Portal; billing information on these claims is in the BTQ Portal's Billing Activity Report, and disbursement information is in

the BTQ Portal's CMA Disbursement Dashboard. The BTQ Help Desk can be reached at 646-699-4969.

QUALITY PERFORMANCE MANAGEMENT & COMPLIANCE

THE 28TH NATIONAL HIPAA SUMMIT IN WASHINGTON, DC

Tracie Jones, CBC's Compliance Officer attended the 28th National HIPAA Summit in Washington, DC.

In 2018 alone, the US Department of Health and Human Services, Office of Civil Rights, reported over \$28B in monetary settlements due to reported breach notifications. The top six causes of these breaches were:

- 1. Lack of BAAs to safeguard PHI;
- 2. Incomplete or inaccurate risk analysis/assessment;
- 3. Impermissible disclosures, specifically to the media;
- 4. Failure to manage identified risk;
- 5. No patching of software; and
- 6. Improper disposal of PHI.

Highlighted below are some "right actions" and compliance best practices your organization can implement to mitigate risk of PHI breaches:

- Share and accept the minimum necessary information when coordinating care;
- Password protect documents and/or IT devices that hold or transmit electronic PHI;
- Shred PHI to dispose of it properly and in a timely manner;
- Review your agency's HIPAA policies and procedures and attend HIPAA trainings, at minimum annually, as a refresher to learn if there are any updated guidelines;

- Know how to properly complete consents that allow for sharing of information;
- Review vendor/contractor relationships to ensure required BAAs are in place to address breach/security incident obligations; and
- Complete a thorough HIPAA and security risk analysis/assessments AND address any identified risks/gaps in security

HEALTHIX

Todd M. Rogrow has been named the new President and CEO of Healthix, beginning May 1, 2019. Congratulations to Todd!

Healthix approved a revision to the Healthix Consent Policy in March; no longer requiring an organization to offer a separate Healthix Consent Form if the member chooses only to make a consent decision for one organization. Additional information on the specific updated policy can be reviewed <u>here</u> and all policies, <u>here</u>.

Of note, the requirement is waived if an organization is part of an Organized Health Care Arrangement (OCHA), which all CBC Health Home Care Management Agencies are as of September 24, 2018 when CBC required all CMAs to adopt and issue the CBC Notice of Privacy Practices that includes the OCHA.

PSYCKES BHCC CONSENTS

PSYCKES hosted a learning collaborative in March on the newly developed BHCC Consent Form and BHCC Withdrawal of Consent Form. The new PSYCKES feature to allow providers to attest to BHCC consents is scheduled to go live April 2nd. CBC is reviewing BHCC Consent Forms and updating necessary documentation

March 2019 Vol. 14

and systems to operationalize this across our BHCC. Additional communication will be provided by CBC to our BHCC providers prior to implementation. The PSYCKES team will also be providing training and technical assistance to BHCCs and providers on how to complete consents and attest to consent in the PSYCKES platform.

COORDINATED BEHAVIORAL

CARE

PERFORMANCE QUALITY MEETING

Several performance improvement activities were discussed at the joint QMT/CQMT meeting on March 28th. Commencing April 2019 CMA's, in partnership with CBC QPM, will complete a HARP Improvement Plan (HIP) to identify workflow barriers and solutions to meet SDOH benchmarks for both EAs and POCs by June 30th. Meeting participants previewed the CMA Performance Report Cards, to be distributed to CMAs guarterly. The performance reports provide an important opportunity to demonstrate the quality of HH services per CMA and across our network.

Updates to CBC's Disenrollment/Discharge Policy based on new DOH Policy #H0008 & Incident Reporting Policy to include AH+ guidelines were also presented, as were the recent HML-HH+ changes effective April 5th.

The next Joint QMT/CQMT Meeting is scheduled for May 30, 2019 at 9:30AM.

TECHNOLOGY

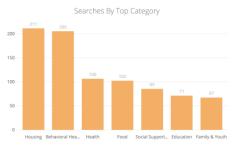
HEALTHIFY

Healthify continues to be utilized across the CBC Network. If you are interested in implementing Healthify in your agency, please contact <u>Elise Kohl – Grant</u>, Director of IT Project Management.

1,459 Total Searches for March 2019:

Top 3 categories of searches:

- 1. Housing
- 2. Behavioral Health
- 3. Health



CBC INNOVATIVE PROGRAMS

NYS OASAS PATHWAY HOME (PH) TEAM

CBC, in collaboration with the NYS Office of Alcohol and Substance Abuse Services (OASAS) is launching a Pathway Home Team that will offer Pathway Home services for individuals transitioning from a detox or rehab stay, to launch June 1st. <u>Services for the Underserved</u> (SUS) was awarded the subcontract to provide the delivery of direct care services. Pathway Home will be partnering with BronxCare Detox/Rehab on this project.

The three main areas this team will address are:

- Increasing access to Medication Assisted Treatment (MAT) using the 3 FDA approved medications
- Reducing the unmet treatment need
- Reducing overdose death through prevention, treatment and recovery activities

EXCITING NEW PARTNERSHIP

A new partnership is underway between the <u>Community Access</u> (CA) Pathway Home Team and <u>Mount Sinai Hospital</u>!

The CA PH team has started accepting referrals from the inpatient psychiatric units at Mount Sinai Hospital. The Community Access team will be engaging members during their hospital stays while simultaneously helping those members prepare to transition into the community. The inpatient social work team and lead psychiatrists at Mount Sinai met with the Pathway Home team for a meet and greet.

SCATTERGOOD AWARDS

CBC's Pathway Home was shortlisted as a finalist for the annual Scattergood National Innovation award. As a finalist, CBC had the opportunity to present on PH at the National Council for Behavioral Health conference in Nashville and to speak on an innovation panel. Unfortunately, despite the support of our network, PH lost the public vote but the national recognition of the program and CBC was a win!

PATHWAY HOME NEWSLETTER

CBC's Pathway Home publishes a monthly newsletter. It can be accessed <u>here</u>.

CBC TRAINING INSTITUTE

The CBC Training Institute was established, with NYS OMH support, in 2018 to promote the CBC Pathway Home care transition model as a "best practice" across New York State through the provision of training and technical assistance. The Training Institute provides education to key stakeholders on the extraordinarily successful model with the goal of improved outcomes



March 2019 Vol. 14



(increased aftercare follow-up, medication adherence) for clients served; and cost saving (reduced ED and hospital utilization) to payers.

Training and technical assistance are provided to executive level staff, supervisors and frontline teams through a variety of platforms, including: webinars, workshops, case studies, participatory activities, and learning collaboratives with a focus on improved patient outcomes and cost savings demonstrated by Pathway Home.

Training content is tailored to each organization's unique location, setting and population and includes:

- Budget
- Staffing levels
- Workflows
- Implementation
- Engagement
- Supervision
- Policy and Procedures
- Other operational matters

In addition, to care transition subject matter expertise, the Training Institute facilitates the delivery of training in a wide variety of areas including: Engagement, Leadership and Supervision, Safety During Home Visits, De-escalation, Motivational Interviewing, Mental Health First Aid, Youth Mental Health First Aid, documentation, etc. CEU credits are provided for many of our offerings.

Please contact the <u>CBC Training Institute</u> for further information.

IN THE NEWS...

OPEN HOUSE FOR OLDER ADULTS PROS PROGRAM

Service Program for Older People (SPOP)

held an open house on March 13th showcasing NYS' only Personalized Recovery Oriented Services (PROS) program exclusively for older adults. The open house allowed attendees to meet program staff and tour the PROS space at 188 West 88 St in Manhattan. The open house provided information about the program in its entirety and facilitated making referrals. Attendees learned how the program uses the PROS model to meet the specific needs of older adults, and an opportunity to connect with other providers working with the aging population. Attendees also viewed artwork created by program participants.

NYC DOHMH BUPRENORPHINE WAIVER TRAINING

DOHMH continues to sponsor free Halfand-Half Buprenorphine Waiver Training. Physicians are required to complete an 8-hour training; nurse practitioners and physician assistants must take 24 hours of training to apply. This format includes 4 hours of online training, due **prior** to 4 hours of in-person training. To register, please visit <u>here</u>. To receive information about future trainings, please email: <u>buprenorphine@health.nyc.gov</u>.

Monday, May 6th

Mout Sinai Icahn Medical Institute Registration by: Monday, April 29th Friday, May 24th CUNY York College Registration by: Friday, May 17th

NYC DOHMH RELEASE LATEST CHI

Buprenorphine:AnOffice-BasedTreatment for Opioid Use Disorder

NYHPA RELEASES SUD TREATMENT ISSUE BRIEF

New York Health Plan Association released a SUD Treatment specific issue brief, and can be found here. The brief focuses on proposed budget items pertaining to length of stay for inpatient SUD. Also included are recommendations around the opioid including improving crisis care coordination and promoting evidence based treatment.

UHF: TWO REPORTS

UFH recently published a report on providing integrated family care. It can be found <u>here</u>. The second report, on designing VBP arrangements for children's healthcare, can be found <u>here</u>.

PARITY REFORM ENACTED IN NEW YORK

The NYS Budget for 2019-20 includes provisions, entitled Behavioral Health Insurance Parity Reforms (BHIPR), to enhance parity for New Yorkers with mental health conditions, SUD and autism spectrum disorders. Please visit here for further information.

NYS ENACTED BUDGET 2019 - 2020 (Courtesy of Sachs Policy Group)

On April 1, the State Budget for State Fiscal Year (SFY) 2020 was passed. The budget calls for \$102.1 billion in state operating funds. Behavioral Health Provisions include:

OMH

- Allocates \$60M for public or nonprofit agencies to construct, rehabilitate, or acquire new facilities and/or relocate existing community mental health facilities.
- Extends OMH's authority to recoup Medicaid exempt income from community residences and family-

March 2019 Vol. 14

based treatment providers through June 2022.

COORDINATED BEHAVIORAL

ARE

- Extends authority to certify mental health special needs plans through March 2025.
- Increases the block grant for community health mental services from \$23.5M to \$32.5M.
- Continues limited funding for minimum wage increases (\$8.4M, from \$6.6M) and reduced funding for direct care salary increases (\$1.2M, from \$31.6M).

OASAS

- Adds an additional \$1 million for jailbased SUD treatment services.
- Increases the OASAS local assistance account by \$28M and splits it into two allocations:
 - \$69.1M for prevention and program support; and
 - \$34.6M dedicated to recovery services, including housing.
- Makes permanent \$1.5M in funding to support newly created substance use disorder and mental health ombudsman program, a joint effort between OASAS and OMH, to help patients navigate the behavioral health care system.
- Reduces the overall OASAS capital budget to \$90M (from \$10M).
- Continues limited funding for minimum wage increases (\$6.M, from \$7.M) and reduced funding for direct care salary increases (\$700,000, from \$10.3M).

OPIOID CRISIS

- Imposes an excise tax on the sale of opioids with the following rates:
- \$0.025 per morphine milligram equivalent where the wholesale acquisition cost is less than \$0.50; or
- \circ \$0.015 per morphine milligram equivalent where the whole sale acquisition cost is \$0.50 or more.

- Provides \$4.75M to support MAT in local jails and uses federal funds to expand MAT to three additional Department of Corrections and Community Supervision facilities.
- Enacts the following Behavioral Health Insurance Parity Reforms to ensure that New Yorkers suffering from Mental Health and Substance Use Disorders (SUDs) are not restricted from accessing health insurance benefits:
- Prohibits denial of medically necessary care;
- Prohibits concurrent utilization review during the first 28 days of inpatient admission;
- Requires facilities to provide patients and insurers with a written discharge plan to describe arrangements for additional services and to indicate to the insurer whether services are secured or determined to be reasonably available;
- Eliminates prior authorization for buprenorphine and other medication-assisted treatment (MAT);
- Requires insurers to provide outpatient coverage for the diagnosis and treatment of SUDs at OASAS-licensed/certified facilities;
- Requires insurers to cover Naloxone;
- Prevents large group policies from imposing copayments or coinsurance for outpatient SUD services that exceed the copayment or coinsurance fee of a primary care visit;
- Prohibits multiple copayments for services provided in a single day by an OASAS licensed facility;
- Requires emergency departments of general hospitals to include medication-assistant treatment (MAT), including buprenorphine, in

treatment protocols or referral protocols; and

 Requires MCOs to cover courtordered treatment at OASASlicensed/certified programs.

OFFICE OF CHILDREN AND FAMILY SERVICES (OCFS)

- Authorizes OCFS to appoint a temporary operator for foster care agencies that are unable or unwilling to ensure proper operation of their program.
- Provides a \$3.6M increase (to \$10.6M) in funds for post-adoption services that help avoid foster care placements.
- Provides an additional \$500Kfor the provision of eligible services to runaway and homeless youth by a local governmental unit.

OPPORTUNITIES

RFP: BEACON COMMUNITY CENTER

SAMHSA NYC DYCD released an <u>RFP</u> for a Beacon Community Center at Harry S. Truman High School in the Bronx. The NFP selected should provide program activities for multiple age groups and services for the community district. Proposals are due April 24th; questions may be submitted with subject line "Beacon Truman RFP" by April 12th to by emailing <u>rfpquestions@dycd.nyc.gov</u>.

RFP: SAMHSA SUPPORTED EMPLOYEMENT PROGRAM

SAMHSA released an <u>RFP</u>, due Friday May 17, 2019 to implement evidence based supported employment programs. Financing is up to \$800,000 across seven awards. The goal of this grant is to improve employment outcomes; the target population is transition – aged youth with SED and adults with SMI/SUD.