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Children's Health Home Transitional Billing Process

January 16, 2019

Introduction and Housekeeping

- Slides and recording will be posted to ctacny.org
- Please submit questions via the chat.
- Reminder: Information and timelines are current as of the date of this webinar.



Agenda

- Timeline
- Transitional Rate Overview
- Billing Overview
- Transitional Rate Codes/Rates
- Billing Examples
- Q&A – Submit your questions via the chat



Timeline



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Timeline for Key Activities

	Time Period
Children enrolled in 1915(c) waivers will transition to Health Home Care Management	January 1, 2019 – March 31, 2019
Phase 1 of Transitional Rate	January 1, 2019 – June 30, 2019
Phase 2 of Transitional Rate	July 1, 2019 – December 31, 2019
Phase 3 of Transitional Rate	January 1, 2020 – June 30, 2020
Phase 4 of Transitional Rate	July 1, 2020 – December 31, 2020
Transitional Rate no longer billed	January 1, 2021



Transitional Rate Overview



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Transitional Rate Overview

- The Health Home Transitional Rates were designed to help OMH SED Waiver and OCFS B2H Waiver 1915(c) Care Management providers transition down to the Health Home rate
- The transitional rates do not apply to other 1915c transitioning waivers of DOH or OPWDD Care at Home
- If a provider manages multiple waivers, only children transitioning from the OMH SED Waiver or the OCFS B2H Waiver transitioning to Health Home care management services count towards a transitional rate

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Transitional Rate Overview

- Transitional rates are effective for two years, 1/1/2019 – 12/31/2020. Beginning 1/1/2021, only the health home rate codes will be used and the transitional rate codes will be set to zero.
- Transitional Rates step down gradually to the Health Home rates using four phases (see slide 5). This gradual decline will assist providers with maintaining fiscal viability during the transition period.
- Transitional rates are not attached to specific children, but rather to the approved number of transitional rate slots.
- In the coming weeks, providers will receive a letter from the Department of Health indicating the number of potential transitional rate slots the provider will be able to bill monthly.

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Date of Service for Billing

- Currently, OCFS B2H HCI is billed using the first day of the following month as the claim's date of service (DOS). For example, if HCI services are provided in January, the HCI claim will use a Feb 1 DOS.
- Currently, OMH SED ICC is billed using the last day of the month as the DOS. For example, if ICC services are provided in January, the ICC claim will use a Jan 31 DOS.
- Health Homes bill using on the first day of the month as the date of service (for service provided during that month). For example, if the HH provides services during January, the DOS on the claim will be Jan 1.
- The transitional rates will be billed using the same billing rules as Health Home. When Health Home services are provided in January, the care mgt agency will bill the transitional rate with a Jan 1 DOS.



Date of Service – Billing Examples

- **Scenario:** A waiver child moves to Health Home in January and receives the necessary Health Home core services to allow for Health Home billing on January 15th.
- The Health Home bills with a **January 1 date of service** (high, med, or low – based on CANS-NY acuity).
- The waiver case mgt provider has the discretion to determine which of their January Health Home children will receive the transitional rate. They bill the transitional rate for that child, based on the level of Health Home that was billed for the child (high, med, or low – based on CANS-NY acuity), with a **January 1 date of service**.
- There is no waiver case mgt claim attributable to January, however, if the child received B2H HCI case mgt in December, the case mgt provider will bill December's B2H case mgt with a January 1 date of service.
- If the child received OMH SED ICC case mgt in December, that service is billed with a December 31 date of service.



Billing Overview



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Billing Overview

- In instances where 1915(c) Care Management providers have converted to (or become part of) a Health Home, the Health Home will bill the Health Home rate codes (high, medium, low based on the child's CANS-NY acuity) and the former HCI/ICC provider (under their existing waiver provider ID) will also submit a supplemental claim to Fee-for-Service (FFS) for the transitional rate code that coincides with the Health Home rate code.
 - Note: The transitional rate code may only be billed when the HH core requirements have been met.
- Transitional rate codes are carved-out of managed care and always billed FFS, even if the child has Medicaid managed care.
 - Rates will be loaded to eMedNY using the current 1915(c) provider information (e.g., NPI, zip+4)
- Transitional rate codes will be billed using the first day of the service month as the date of service
 - This is the same date used for Health Home claiming
- Providers will use procedure code T2022 (Case Management, per month) on claims



Billing Overview – Waiver Providers

- Provider transitional rates are regional (downstate/upstate)
 - Transitional rates will match the Health Home region
 - Downstate – New York City, Nassau, Suffolk, Dutchess, Rockland, Westchester, Putnam and Orange
 - Upstate – all other counties
- **Note: The Health Home downstate region includes three counties (Dutchess, Putnam, and Orange) that are considered upstate for the B2H and SED Waivers.**
 - **During Phase 1, the three counties will have a separate transitional rate (see Slide 15-16)**
 - **After Phase 1, the three counties will receive the downstate transitional rate**



Transitional Rate Codes and Rates



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Health Home Transition Rates (SED Providers)

Health Home			1915c SED			
Upstate	Downstate		Upstate	Downstate		
1864: Low	\$225.00	\$240.00	SED	\$1,173.00	\$1,232.00	
1865: Medium	\$450.00	\$479.00				
1866: High	\$750.00	\$799.00				
Health Home			Transitional Rate			
January 1, 2019 through June 30, 2019						
Upstate	Downstate		Orange, Putnam, Dutchess*	Upstate	Downstate	
1864: Low	\$225.00	\$240.00	7926: SED (L)	\$933.00	\$948.00	\$992.00
1865: Medium	\$450.00	\$479.00	7925: SED (M)	\$694.00	\$723.00	\$753.00
1866: High	\$750.00	\$799.00	7924: SED (H)	\$374.00	\$423.00	\$433.00
July 1, 2019 through December 31, 2019						
1864: Low	\$225.00	\$240.00	7926: SED (L)		\$711.00	\$744.00
1865: Medium	\$450.00	\$479.00	7925: SED (M)		\$542.00	\$565.00
1866: High	\$750.00	\$799.00	7924: SED (H)		\$317.00	\$325.00
January 1, 2020 through June 30, 2020						
1864: Low	\$225.00	\$240.00	7926: SED (L)		\$474.00	\$496.00
1865: Medium	\$450.00	\$479.00	7925: SED (M)		\$362.00	\$377.00
1866: High	\$750.00	\$799.00	7924: SED (H)		\$212.00	\$217.00
July 1, 2020 through December 31, 2020						
1864: Low	\$225.00	\$240.00	7926: SED (L)		\$237.00	\$248.00
1865: Medium	\$450.00	\$479.00	7925: SED (M)		\$181.00	\$188.00
1866: High	\$750.00	\$799.00	7924: SED (H)		\$106.00	\$108.00

* Orange, Putnam, and Dutchess Counties will receive Downstate rate effective July 1, 2019



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Health Home Transition Rates (B2H Providers)

Health Home			1915c B2H				
Upstate	Downstate				Upstate	Downstate	
1864: Low	\$225.00	\$240.00			B2H	\$1,150.00	\$1,200.00
1865: Medium	\$450.00	\$479.00					
1866: High	\$750.00	\$799.00					
Health Home			Transitional Rate				
January 1, 2019 through June 30, 2019							
Upstate	Downstate		Orange, Putnam, Dutchess*		Upstate	Downstate	
1864: Low	\$225.00	\$240.00	8002: B2H (L)	\$910.00	\$925.00	\$960.00	
1865: Medium	\$450.00	\$479.00	8001: B2H (M)	\$671.00	\$700.00	\$721.00	
1866: High	\$750.00	\$799.00	8000: B2H (H)	\$351.00	\$400.00	\$401.00	
July 1, 2019 through December 31, 2019							
1864: Low	\$225.00	\$240.00	8002: B2H (L)		\$694.00	\$720.00	
1865: Medium	\$450.00	\$479.00	8001: B2H (M)		\$525.00	\$541.00	
1866: High	\$750.00	\$799.00	8000: B2H (H)		\$300.00	\$301.00	
January 1, 2020 through June 30, 2020							
1864: Low	\$225.00	\$240.00	8002: B2H (L)		\$463.00	\$480.00	
1865: Medium	\$450.00	\$479.00	8001: B2H (M)		\$350.00	\$361.00	
1866: High	\$750.00	\$799.00	8000: B2H (H)		\$200.00	\$201.00	
July 1, 2020 through December 31, 2020							
1864: Low	\$225.00	\$240.00	8002: B2H (L)		\$231.00	\$240.00	
1865: Medium	\$450.00	\$479.00	8001: B2H (M)		\$175.00	\$180.00	
1866: High	\$750.00	\$799.00	8000: B2H (H)		\$100.00	\$100.00	

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Billing Examples



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Transitional Rate Application Example 1

Illustrative examples for the application of Transitional Billing

- In April 2019, Provider A has 15 children enrolled in HH. All 15 children have a HH claim due to meeting the HH monthly core requirements. Only 10 potential transitional rates can be billed for the month of April (Provider A was allocated 10 transitional rate slots)
- After 3 months, the Provider A now has 18 children enrolled in Health Home meeting the HH monthly core requirements. The provider can still only bill 10 transitional rates based on their allocated number of transitional rate slots.

HH



15



18



Transitional



10

High: 3
Medium: 4
Low: 3

*In either scenario, the provider has the discretion to determine which of their eligible children will receive the transitional rate.



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High: 2
Medium: 4
Low: 4

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Transitional Rate Application Example 2

Illustrative examples for the application of Transitional Billing

- In August 2019, Provider A has 10 children enrolled in HH. All 10 children have a HH claim due to meeting the HH monthly core requirements. All 10 potential transitional rates can be billed for the month of August based on the providers allocated number of transitional rate slots.
- After 3 months, Provider A's enrollment has decreased to 9 children who meet the HH monthly core requirements. The provider can only bill 9 transitional rate slots this month.

HH



10



9



Transitional



10

High: 2
Medium: 4
Low: 4

*In either scenario, the provider has the discretion to determine which of their eligible children will receive the transitional rate.



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High: 3
Medium: 3
Low: 3

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Monitoring



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Monitoring

- The Department of Health will monitor transitional rate code billing by running Health Home acuity monthly billing against the monthly transitional rate billing.
- This information will be compared against the number of monthly transitional rates allotted to each provider in the January 2019 letter.





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Resources & Links



Where to Submit Questions and Complaints

Questions and complaints related to billing, payment, or claims should be directed as follows:

- Specific to Health Home
HHSC@health.ny.gov
- Specific to OMH SED Waiver
DCFS@omh.ny.gov
- Program Specific to OCFS B2H Waiver
OCFS-managed-care@ocfs.ny.gov
- General provider enrollment questions:
providerenrollment@health.ny.gov



Additional Resources

RESOURCES TO STAY INFORMED:

- Subscribe to children's managed care listserv
<http://www.omh.ny.gov/omhweb/childservice/>
- Subscribe to DOH Health Home listserv
http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/listserv.htm
- Health Home Bureau Mail Log (BML)
https://apps.health.ny.gov/pubdoh/health_care/medicaid/program/medicaid_health_homes/emailHealthHome.action

