



**SDE and Adult BH HCBS Quality/Infrastructure Funds:
Increasing Access and Utilization for Adult BH HCBS
Presentation Questions and Answers**

Questions	Answers
<p>Can we get breakdown by MCO of how much money each is receiving in Infrastructure funds?</p>	<p>The State will not provide this information because the distribution of funds is based on each MCO’s HARP enrollment, which fluctuates at any given point of time. MCOs with higher HARP enrollment will receive more BH HCBS Infrastructure funds.</p> <p>Talk with MCOs you are interested in submitting a proposal to about how much they may be able to allocate in certain counties or for specific services.</p> <p>You can also refer to the MCTAC Plan Matrix to determine which MCOs are active in each county, or the DOH website to see monthly HARP enrollment reports by county and MCO. https://www.health.ny.gov/health_care/managed_care/reports/enrollment/monthly/</p>
<p>Are Infrastructure funds divided regionally?</p>	<p>No. The BH HCBS Infrastructure funds were given to MCOs to administer and distribute according to the needs of their HARP members to increase access to BH HCBS.</p> <p>Refer to the MCTAC Plan Matrix to see the counties where each MCO operates.</p>
<p>Can multiple MCOs fund a single proposal?</p>	<p>Yes. Multiple MCOs can decide to award Infrastructure funds to the same proposal idea. Providers are not permitted to accept duplicate funding for the same expense, and are therefore required to sign an attestation form and provide detailed budgets and cost allocations as part of their proposals.</p>
<p>Can an MCO amend BH HCBS Infrastructure Funds Proposal Application?</p>	<p>The MCO may choose to require additional forms or information.</p>
<p>Can MCOs work together to respond to one Infrastructure funds proposal?</p>	<p>This is at the discretion of each MCO.</p>
<p>Can a provider contact MCOs for Infrastructure funds if they don’t have a contract with that MCO?</p>	<p>If you are an eligible provider (see BH HCBS Infrastructure guidance), contact an MCO to determine their process to participate in the BH HCBS Infrastructure program.</p>

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<p>It was suggested that we divide the budget between MCOs if one proposal was submitted to multiple MCOs. What happens if one of the MCOs does not accept the proposal, can we charge the full amount to the remaining MCO?</p>	<p>Infrastructure funds will be distributed via contract with awarding MCOs. Any changes to proposals/contracts must be agreed upon by both parties.</p>
<p>By when do the funds need to be spent/used?</p>	<p>BH HCBS Infrastructure funds must be contracted by March 31st, 2019 and spent by March 31, 2020.</p>
<p>Can I use Infrastructure funds with a State Designated Entity (SDE) or Recovery Coordination Agency (RCA)?</p>	<p>Contracted Recovery Coordination Agencies are an eligible provider type for Infrastructure funds.</p>
<p>Can a Recovery Coordination Agency (RCA) refer to themselves for HCBS services? Does a RCA need to have same conflict free arrangement as Health Home?</p>	<p>The Recovery Coordination Agency is held to the same conflict-free arrangement as Health Homes. See the RCA guidance (below) regarding conflict-free case management rules for referrals to HCBS.</p> <p>Policy for Improving Access to Adult Behavioral Health Home and Community Based Services (BH HCBS) for HARP and HARP-Eligible HIV Special Needs Plan Members Not Enrolled in Health Homes: https://www.omh.ny.gov/omhweb/bho/final_sde_guidance.pdf</p>
<p>Who provides on-going case management in a Recovery Coordination arrangement?</p>	<p>Services provided by an Recovery Coordination Agency (RCA) are specific to the assessment and linkage to HCBS. If an individual is receiving Recovery Coordination services and requires comprehensive care management, they should be referred to a Health Home.</p> <p>It is NYS's intention that the RCA can help facilitate engagement in comprehensive care management through the Health Home.</p> <p>Recovery Coordinators will educate HARP members about the benefits of Health Home services including ongoing coordination of BH HCBS, encourage enrollment in Health Home, and if interested (and with the member's consent), refer to or upward enroll the member in the Health Home. See the RCA guidance (below) for more information.</p> <p>Policy for Improving Access to Adult Behavioral Health Home and Community Based Services (BH HCBS) for HARP and HARP-Eligible HIV Special Needs Plan Members Not Enrolled in Health Homes: https://www.omh.ny.gov/omhweb/bho/final_sde_guidance.pdf</p>

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How will a Recovery Coordination Agency know when the plan of care needs to be updated?	The MCO is responsible to coordinate the plan of care activities with their Recovery Coordination network.
If an individual decided to enroll in the Health Home after working with a Recovery Coordination Agency (RCA), can the same individual under RCA be the Health Home Care Coordinator under Health Home?	The State does not prohibit the Recovery Coordinator from functioning as a Health Home Care Manager once an individual enrolls in a Health Home. Recovery Coordinators should discuss these transitions with contracted MCOs.
If someone chooses to dis-enroll from a Health Home, would a Recovery Coordination Agency (RCA) pick up the case at that point? If yes, can it be the same Health Home case manager if the agency is contracted as RCA with the MCO?	<p>The Health Home Care Manager is responsible for notifying the MCO when an individual chooses to dis-enroll from a Health Home. The MCO is responsible for ensuring continuity of HCBS. See the RCA guidance for more information.</p> <p>The State does not prohibit the Health Home Care Manager from functioning as a Recovery Coordinator once an individual dis-enrolls in a Health Home. Health Home Care Managers should discuss these transitions with contracted MCOs.</p> <p>Policy for Improving Access to Adult Behavioral Health Home and Community Based Services (BH HCBS) for HARP and HARP-Eligible HIV Special Needs Plan Members Not Enrolled in Health Homes: https://www.omh.ny.gov/omhweb/bho/final_sde_guidance.pdf</p>
Can Peers provide assessments as a Recovery Coordinator?	<p>If the individual meets the requirements outlined in the Recovery Coordination Agency (RCA) policy they can provide HCBS assessments.</p> <p>Policy for Improving Access to Adult Behavioral Health Home and Community Based Services (BH HCBS) for HARP and HARP-Eligible HIV Special Needs Plan Members Not Enrolled in Health Homes: https://www.omh.ny.gov/omhweb/bho/final_sde_guidance.pdf</p>
Can the MCO take back money if the provider is ultimately unable to sustain financially?	Infrastructure funds will be awarded based on the contractually agreed upon proposal base award and meeting future milestone metrics.
Are there any caps on Infrastructure fund awards to providers?	No. The MCOs have discretion to fund Infrastructure awards that help increase HARP member access to BH HCBS.

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Is there a Quality Incentive limit per member for Crisis Respite during the measurement period?	Yes. The \$700 Quality award is only paid to an MCO for a new recipient. A new recipient is someone who has not had a service within the past six months.
How are the Quality Incentive funds paid to MCOs?	The funding is included in both the HARP October 2017- March 2018 premium, and the April 2018-March 2019 premium.

Resources:

MCTAC Plan Matrix: <https://matrix.ctacny.org/>

Adult BH HCBS Quality/Infrastructure Program Guidance:
https://www.omh.ny.gov/omhweb/bho/infrastructure_program_guidance.pdf

Recovery Coordination Agency (State Designated Entity) - Policy for Improving Access to Adult Behavioral Health Home and Community Based Services (BH HCBS) for HARP and HARP-Eligible HIV Special Needs Plan Members Not Enrolled in Health Homes:
https://www.omh.ny.gov/omhweb/bho/final_sde_guidance.pdf