



Office of Mental Health | Office of Addiction Services and Supports

To: Adult Behavioral Health Home and Community Based Services (BH HCBS) Designated Providers, Medicaid Managed Care Organizations (MMCOs)
From: NYS Office of Mental Health (OMH) and Office of Addiction Services and Supports (OASAS)
Date: 12/19/2019
CC: NYS Conference of Local Mental Hygiene Directors (CLMHD)

Memo regarding Adult BH HCBS Designation and Expansion Requests

Adult BH HCBS providers are designated by the NYS OMH and OASAS to provide an array of services for eligible Health and Recovery Plan (HARP) members. Agencies are designated after attesting to specific criteria and are subject to the [Terms and Conditions for Adult BH HCBS Providers](#). Designations are granted by Agency, Service Type and County or Counties served. The [New York City and Rest-of-State designation lists](#) are posted online and updated on a regular basis

Expansion of Counties Served and Services Provided

Currently designated providers may apply to add new services to their designation and/or to expand to serve additional counties. To do so, the provider must update and resubmit their application via the NYS Adult BH HCBS Application Database (see attached instructions). Upon receipt of an application to add services and/or expand, the appropriate Host Agency (OMH or OASAS) will notify the Director of Community Services (DCS) of the Local Government Unit (LGU) for the county in which you have applied to provide Adult BH HCBS. The LGUs have a responsibility under the Mental Hygiene Law to plan for integrated local services in their counties. In order to effectively plan for local services, the LGUs need to be aware of what services are available and what entity is providing these services. The DCSs may provide feedback to the State at this time. The State will review the updated application and make a determination based on the provider's qualifications, their current designation status, performance as an Adult BH HCBS provider to date, and a local assessment of access for the specific service type. If the request is approved, an updated designation letter will then be sent to the provider and the online designation list will be updated to reflect their current designation status. The provider should then notify their contracted MMCOs to inform them of the change in their designation.

Adult BH HCBS Designation and Medicaid Managed Care Organizations

The State is committed to ensuring access to these critical rehabilitative services and continues to work with designated providers, MMCOs and other stakeholders to monitor access to services. MMCOs are required to have an adequate network of designated Adult BH HCBS providers or pay out-of-network providers. MMCOs provide in-network lists of designated Adult BH HCBS providers to care managers/ recovery coordinators or members as a part of the [Adult BH HCBS Workflow](#). Adult BH HCBS providers are designated by county and can only provide services within those counties. MMCOs should be directing members to available designated Adult BH HCBS providers, including out of network designated providers where the MMCO's contracted providers are unavailable or unable to meet the member's needs. If there are counties that appear to lack an adequate number of Adult BH HCBS providers to serve an MMCO's members, please contact the State via OMH's [BHO mailbox](#).

If there are any questions regarding Adult BH HCBS Provider Designation, please contact OMH via the [Adult BH HCBS mailbox](#) or OASAS via the [PICM mailbox](#).

Attachment: Instructions for Updating Adult BH HCBS Application

To request an the addition of new services provided and/or an expansion of counties served, you will need to update your online application with the new service(s) and/or site information.

If you have an OMH user ID and password, you can access the application online at: <https://my.omh.ny.gov/hcbs/default.aspx>. If you do not have an OMH user ID and password, you will need to request one from your agency's security manager. If you do not know who your agency's security manager is, we can look that information up for you.

When you are ready to enter new information in your application, you'll need to send a request via the [Adult BH HCBS mailbox](#) at OMH to have the application unlocked for edits. (Note: Do not leave your application unlocked for longer than necessary, as unlocked applications are not captured on the designation list online.) Once in the application, please follow these steps:

1. Read through the [Application Guide](#).
2. Sign in using your OMH user ID and password.
3. If you are adding a new service, you will need to check the boxes under Agency Information for the services you are applying to add.
4. Go to the Service Information tab and use the drop-down box to select each service individually and update service and site information.
5. If you intend to provide services in a county, but do not have a physical site in that county, you will still need to enter site information. You can enter "Home and Community Based Locations [County Name]" as the site name. Enter "Home and Community Based locations" as the Address. Enter a *valid* city and zip code for that county.
6. For all sites added, you must attest to compliance with the CMS Final Rule. You do this by checking a box under the site information entered. (Please take a moment to ensure this box is checked for any other sites already listed on your application.)
7. Once you have added the additional sites and/or services, you will need to go to the Attestation Statement tab and check the box for "final submission."
8. Save all changes, then click "submit" on the Attestation Statement tab. This will automatically send a notification to the OMH Bureau of Rehabilitation Services and Care Coordination that the updated application is complete.