

Assisting Health and Recovery Plan (HARP) Eligible Individuals Enroll in a HARP

For Consumers/Recipients, Behavioral Health Providers, Health Home Care Managers, and Consumer Advocates

What is a HARP?

A HARP is a Medicaid managed care insurance plan that manages physical health and behavioral health (mental health and addiction) services in an integrated way for adults with significant behavioral health needs. HARPs also manage an enhanced benefit package of [Adult Behavioral Health Home and Community-Based Services \(BH HCBS\)](#) and [Community Oriented Recovery and Empowerment \(CORE\) Services](#) for eligible enrollees. Adult BH HCBS and CORE Services are rehabilitative and recovery services provided in a member's home or community. Additionally, all HARP members are eligible for Health Home Case Management. Information about health homes can be found at the [Medicaid Health Homes – Comprehensive Care Management](#) webpage.

HARP Eligibility

Providers should verify Medicaid eligibility and enrollment status as a first step to verifying HARP eligibility.

- HARP eligibility is based on certain factors, such as past use of Medicaid behavioral health services and eligibility to enroll in Medicaid managed care.
- Every other month, New York State (NYS) generates an updated list of people who are eligible for HARP.
- HARP eligibility status appears in [e-PACES](#) on an individual's file in the restriction/exception (RRE) code part of the report.¹ Individuals can ask their providers to look up their eligibility status or they can call New York Medicaid Choice at 1-855-789-4277; TTY users: 1-888-329-1541.
- HARP eligibility and enrollment status is indicated using RRE codes that begin with the letter "H".
 - If the individual's e-PACES report has an RRE "H9" code, then the person has met the NYS BH high-risk criteria needed to enroll in HARP.
 - If the individual's e-PACES report has an RRE "H1" code, then the person is enrolled in a HARP.

¹HARP eligibility status may also be found in MAPP, PSYCKES, and eMedNY.

Reasons why a HARP-eligible person may not be enrolled in a HARP

A HARP-eligible individual may not currently be enrolled in a HARP (H1) for the following reasons:

- The individual is HIV-SNP enrolled. HIV-SNP enrollees are able to access Adult BH HCBS and CORE Services if they have an RRE “H9” code.
- The individual is enrolled in a Medicaid Advantage Plus (MAP) plan and not eligible to enroll in a HARP. MAP enrollees are able to access CORE services if they have an RRE “H9” code.
- HARP enrollment may be pending and will become effective at a future date.
- The individual previously chose **not** to enroll in a HARP, otherwise known as “opting-out” of HARP enrollment.
- The individual’s address has not been updated with Medicaid, causing HARP enrollment notices sent by NYS to be returned.
- The individual was disenrolled from HARP upon losing Medicaid eligibility, possibly due to failure to recertify. Note that an individual in this circumstance must first contact the [Local Department of Social Services \(LDSS\)](#) or enroll online through the [New York State of Health](#)² to reestablish Medicaid coverage in order to enroll or reenroll in HARP.

Whenever possible, individuals should be assisted in maintaining Medicaid eligibility through timely recertification to avoid loss of Medicaid coverage and HARP enrollment.

HARP Enrollment Process

HARP enrollment is conducted by New York Medicaid Choice and New York State of Health (NYSOH). The individual will need to have the following information when calling to request HARP enrollment:

- Medicaid Client Identification Number (CIN) or Social Security Number (SSN)
- Full name
- Date of birth
- Home address and telephone number

Eligible individuals may choose to enroll in a HARP at any time, even if the individual previously chose to opt-out or never received an enrollment notice. HARP enrollment is voluntary. Eligible individuals may contact New York Medicaid Choice to learn about available enrollment options.

² New York State of Health (NYSOH) is New York’s online Medicaid application website, commonly referred to as the Marketplace.

To determine HARP eligibility and assist with HARP enrollment:

1. Check e-PACES.
 - Verify the Medicaid case has an RRE H9 code. If the case does not have an RRE H9 code, the individual is not eligible to enroll in a HARP.
 - Confirm the individual is not already enrolled in an HIV-SNP or MAP plan.
2. If the Medicaid case has an RRE H9 code, the individual should contact New York Medicaid Choice or NYSOH to elect HARP enrollment. The provider and/or the individual's representative may assist the individual in contacting New York Medicaid Choice or NYSOH. The individual must be present on the call and specifically request enrollment in the HARP.
3. New York Medicaid Choice or NYSOH will work with the individual to determine the plan of choice and activate HARP enrollment. New York Medicaid Choice or NYSOH will notify the individual of the effective date of the HARP enrollment.
4. Alternatively, individuals enrolled through NYSOH can enroll online through the [NYS Marketplace](#). If eligible for HARP, HARPs will display as the first enrollment option.

Resources

[New York Medicaid Choice \(NYMC\)](#)

1-855-789-4277; TTY: 1-888-329-1541

NYMC is the State's Medicaid managed care plan enrollment broker. NYMC is available to assist individuals with plan enrollment. Individuals who have questions about HARP eligibility and how to enroll, or who require additional information about how a HARP may be beneficial, may call the above number for assistance. NYMC counselors are available to assist in all languages. Individuals may ask a representative or someone they trust to help when calling NYMC. NYMC staff are trained to assist individuals and the individual's provider or other representative who are seeking information regarding HARP enrollment options.

[New York State of Health \(NYSOH\)](#)

1-855-355-5777; TTY: 1-800-662-1220

NYSOH is New York's online health insurance application website, also referred to as the Marketplace. NYSOH has [Assistors](#) that can help New Yorkers apply for health insurance (including Medicaid), understand their coverage options, and enroll in a plan that is right for them.



[Independent Consumer Advocacy Network \(ICAN\)](#)

1-844-614-8800/ ican@cssny.org

ICAN is the NYS Ombudsman Program for people with Medicaid who need long term care services or behavioral health services. Individuals or their representatives can contact the **Independent Consumer Advocacy Network (ICAN)**, which provides free, confidential help to individuals who are eligible for or enrolled in HARP. ICAN can help individuals decide whether HARP is right for them, answer their questions about their benefits, provide advice and information, and advocate for them in the appeals process.

H Code Reference Table

| H Code | HARP and HIV SNP Recipient Restriction Exception (RRE) Codes |
|---------------|---------------------------------------------------------------------|
| H1 | HARP Enrolled |
| H2 | Tier 1 BH HCBS Eligible |
| H3 | Tier 2 BH HCBS Eligible |
| H4 | HIV SNP Enrolled, BH High-Risk |
| H5 | HIV SNP, Tier 1 BH HCBS Eligible |
| H6 | HIV SNP, Tier 2 BH HCBS Eligible |
| H9 | BH High-Risk/ HARP Eligible |

Please contact [OMH Managed Care](#) with any questions, comments, or problems you may be experiencing with this site. If you would like to file a complaint about behavioral health managed care, please visit the [Information on Filing a Complaint Page](#). Providers, if you have any questions about the managed care implementation, please complete and send a [question form](#).