

## January 2020

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## System Transformation continues in 2020

### **Two New Children and Family Treatment and Support Services (CFTSS) Available as of January 1, 2020!**

Access to Youth Peer Support and Training (YPST) and Crisis Intervention (CI) was expanded on January 1, 2020 when these services became CFTSS. The services are now available to all children on Medicaid who meet medical necessity.

### **CFTSS Provider Resources:**

[MCTAC Children's System Transformation Technical Assistance Page](#)

[MCTAC Managed Care Organization Plan Matrix](#)

[Billing Guidance](#) | [Provider Manual](#) | [Medical Necessity Criteria](#) | [Utilization Management Guidelines](#)

[Youth Peer Support and Training Rates](#) | [Crisis Intervention Rates](#)

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## **Health and Recovery Plan (HARP) on the New York State of Health (NYSOH)**

**Members who do not recertify will be disenrolled from Medicaid.** As a reminder, Medicaid recipients who meet the Modified Adjusted Gross Income criteria, and are not otherwise excluded from being enrolled on the NYSOH will now need to recertify their Medicaid enrollment online through the NYSOH. Members can receive in-person enrollment assistance from an Enrollment Navigator, available through the NYSOH at: <https://nystateofhealth.ny.gov/>. MCTAC has posted a [PowerPoint presentation](#) that informs case managers of steps they can take to assist HARP members in this process.

A message has been added to the Clinical Summary in the Psychiatric Services and Clinical Knowledge Enhancement System (PSYCKES) indicating if a member will need to recertify through the NYSOH. In PSYCKES you can also obtain a list of your clients who need to recertify through the NYSOH within the next month, and those who needed to recertify through the NYSOH but are past due. To obtain your agency's list go to the PSYCKES Recipient Search tab, and in the upper left quadrant under "Characteristics" look for the "Population" drop down for clients transitioning to the NYSOH from the Welfare Management System.

Please call NY Medicaid Choice at 1-855-789-4277 to determine if a member will be required to recertify through the NYSOH.



Questions regarding the transition can be directed to the Department of Health (DOH): [TransitionToNYSOH@health.ny.gov](mailto:TransitionToNYSOH@health.ny.gov) and/or the Office of Mental Health (OMH): [OMH-Managed-Care@omh.ny.gov](mailto:OMH-Managed-Care@omh.ny.gov).

## Changes to Billing for Mobile Crisis Intervention Services for Individuals Under 21

**On January 1, 2020, authority for crisis services for children is switching from New York's 1115 Waiver (Medicaid Managed Care) to the Medicaid State Plan (CFTSS).** As of January 1, 2020, CI will be available to all children under 21 as a State Plan service and will follow the definition in the January 9, 2019 CFTSS Provider Manual. New York State (NYS) has temporarily designated all NYS-approved 1115 Waiver CI providers to deliver the CFTSS CI benefit, and effective January 1, 2020, 1115 Waiver CI providers may seek reimbursement for crisis response to children under the CFTSS billing structure linked above. Any 1115 CI providers that have not completed the formal CFTSS designation process must immediately submit a designation application. For children enrolled in Medicaid Managed Care, 1115 Waiver CI providers in temporary designation status are advised to contact the enrollee's Medicaid Managed Care Plan prior to claims submission to avoid administrative billing delays.

Instructions for applying to become a CFTSS CI provider can be found at: [Provider Designation for Children and Family Treatment and Support Services/Home and Community Based Services](#).

In addition to being designated, all CFTSS provider agencies must be enrolled in the Medicaid program. NYS-approved providers who are not Medicaid providers and provide CI services to children, must apply at: [eMedNY Introduction to Provider Enrollment](#).

Any questions related to the CFTSS designation or provider enrollment process should be directed to: [OMH-Childrens-Designation@omh.ny.gov](mailto:OMH-Childrens-Designation@omh.ny.gov).

## Update to NYS Children's Health and Behavioral Health Services Billing and Coding Manual

The NYS Children's Health and Behavioral Health Services Billing and Coding Manual along with a guide to all edits within the manual was updated on October 22, 2019.

[NYS Children's Health and Behavioral Health Services Billing and Coding Manual](#).  
[Guide to NYS Children's Health and Behavioral Health Services Billing and Coding Manual Updates](#).

## Guiding Principles for the Review and Approval of Clinical Review Criteria for Mental Health Services

New provisions included in the 2020 NYS Budget require insurers to use evidence-based and peer reviewed clinical review criteria appropriate to the age of the patient and approved by the OMH when making coverage determinations for mental health treatment. Insurers were required to submit their clinical review criteria to OMH for approval, who will consult with Department of Financial Services and the DOH, by January 1, 2020.

As part of the implementation of these provisions, the NYS OMH released the [Guiding Principles for the Review and Approval of Clinical Review Criteria for Mental Health Services](#), which outline the standards OMH will use to assess the adequacy of an insurer's clinical review criteria for the treatment of mental health conditions.

OMH is currently reviewing clinical review criteria to ensure coverage determinations for mental health services are made in a manner consistent with accepted medical practices and Federal and State behavioral health parity laws.



## Prohibition Against Preauthorization and Concurrent Review During First 14 Days of an Inpatient Admission for a Mental Health Condition for Individuals Under 18

Effective January 1, 2020, insurers are prohibited from requiring preauthorization and concurrent review during the first 14 days of an inpatient psychiatric admission of an individual under the age of 18, when provided by in-state and in-network hospitals.

The hospital must notify the insurer of both the admission and the initial treatment plan within two business days of the patient’s admission. OMH has developed a Notification and Initial Treatment Plan Form (see Addendum A) that should be completed and submitted to the insurer within two business days of the patient’s inpatient admission for mental health treatment.

Link to full guidance: [Prohibition Against Preauthorization and Concurrent Review During First 14 Days of an Inpatient Admission for a Mental Health Condition for Individuals Under 18.](#)

Link: [Addendum A: Two-Day Notification and Initial Treatment Plan – fillable PDF.](#)

For more information on Mental Health and Substance Use Disorder Health Insurance Coverage Parity please visit the [NYS OMH Parity Website.](#)

To receive OMH managed care updates and other communications, please sign up for the [OMH Managed Care listserv.](#)

### NYS Behavioral Health Medicaid Managed Care Contact Information

Office of Mental Health (OMH)  
Office of Addiction Services and Supports (OASAS)  
Department of Health (DOH)

[OMH-Managed-Care@omh.ny.gov](mailto:OMH-Managed-Care@omh.ny.gov)  
[PICM@oasas.ny.gov](mailto:PICM@oasas.ny.gov)  
[managedcarecomplaints@health.ny.gov](mailto:managedcarecomplaints@health.ny.gov)

#### Other Contact Information:

*HARP eligibility and enrollment questions:*

New York Medicaid Choice **1-855-789-4277**  
[New York State of Health](#) **1-855-355-5777**

*Adult BH HCBS questions:*

[Adult-BH-HCBS@omh.ny.gov](mailto:Adult-BH-HCBS@omh.ny.gov)

*Children’s System Transformation questions:*

[BH.Transition@health.ny.gov](mailto:BH.Transition@health.ny.gov)

*Children’s HBCS/CFTSS designation questions:*

[OMH-Childrens-Designation@omh.ny.gov](mailto:OMH-Childrens-Designation@omh.ny.gov)

*Value based payment readiness questions:*

[VBP-Readiness@omh.ny.gov](mailto:VBP-Readiness@omh.ny.gov)