To: OMH Unlicensed Children and Family Treatment and Support Services (CFTSS) Designated Provider (Providers of PSR, FPSS, and/or YPS)

From: New York State Office of Mental Health (OMH)

Re: Policy on NYS OMH Oversight and Monitoring of Unlicensed CFTSS Designated Providers including process for corrective action and termination of designation

Date: May 16, 2022

The intent of this document is to detail the NYS OMH’s policy for oversight and monitoring of Children and Family Treatment and Support Services (CFTSS) providers specifically, those designated to provide Psychosocial Rehabilitation (PSR), Family Peer Support Services (FPSS), and/or Youth Peer Support (YPS); but not licensed for a Children’s Mental Health Rehabilitation Services (CMHRS) program to offer Other Licensed Practitioner (OLP) and Community Psychiatric Support and Treatment. This policy includes the process for corrective action and termination of designation when applicable as well as, a procedure for withdrawing designation at the request of the provider.

NYS OMH Oversight and Monitoring Policy:

Upon receiving designation from The Office (OMH) to provide CFTSS to children and their families with identified mental health needs, providers are subject to oversight by the State.

For agencies operating a CMHRS Program, oversight will be rolled into the licensing recertification process using the CMHRS Program tool. For providers that are not currently licensed via CMHRS – agencies referred to as “Unlicensed CFTSS Agencies” - but are designated by OMH to serve the general mental population for Psychosocial Rehabilitation (PSR), Family Peer Support Services (FPSS), and/or Youth Peer Support (YPS), OMH will use a parallel oversight process to complete monitoring site visits at a minimum frequency of once every 36 months. In addition to these routine monitoring site visits, additional targeted site visits may occur at any time including, in response to a quality complaint or allegation of abuse or neglect.

Site reviews\(^1\) will focus on record review, interviews, supervision and administrative oversight, policies and procedures, and other relevant program elements. Although site reviews can be

\(^1\) Some or all aspects of a site review may be conducted remotely (virtually).
attributed primarily to oversight and due diligence, OMH oversight responsibilities also provide
an opportunity to offer technical assistance and support to programs, as well as offer insight
into systemic operational challenges and program transparency. OMH will track service
deficiencies identified in the review and monitor both provider-level and systemic remediation
activities related to these deficiencies on an annual basis, minimally.

When deficiencies are found, a Statement of Deficiencies (SOD) will be issued. The SOD will
include comments and citations of non-compliance with service requirements. For unlicensed
CFTSS agencies, service requirements may be found in State-issued manuals and guidance
documents including, the CFTSS Provider Manual, Health Record Documentation Guidance,
Designation Attestation, and Unlicensed CFTSS Incident Reporting Guidance. Providers will
be expected to submit a Plan of Corrective Action (POCA) to address citations listed in the
SOD including target dates for implementation. The POCA must be submitted The Office no
later than thirty (30) days after receipt of the SOD. The POCA and any supporting
documentation must be sent to both OMH Central Office at NYS OMH The Division of
Integrated Community Services for Children and Families, ATTN: CFTSS, 44 Holland Ave 6th
FL, Albany NY, 12229, and the OMH Regional Field Office ATTN: Child and Family
Coordinator corresponding with the provider agency’s main office site location. OMH Regional
Field Office contact information can be found at: https://omh.ny.gov/omhweb/aboutomh/fieldoffices.html

The Office reserves the right to request immediate corrective action during a site visit or to
move up the due date for a POCA.

Upon receipt of a POCA, The Office will review the Plan and send notification to the provider of
one of the following:
1. approval of the POCA,
2. request for additional corrective actions, or
3. rejection of the POCA and initiation of sanctions.

Note: when a POCA is approved, The Office may choose to use additional site visits to monitor
compliance with the POCA.

Suspension and Termination of Designation:

A CFTSS provider may be subject to sanctions as a result of findings during a site visit. These
sanctions include suspension or termination of designation for one or more CFTSS designated
services. If a designation is suspended or terminated, the provider must cease admissions to
the affected services. The Office will notify providers through written correspondence of intent
to terminate designation approval. Contracted Managed Care Organizations (MCOs) will also
be notified. The Office reserves the right to initiate sanctions prior to SOD or POCA when there
are substantial concerns.

Per 18 NYCRR Part 511, when termination of designation is initiated, the provider will receive
written notice. The notice will include:

1. which services are impacted by the termination of designation;
2. a timeframe for the termination of designation; and,
3. information necessary to file an appeal.

The standard timeframe for the termination of designation will be 45-60 days, during which time the provider is expected to safely transition any enrolled children/youth currently served or children that may have been placed on a waitlist awaiting enrollment, to another designated provider or level of service.

The provider may request an informal administrative review (appeal) of the termination of designation in writing within 14 days of the date of written notice. The request must state specific reasons why the provider considers the revocation of approval incorrect and must be accompanied by any supporting evidence or arguments. Appeals are written appeals only; there is no right to a hearing. The Office may consult with other applicable state oversight agencies, as needed and relevant, on appeals and issue a final decision within 14 days of receipt of the appeal pending requests for additional information.

A provider whose designation has been terminated may apply for re-designation after it has been determined that the provider has thoroughly corrected the problems which arose during the evaluation process. An on-site and/or desk evaluation may be conducted prior to approving an application for re-designation.

In no event shall The Office be liable for expenses and obligations arising from the services(s) in the Provider’s Designation after the termination date. The Provider shall not submit any claims for payment for services, expenses or obligations incurred after the date of termination of the Provider’s Designation.

**Withdrawing Designation:**

A provider may choose to voluntarily withdraw their designation status for any reason, including a lack of capacity or expertise to provide the services. This process is initiated by the provider and should be based on the ability of the provider to actively deliver the services within a specific geographic area (county).

Procedure for withdrawing designation (initiated by provider):

1. Provider notifies The Office in writing of their intention to withdraw their designation status. This notification must include the anticipated time frame for the withdrawal, specific services, reason for withdrawal and counties and youth affected by the withdrawal.
2. A safe plan of discharge/transition must be developed and shared with The Office.

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2 Designation withdrawal requests should be directed to Provider Designation (OMH-Childrens-Designation@omh.ny.gov) with copy to the Division of Integrated Community Services to Children and Families (dcfs@omh.ny.gov).
3. Upon approval by The Office of provider’s designation withdraw plan, provider notifies contracted MCOs, relevant counties, and referral sources to cease referrals.

4. After all enrolled children/youth are safely discharged/transitioned, the provider will be de-designated for the services requested and removed from the public facing Provider Designation List on the Department of Health Website and OMH’s Find a Program website resource. An updated designation letter will be sent (via email) to the provider indicating “application withdrawn” and the date of the change in status.

5. Provider will send an updated designation letter to contracted MCOs so contract amendments may be made, if necessary.

If The Office becomes aware that a provider is unable to or has not actively been delivering a service(s) for an extended period of time, demonstrated by not accepting referrals or maintaining an extensive waitlist(s), the provider will be contacted to request the current status of that service and a plan to become active or begin withdrawing designation. The provider will have 14 days to respond to The Office. If the provider is unable or unwilling to submit a plan to become active within 90 days, The Office may initiate the procedure for termination of designation (see above).

In no event, shall The Office be liable for expenses and obligations arising from the services(s) in the Provider’s Designation after the date of withdrawal. The Provider shall not submit any claims for payment for services, expenses or obligations incurred after the date of withdrawal of the Provider’s Designation.