

Children’s Health Home of Upstate New York
Policy/Procedure: Referral and Assignment Policy
Reviewed and Accepted by: CHHUNY Clinical Quality Committee
Approved by: CHHUNY Board of Directors
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Policy:

Children’s Health Home of Upstate New York (CHHUNY) will ensure that all referrals for health home services are processed in accordance with New York State Department of Health guidance and regulations to assure the child and family are provided the necessary services within a reasonable timeframe that keep the child and family engaged in the process.

The following procedures will guide CHHUNY in accepting, processing, and assigning referrals that are received.

Procedure for Referrals

A. Indirect vs. Direct Referrals

1. Children in the Foster Care system are identified by the LDSS and/or VFCA as potential health home members, or referrals entered directly into the Medicaid Analytics and Performance Portal (MAPP) by Care Management Agencies (CMA) are considered direct referrals to the health home.
2. Children not involved in the foster care system can be referred for health home services by LGUs, SPOAs, LDSS, Managed Care Plans (MCOs), physicians, emergency departments, community based providers, schools, and family members and are considered indirect referrals to the health home.

B. Methods to submit referrals:

1. MAPP Referral

If the referrer has access to the MAPP portal, the referral should be entered with consent to refer, Medicaid CIN, identification of qualifying conditions, consent information, and parent/guardian affiliation with a health home.

2. CHHUNY Referral Form: Referrals may also be sent via CHHUNY Referral Form. Referral forms may be submitted directly to CHHUNY Care Management Agencies or to CHHUNY. If the CMA wishes to refer the child/youth to a different CMA or does

not have the expertise or experience to serve the member, referrals should be forwarded to CHHUNY directly via secure email or fax.

- a) Care Management Agencies who wish to receive referrals from organizations/providers who cannot access MAPP must first establish secure methods of receiving referrals from these organizations/providers.
- b) The CMA is also responsible for verifying the referral has been completed properly including consent to make the referral. If any items are incomplete, the CMA is responsible for obtaining this information.
- c) The CMA is responsible for entering the referral into MAPP within 2 business days of receipt of the referral. Urgent referrals must be acted upon immediately. If the CMA is unable to meet these timeframes they should forward the referral to CHHUNY via the secure email
- d) Referrals that are sent directly to CHHUNY will be acted upon within 2 business days. Once complete, appropriate referrals will be forwarded to a CMA within 2 business days

C. Assignment of Referral to Health Home:

1. For an LDSS referring a Foster Care child, the LDSS will need to select the VFCA to which the child will be assigned and the VFCA will select the Health Home.
 - a. If the VFCA and LDSS have an agreement in place whereas the VFCA enters the referral into MAPP, then the VFCA would just select the Health Home upon initial entry
2. For a non-foster care child:
 - a. If the child has FFS Medicaid, MAPP will generate a Health Home assignment based on a loyalty algorithm utilizing the health home provider network and consideration for the Health Home recommended by the referring source
3. If the child is enrolled in a Managed Care Plan, the MCP will select the health home with consideration for the recommended health home.
4. If the referring source is the Care Management Agency, the agency will select the Health Home to assign the member to. If it is indicated that the agency is already in contact with the child and family, the CMA should directly enter the child into an Outreach or Enrollment segment if eligibility was confirmed and the appropriate consents are signed and the CMA is qualified to serve the member based on expertise and experience of the qualifying conditions of the potential member. If the CMA is not qualified to serve the potential member, please submit the referral directly to CHHUNY to be assigned to a CMA with the appropriate expertise.
 - a. If the CMA does not have the expertise and experience to serve the chronic conditions but the family/member choose to receive services from the CMA, it must be clearly documented in the enrollment note.

D. CHHUNY Referral/Assignment Review:

1. Completeness review:
 - a. All referrals must contain verification that consent was received to submit the referral to CHHUNY. Both written and verbal consent are acceptable per DOH regulations, but the method of consent must be documented on the referral.
 - b. If sufficient information to make a determination of presumptive eligibility is not received, CHHUNY will contact the referring party for more details.

2. Current health home status is verified through the MAPP system
 - a. If actively connected to another health home, CHHUNY forwards the referral to the other HH to determine the appropriate action, including request to release/transfer as appropriate.
3. CHHUNY will complete its review and make a determination within 2 business days of receipt of a complete referral. Urgent referrals will be acted on immediately upon receipt (i.e. ED and Inpatient referrals)
 - a. If eligibility criteria are met;
 - i. CHHUNY assigns the referral to a Care Management Agency within its network based on the following criteria:
 - a. If a preferred provider is identified in the referral, assignment is made to that agency
 - b. Member chronic/qualifying conditions and agency expertise, experience, specialties such as language, and capacity
 - c. Previous linkage with an agency for other services
 - d. Location of agency in comparison to member location
 - e. Agency responsiveness and compliance with Health Home standards
 - f. Quality of services provided by an agency
 - ii. CHHUNY notifies the referring party that the referral was approved and the CMA that was assigned within 2 business days if contact information is provided.
 - iii. The CMA must accept the active HH assignment in MAPP for the individual's information to be imported into Netsmart CareManager
 - a. If the CMA does not feel confident that they have the experience, expertise, or capacity to serve the member effectively, the CMA should reject the assignment.
 - iv. Any member entered an active segment in MAPP will be imported into Netsmart CareManager.
 - v. The Care Management Agency shall act on assigned referrals in accordance with the timelines established in the CHHUNY Care Management Standards.
 - vi. The Care Management Agency must contact the referral source within 2 business days of assigning a Care Manager for any additional information and to notify the source of assignment.
 - b. If eligibility criteria is not met:
 - i. CHHUNY or the CMA will provide timely notification to the referring party that the referral does not meet the eligibility criteria, with reasons for denial;
 - ii. The referring party is responsible for contacting the individual and notifying them of denial;

- iii. For referrals denied due to lack of Medicaid where a behavioral health condition is noted, CHHUNY or the CMA should submit the referral to the County SPOA.
4. For Foster Care children, CHHUNY is obligated to accept assignment of the referral based on the VFCA/LDSS health home assignment selection.
5. Medicaid eligibility is confirmed through MAPP prior to assignment to a CMA. After assignment is made and accepted by a CMA, the CMA is responsible for checking Medicaid eligibility on an ongoing basis.

E. Notice of Determination:

CHHUNY and/or the CMA will send a Notice of Determination DOH 5236-Denial of Enrollment into the Health Program, if a potential member referred for Health Home services is deemed ineligible during the Referral and Assignment phase for any of the following reasons:

- Ineligible for Medicaid –Medicaid is required for enrollment in Health Homes
- Member has Medicaid coverage type not compatible with Health Home (Emergency Coverage only, Family Planning only, Essential Plan etc.)
- Chronic condition criteria not met
- Member does not meet the appropriateness criteria
- Member currently resides in an excluded setting (Residential Treatment Facility, Nursing Home, Incarceration etc.)
- Member is concurrently enrolled in another Health Home

If the CMA is processing the referral, it is the CMAs responsibility to send the form. If HHUNY received the referral from an external source prior to assignment to CMA, HHUNY will send the form.

Policy Review/Update:

This policy will be reviewed annually and updated as necessary to ensure that its general purposes are being effectively met.