



**Department
of Health**

**Office of
Health Insurance
Programs**

Community First Choice Option (CFCO)

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Meeting Agenda

1. Welcome
2. Roll Call
3. CFCO Plan Responsibility
 - Identification of eligible CFCO members
 - Medicaid eligibility
 - Level of care requirement
 - Residential requirement
4. CFCO and Plan of Care
5. RRE Codes
6. OPWDD
7. CFCO Plan Responsibility
8. Next Steps
9. Adjournment

CFCO Plan Responsibility

Managed Care Organizations (MCO) are required to:

- Evaluate enrollees for CFCO eligibility
- Send file of enrollees eligible for CFCO to New York Medicaid Choice (NYMC)
- Recognize new enrollees who have CF or CO code (already eligible for CFCO)
- For CFCO eligible members, CFCO services should be identified in their plan of care. The plan of care update should be done at the time of the member's next assessment.
- When additional benefits are carved in
 - Assess eligible enrollees' need for CFCO benefits, include in updated plan of care
 - Authorize CFCO services/supports for eligible enrollees pursuant to their plan of care
 - These assessments/authorizations are to be integrated into plan processes for assessment of other Home and Community Based Services / Long Term Support Services (LTSS)

CFCO Plan Responsibility cont.

For both existing and new members, MCOs are responsible for updating their current process to implement the steps needed for all members who qualify. For those who qualify for CFCO services, plans are required to follow the steps outlined below:

- Identify CFCO Eligible Members
 - Initial identification
 - Ongoing identification
- Add/Create CFCO services within the plan of care
- Update file client to reflect correct CFCO RRE Codes

CFCO Medicaid Eligibility Requirement

- The NYSDOH is developing a process to identify consumers who meet the Medicaid eligibility requirement for CFCO.
- At this time, all MCOs will not be responsible for confirming the CFCO Medicaid eligibility requirement.

CFCO LOC and Residential Requirement

MCOs are responsible to determine if the member meets the next two CFCO eligibility criteria:

- Level of Care Requirement
- Residential Requirement

CFCO LOC and Residential Requirement

Level of Care Requirement:

To meet the needs of CFCO eligibility criteria for level of care requirement, a client must have a score of 5 or higher on the UAS community assessment.

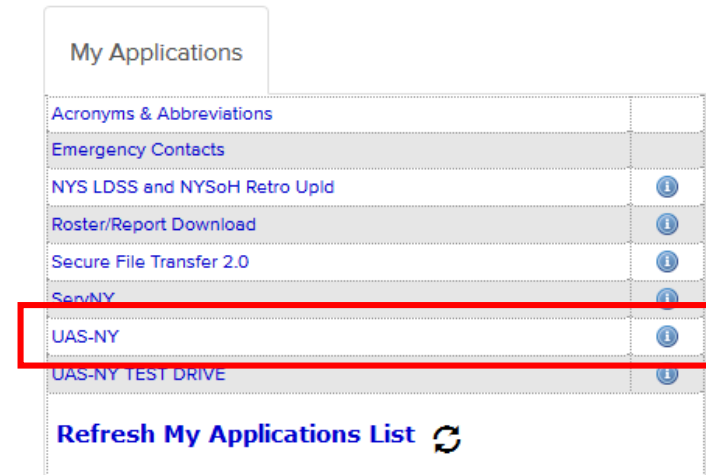
Residential Requirement:

In order to receive CFCO services the individual must reside in their own home or a family member's home.

CFCO Existing Members

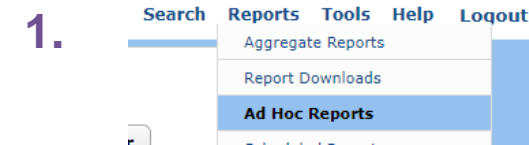
For the implementation of CFCO, MCOs are responsible to review their existing members to determine if they are eligible for CFCO.

- Plans can use UAS-NY Ad Hoc Reports to identify their current enrollees that meet the LOC and residential requirements for CFCO.
- Plans must maintain accurate enrollments in case files in their organization's UAS-NY case list in order to get an accurate report of the LOC score for their membership.

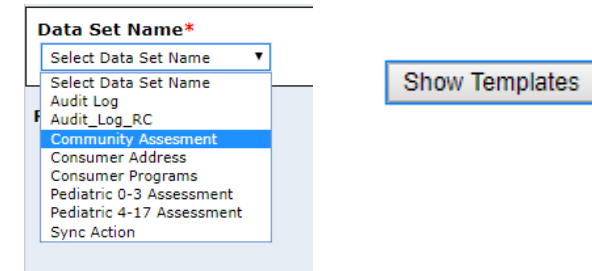


Ad Hoc Report

1. Login to the HCS
2. Login to the UAS-NY
3. Select Ad Hoc Reports
4. Select **Community Assessment** from the dropdown in the **Data Set Name*** field, then click on the **Show Templates** button.
5. Locate the below criteria within the **Field Name** column and select the associated box in the **Include Field in Report** column.
 - Consumer_First_Name
 - Consumer_Date_OF_Birth
 - Medicaid_Number_1
 - O_Nurse_Date (Date assessment was signed)



2.



3.

Field Name	Field Criteria	Field Value	Field Order	Field Caption	Include Field in Report
CONSUMER_FIRST_NAME	<input type="radio"/> Equals <input type="radio"/> Contains <input type="radio"/> Starts With <input type="radio"/> Ends With <input type="radio"/> None		<input type="radio"/> Asc <input type="radio"/> Desc <input type="radio"/> None	consumer_first_name	<input checked="" type="checkbox"/>
CONSUMER_MIDDLE_INITIAL	<input type="radio"/> Equals <input type="radio"/> Contains <input type="radio"/> Starts With <input type="radio"/> Ends With <input type="radio"/> None		<input type="radio"/> Asc <input type="radio"/> Desc <input type="radio"/> None	consumer_middle_initial	<input type="checkbox"/>

Ad Hoc Report cont.

6. Locate the **Consumer_Last_Name** criteria within the **Field Name** column and select the associated box in the **Include Field in Report** column.

Note: Based on size of plan membership field criteria may need to be added in the Field Value column.

Field Name	Field Criteria	Field Value	Field Order	Field Caption	Include Field in Report
CONSUMER_LAST_NAME	<input type="radio"/> Equals <input type="radio"/> Contains <input checked="" type="radio"/> Starts With <input type="radio"/> Ends With <input type="radio"/> None	A	<input type="radio"/> Asc <input type="radio"/> Desc <input type="radio"/> None	consumer_last_name	<input checked="" type="checkbox"/>

Ad Hoc Report cont.

7. Locate the **Assessment_Date** criteria within the **Field Name** column and select the associated box in the **Include Field in Report** column.
 8. In the **Field Criteria** column select **After** and enter *10/01/2017* in the **Field Value**.
- Note: The 10/01/2017 date is only to locate members who had a assessment in the past six months. **The implementation date for RRE code cannot be prior to 04/01/2018.**

Field Name	Field Criteria	Field Value	Field Order	Field Caption	Include Field in Report
ASSESSMENT_DATE	<input type="radio"/> Equals <input checked="" type="radio"/> After <input type="radio"/> Before <input type="radio"/> None	10/01/2017	<input type="radio"/> Asc <input type="radio"/> Desc <input type="radio"/> None	assessment_date	<input checked="" type="checkbox"/>

Ad Hoc Report cont.

9. Locate the *Residence_Assessment* criteria within the **Field Name** column and select the associated box in the **Include Field in Report** column.
10. In the **Field Criteria** column select Equals and select Private home / apartment / rented room in the Field Value column, this will allow to pull all members who meet the CFCO residential requirement.

Field Name	Field Criteria	Field Value	Field Order	Field Caption	Include Field in Report
RESIDENCE_ASSESSMENT	<input checked="" type="radio"/> Equals <input type="radio"/> None	<input type="radio"/> No Selection <input checked="" type="radio"/> Private home / apartment / rented room <input type="radio"/> Adult care facility <input type="radio"/> Adult care facility with assisted living services <input type="radio"/> Adult housing offered by Office of Mental Health <input type="radio"/> Housing offered through Office of People with Developmental Disabilities <input type="radio"/> Psychiatric hospital or unit <input type="radio"/> Nursing home <input type="radio"/> Rehabilitation hospital / unit <input type="radio"/> Hospice facility / palliative care unit <input type="radio"/> Acute care hospital <input type="radio"/> Correctional facility <input type="radio"/> Homeless (with or without shelter) <input type="radio"/> Other	<input type="radio"/> Asc <input type="radio"/> Desc <input type="radio"/> None	residence_assessment	<input checked="" type="checkbox"/>

Ad Hoc Report cont.

11. Click on **Show Report** to generate the report.
12. Filter on scores equal to 5 or higher and Private home / apartment / rented room to identify members who meet the CFCO eligibility criteria.

Field Names Selected
CONSUMER_FIRST_NAME
CONSUMER_LAST_NAME
CONSUMER_DATE_OF_BIRTH
MEDICAID_NUMBER_1
ASSESSMENT_DATE
RESIDENCE_ASSESSMENT
LEVEL_OF_CARE_SCORE
O_NURSE_DATE

Note: For existing members only, the CFCO eligible consumer's plan of care will not need to be updated at this time. Updates will be required during their next scheduled assessment. At this time plans are required to begin RRE code placement process.

UAS-NY Ad Hoc Report Training

- Log into the Health Commerce System
- Log into the UAS-NY
- On the organization role selector page go to References and Resources Course 8050
- Section 4 Training, Documentation & User Support
- Savvy Sessions Webinar Recordings UAS-NY Savvy Session: Running Ad Hoc Reports (11/12/2014)

Members New to CFCO Services – Post 04/01/2018

Mainstream:

For all new members in receipt of LTSS, and for all members requesting CFCO services, mainstream plans are responsible for determining if the members meets the CFCO eligibility requirements.

- For mainstream members who are seeking CFCO services, plans will follow their existing process for assessment and service authorization.

MLTC:

For all new MLTC members the plan is responsible for determining if the member meets the CFCO eligibility requirements.

- For Managed Long Term Care members, assessments are part of the current enrollment process.

CFCO LOC Requirement

Once the assessment has been completed, Plans will need to identify all members who meets the Level of Care requirement:

Mainstream and MLTC members:

- For members identified with a score of 5 or higher on the UAS Community Assessment, the Plan is responsible to determine if they meet the CFCO residential requirement.
- For all who are NOT identified with a score of 5 or higher on the UAS Community Assessment, the member is not CFCO eligible at this time.

CFCO Residential Requirement

- The attached UAS screen shot indicates the field that identifies the consumer's current residence status.
- There are multiple choices available but the only field that qualifies a client for CFCO is a Private home / apartment / rented room.

Residential / Living Status at time of assessment

- No Selection
- Private home / apartment / rented room
- Adult care facility
- Adult care facility with assisted living services
- Adult housing offered by Office of Mental Health
- Housing offered through Office of People with Developmental Disabilities
- Psychiatric hospital or unit
- Nursing home
- Rehabilitation hospital / unit
- Hospice facility / palliative care unit
- Acute care hospital
- Correctional facility
- Homeless (with or without shelter)
- Other

If other, specify

Update Plan of Care

For members who meet all three CFCO eligibility requirements and are in receipt of any of the CFCO services currently available, the member's plan of care will need to include a description of services that are deemed CFCO.

- Plans will follow their existing plan of care process but will need to include CFCO information.

The lack of CFCO eligibility does not preclude an enrolled member from receiving any defined services in their plan of care; it is **only** an indicator that the services are not CFCO eligible.

RRE Code Placement Overview

- MCO are responsible for initiating the placement of the CF/CO RRE Code on the consumer's eligibility file.
- They are also responsible for end dating the CF/CO RRE Code when a member's status changes that will impact their CF/CO eligibility.
- The process to have the CF/CO RRE code added or updated to a consumer's eligibility file in eMedNY, is completed through a batch file transmittal to NYMC.
 - On a weekly basis (minimum), MCO are responsible to transmit the file, via the batch file process to NYMC.
- RRE Code placement will start 04/01/2018 and plans are expected to complete for existing members by 06/01/2018.

Note: All plans were required to submit one test file and receive a confirmation from NYMC that the file layout was accepted by March 16, 2018.

OPWDD

- For this implementation of CFCO, OPWDD will add the CO RRE code to all eligible OPWDD individuals.
 - This will include OPWDD clients currently enrolled in mainstream plans.
- Going forward, mainstream plans will have the ability to add the CO RRE code to CFCO eligible OPWDD clients enrolling in a Managed Care Plan using the established process. To be eligible for CO determination, the individual must have an active RRE code of 95 (OPWDD determined).
- Clients already tagged with the OPWDD CO code can be identified in the ePACES eligibility response.

CFCO Plan Responsibility

MCOs are required to assess CFCO eligibility as well as authorize CFCO services/supports in addition to those services for which they currently assess and authorize.

Individuals will be reassessed for CFCO based upon the current six month reassessment schedule, or as needed when the individual's support needs or circumstances change significantly.

Next Steps

- Steering Committee priorities
- Department guidance
- Preparation for 7/1/18
- Questions can be emailed to CFCO@health.ny.gov

Final Thoughts and Questions