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## MEMORANDUM

**TO:** Home Care and Hospice Members

**FROM:** Cheryl Udell, Community Services Policy Analyst

**DATE:** July 29, 2011

**SUBJECT:** August 1<sup>st</sup> Personal Care Services Transition Update

**ROUTE TO:** Administrators, Program Directors, CEOs

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ABSTRACT: DOH provides important information on PC transition to managed care plans.

### Introduction

Effective Monday, August 1st, the Medicaid personal care (PC) benefit will transition from fee-for-service to an in-plan benefit for those individuals enrolled in a Medicaid managed care plan (MCP). The [June 2011 Medicaid Update](#) details this transition, including specifics on covered and excluded recipients. Among those excluded from the transition are dual eligibles and individuals enrolled in the Consumer Directed Personal Assistance Program. The Medicaid Update includes guidance to follow throughout the transitional period and additional information was subsequently posted on the [DOH Web site](#).

### Transition Update

DOH has been advising all LHCSA and CHHA providers under contract with Local Social Service Districts to prepare for the transition by determining which of their members are enrolled in a MCP, and to put the MCP on notice that they are providing Medicaid PC services to their enrollee in order to ensure continuity of payment and services for the recipient.

During today's provider conference call, DOH supplied the following updates and clarifications:

- There is a 60 day grace period, designed to ensure continuity of payments and services, starting August 1<sup>st</sup>, for providers who have not yet contracted with the MCP to continue to provide services to the MCP members, with the option for additional time possible.
- Associations expressed concern about providers who do not have a contract in place with a MCP. Is it a "leap in faith" that they will be paid for the services? DOH clearly stated that providers will be paid if the PC hours are properly authorized and it should not present a survey problem if the regulations are being followed. DOH reaffirmed that the authorization to provide service automatically follows the individual recipient from fee-for-service to the MCP.
- DOH stressed that negotiating a contract with the MCP is critical to understanding the responsibilities of the respective parties and operational timeframes.
- If providers have not already done so, DOH recommended contacting the MCP in order to inform them of the currently authorized hours and services being provided to the MCP's enrollees as effective Monday, August 1<sup>st</sup>.

- DOH reminded providers that it is their responsibility to confirm that Medicaid coverage is still valid. They recommended checking at the beginning of the month, on the 16<sup>th</sup> and the end of the month based on when the rosters are updated.

DOH confirmed in response to a compliance question that the CHRC is associated with the operating license of the agency, and that a single criminal record check per individual is sufficient to cover the entire agency's operations.

Providers asked several questions regarding worker parity rules. In response DOH referred to the attached documents as general guidance: *Section 22.16 Personal Care Benefit Worker Parity Rules* and the *Worker Wage Parity Provision for the Provider Agreements*.

On the DOH Web site, [Information for Health Care Providers](#) provides recommendations on joining an MCO network and contracting with a MCO. The Department has also provided a list of plans with a contact person so issues can be expedited. Please refer to the third attachment below: *Managed Care Plan Contacts for PCA Providers*.

## **Conclusion**

DOH has reaffirmed that their priority is to ensure continuity of services to Medicaid recipients and continuity of payment to the home care providers. Therefore, it is critical that all parties are working in collaboration during the current transition period.

DOH has requested that providers send in their questions to their member associations. Please email me with your questions at [cudell@nyahsa.org](mailto:cudell@nyahsa.org) or call 518-867-8383 ext. 151. DOH plans a series of these updates as the PC services transition process proceeds. The next DOH conference call with associations is scheduled for Wednesday, August 3, 2011 (time TBD), and providers may be invited to participate. NYAHSa is carefully monitoring developments in this area and will keep our members advised.

## **Attachments**

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