

Medical Assistance Program (MAP) MEDICAID ALERT

May 13, 2022

New York Independent Assessor (NYIA)

This Alert is to inform Providers, Client Representatives, Community Based Organizations, Hospitals, Homecare Agencies, Advocates, Managed Care/ Managed Long-Term Care Plans that, beginning May 16, 2022, any adult 18 and older seeking fee for service (FFS) Personal Care Services (PCS) and/or Consumer Directed Personal Care Services (CDPAS) for the first time or seeking initial MLTC plan eligibility must be referred to the New York Independent Assessor (NYIA) for their Community Health Assessment (CHA) and Clinical Appointment (CA). This change does not include the Immediate Needs process at this time.

The current practice of initiating PCS and/or CDPAS services with the HCSP-M11Q or the DOH-4359 is discontinued for adults seeking Medicaid State Plan PCS and/or CDPAS on and after May 16, 2022. Through a contract with MAXIMUS Health Services, Inc. (MAXIMUS) the NYIA will conduct independent assessments, provide independent practitioner orders, and perform independent reviews of high needs cases for PCS and CDPAS. The NYIA will also take over the work currently done by the Conflict Free Evaluation and Enrollment Center (CFEEC) to assess individuals for MLTC plan eligibility.

Beginning May 16, 2022, the NYIA will conduct all initial assessments for adults (18 and over), including FFS Medicaid recipients and MMC/HARP/SNP enrollees. The CHA and a Clinical Appointment completed by the NYIA will assess for PCS and/or CDPAS service needs *and*, where applicable, MLTC plan eligibility. The LDSS (or MMCO) will no longer conduct a separate CHA to authorize these services.

Individuals who initiated the process for PCS/CDPAS through the LDSS prior to May 16, 2022, will be assessed under the process in place prior to May 16, 2022. For example, if an individual called the LDSS for an assessment on May 12, 2022, then was scheduled to have

an assessment conducted by the LDSS on May 20, 2022, that individual should still be assessed by the LDSS.

FFS PCS and/or CDPAS authorized by an LDSS or MMCO for 1915(c) waiver participants in the Nursing Home Transition and Diversion (NHTD), Traumatic Brain Injury (TBI) and the Office for People with Developmental Disabilities (OPWDD)'s Comprehensive Waiver, *will* require a NYIA CHA pursuant to the revised regulations.

Until further notice, the LDSS will continue to perform:

- pediatric CHAs to authorize PCS/CDPAS for children aged 0-17 years.
- routine annual reassessments for authorizing PCS and/or CDPAS for all ages; and
- non-routine reassessments as necessary including return from institutionalization assessments, significant change in condition assessments and assessments at the individual's request for all ages.

Starting May 16, 2022, the LDSS must refer individuals with active Medicaid eligibility who are seeking an initial assessment for PCS or CDPAS to NYIA. To refer to NYIA, the LDSS will provide the individual with the number to call the NYIA Helpline **(855-222-8350)**. Individuals may also call the NYIA directly at the same number. Once the NYIA confirms the individual has active Medicaid, NYIA will schedule both a CHA and a clinical appointment for the individual. The CHA and clinical appointment will be scheduled to be completed within 14 calendar days of contact with the NYIA.

The CHA will assess the individual's need for services, as well as eligibility for MLTC plan enrollment, if applicable. Upon completion of both the CHA and the clinical appointment, the individual will receive a Notice from NYIA providing direction on next steps, including whether the individual may be eligible for MLTC plan enrollment and/or how to contact the LDSS to complete the care planning and service authorization process for FFS PCS/CDPAS. All individuals assessed after being referred by the LDSS or approaching the NYIA on their own who are not enrolled in an MMCO will be advised to contact their LDSS or the NYIA for next steps. While the NYIA is now responsible for performing the independent CHA and clinical appointment, the LDSS remains responsible for developing the individual's plan of care and authorizing FFS PCS/ CDPAS. In developing the plan of care and authorization of services, the LDSS must review the NYIA CHA and physician outcome of the CA and determine that PCS and/or CDPAS are appropriate, medically necessary and can reasonably maintain the individual's health and safety in their home.

If, based on the review of the CHA, physician outcome of the CA and care planning activities, the LDSS determines that the individual does not have a need for PCS/CDPAS, the LDSS would be responsible for providing appropriate notice, including agency conference and fair hearing language.

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