



ANNOUNCEMENT

Changes to Respite Telehealth Services Under the 1915(c) Children's Waiver Home and Community Based Services (HCBS) in Response

December 13, 2022

TO: 1915(c) Children's Waiver Respite HCBS Providers

The New York State Department of Health (the Department) is evaluating various policy flexibilities allowed during the COVID-19 Public Health Emergency (PHE) and determining which flexibilities will be ending and which ones will be extended (temporarily/permanently).

Effective **January 1, 2023**, the [Children's Respite Services flexibility](#) will end and providers are required to revert to the original guidance provided in the [HCBS Manual](#):

- Respite Services may no longer be billed if delivered via telehealth or telephonically to an individual or group;
- All Respite Services must be delivered in-person, as remote delivery will no longer be allowable;
- Respite Services may be delivered by qualified practitioners in a home or residence, out-of-home/residence by staff in community-based sites (e.g., community centers, camps, parks), or in allowable facilities; and
- Billing for Respite must be based on in-person interactions with the Waiver-enrolled children/youth.

Additionally, Planned and Crisis Respite services may not exceed the 14 days (1,344 15-minute units) annual limits without medical necessity, which must be documented in the member's record. For a member enrolled in a Medicaid Managed Care Plan (MMCP), authorization from the MMCP must also be documented in the child's case record. HCBS provided beyond these limits **MUST** be supported by medical necessity such as documentation through a Licensed Practitioner of the Healing Arts (LPHA) Attestation form. The HCBS Manual will be updated to provide additional guidance regarding the specific days/unit requirements.

Direct any questions regarding the Children's Respite Telehealth Services unwind, or Children's Waiver HCBS in general, to BH.Transition@health.ny.gov.