## ✓ MetroPlus**Health** MEMO

**DATE:** 09.05.23

**TO**: HEALTH HOMES SERVING CHILDREN (HHSC), HEALTH HOME CARE MANAGEMENT AGENCIES (HH CMAS), CHILDREN AND YOUTH EVALUATION SERVICES (C-YES), AND CHILDREN'S HOME AND COMMUNITY BASED SERVICES (HCBS) PROVIDERS

**RE**: CONTINUITY OF CARE PLAN TRANSFER GUIDELINES FOR MEDICAID CHILDREN'S WAIVER (HCBS)

**IMPACTED PLANS**: MEDICAID MANAGED CARE PLANS AND HIV SPECIAL NEEDS PLANS (MMCPS)

## **SUMMARY**

The Children's Waiver Home and Community Based Services (HCBS), Medicaid Managed Care Plans (MMCPs), and Transfer Continuity of Care Requirements, require continuity of care service delivery requirements when HCBS providers are serving Children's Waiver members who transfer from FFS Medicaid to a MMCP, or from one MMCP to another MMCP.

**Plan Transfer – FFS to MMCP** and **Plan Transfer – MMCP to MMCP** must be communicated effectively to ensure that approved authorizations are in place and that the delivery of HCBS is not interrupted.

Designated HCBS Providers, Care Managers, and MMCPs must follow the Children's Waiver HCBS Plan of Care Workflow Policy, in which the HCBS provider notifies the member's MMCP of the first service date and submits the Children's HCBS Authorization and Care Manager Notification Form, when appropriate.

For more detailed information on **Plan Transfer – FFS to MMCP** and **Plan Transfer – MMCP to MMCP** please refer to the guidance here:



In addition to this guidance, the MMCP must also follow continuity of care requirements outlined in the Medicaid Managed Care /Family Health Plus/ HIV Special Needs Plan/ Health and Recovery Plan Model Contract related to services rendered by out of network providers.

Any questions on this guidance can be directed to BH.Transition@health.ny.gov.