



REMINDER:

Regarding Medicaid Eligibility and Transfer Process to Health Homes

The New York State Department of Health (DOH) is providing this reminder to clarify the requirements and policies when working with Children and Youth Evaluation Services (C-YES) regarding Medicaid eligibility and the transfer process to Health Home Care Management for children/youth receiving Children's Waiver Home and Community Based Services (HCBS).

A. Children/Youth Referred to the Children's Waiver without Active Medicaid

Children/youth who are referred to the Children's Waiver for HCBS and **do not** currently have active Medicaid must initially be directed to Children and Youth Evaluation Services (C-YES). C-YES will conduct the HCBS Level of Care (LOC) Eligibility Determination. If the child/youth is eligible for the Children's Waiver, C-YES will assist the family with completing and submitting the Medicaid application to the Local District of Social Services (LDSS). C-YES does not determine Medicaid eligibility, that is the role of the LDSS.

Per the [Children's Waiver and Medicaid Case Processing Requirements ADM](#), the LDSS must follow the standard Medicaid budgeting process to determine whether the family is eligible for Medicaid under "Community Eligible." If the family is not "Community Eligible", then the LDSS should determine if the child/youth is eligible as a "Family of One" Medicaid based on their eligibility for the Children's Waiver. The LDSS still needs to follow the standard Medicaid eligibility determination process and designation of "Family of One" Medicaid¹.

Once the LDSS has determined Medicaid eligibility, it is the responsibility of the LDSS to put the corresponding Recipient Restriction Exception (RR/E) codes (i.e., "K-codes") on the child/youth's Medicaid file in the Welfare Management System (WMS) to designate Children's Waiver enrollment status.

As a reminder, all Children's Waiver enrollees will have a K1-code. Children/youth will also have a K-code to indicate their target population. Children/youth determined Medicaid eligible as a "Family of One" will also have a KK-code to indicate this status.

Please note, it should not be assumed that all children/youth working with C-YES will have "Family of One" Medicaid nor the KK codes. Please verify Medicaid eligibility prior to requesting KK-code be added to a child's/youth's Medicaid file.

Please contact capacitymanagement@health.ny.gov in the Health Commerce System under the secure file transfer if there is a K-coding concern.

¹ **"Family of One" Medicaid Eligibility:** used to describe a child/youth that becomes eligible for Medicaid through the use of institutional eligibility rules. If a child/youth is not otherwise eligible for Medicaid when counting parental income (and/or resources, if applicable), these rules allow for the child/youth to have Medicaid eligibility determined as a "Family of One", using only the child/youth's own income (and resources, if applicable).

"Community Eligible" Medicaid Eligibility: used when a child/youth is determined eligible for Medicaid based on a budget that includes family income (and resources when applicable) in the budget calculation and is not tied to Children's Waiver eligibility.



Please refer to [The Children's Waiver HCBS Eligibility Service Requirements](#) and [The Children's Waiver Medicaid Eligibility Status Impact on HCBS Eligible Children](#) for Medicaid eligibility information.

B. Children/Youth Referred for Health Home Care Management through C-YES Transfer

C-YES serves child/youth 1) who are enrolled in Medicaid and opt-out of Health Home (HH) comprehensive care management or 2) who are not already enrolled in Medicaid and identified by a referral source (i.e., parent/doctor/school/service provider) as potentially needing HCBS.

In either circumstance, C-YES will educate the child/youth/family about HH care management, C-YES care coordination, and HCBS eligibility and services. For children/youth already enrolled in Medicaid, the child/youth/family may choose if they would like to proceed with the HCBS/LOC eligibility process with C-YES or be connected to a HH to be enrolled so the HH care manager can conduct the HCBS/LOC eligibility determination.

If the Medicaid child/youth/family is referred to C-YES and determines they want to transfer to a HH Care Management Agency (HH/CMA) prior to the HCBS/LOC being completed or other information being obtained, then C-YES would only need to complete the *"Transfer Referral Form for C-YES, Health Homes, and Care Management Agencies"* and not the "Opt-in to Health Home form" as they would not have enough information to complete this form nor could the HH/CMA immediately enroll the child/youth in the HH program. The HH/CMA should consider this as a new member referral. ***Note:** C-YES may take verbal consent to refer the consumer to HH in this type of scenario and no specific documentation will accompany the transfer referral form.

When documentation is needed for a transfer to HH, all required transfer documentation needs to be securely sent immediately and noted on the *"Transfer Referral for C-YES, Health Homes, and Care Management Agencies"* form. It is necessary for the transferring entity to obtain consent from the child/youth/family to share information with the receiving entity. ***Note:** Clinical documentation from a third party may not be released in certain circumstances and may need a re-release. C-YES and HHs should discuss any information that is needed or missing in the transfer and discuss how the information will be obtained. *The lack of documentation is not an allowable reason for a delay in transfer or access to HCB Services.*

Subsequently, verification of appropriate K-codes on the transferring child/youth Medicaid file is necessary. C-YES is required to monitor the K-code additions by the LDSS and, if there is a delay in K-codes, should share this information with the receiving HH/CMA; however, the transfer case cannot be refused for this reason. The transfer date and the HH/CMA assuming the case responsibility cannot occur until the K-codes are on the child's/youth's Medicaid file, however, the processes of the transfer should continue and not be delayed.

Any questions or case issues should be sent to BH.Transition@health.ny.gov

Refer to [Transfer Referral Process Between the Children and Youth Evaluation Services \(C-YES\) and Health Home Serving Children \(HHSC\) Policy # CW0007](#) for additional information.