Hillside Health Homes

Care Manager Program for Children and Adults
Objectives

Introductions
What is a Health Home?
Hillside Health Home CMA
Eligibility
Referral Process
Core Services
Questions
What is a Health Home?

- Health Homes provide Care Management services to help insure everyone involved in an individual’s care is working together and sharing information that is important in supporting a person’s wellness and recovery.
- A Health Home Care Manager will coordinate medical, mental health, substance abuse services, and social service needs of the individual.
- [https://www.hillside.com/healthhomes/](https://www.hillside.com/healthhomes/)
Health Home Outcomes – All Populations

- Improve health care and health outcomes
- Lower Medicaid costs
- Reduce preventable hospitalizations and ER visits
- Avoid unnecessary care for Medicaid members
  - Right service at the right time
  - Avoid the escalation of services and costs from unmet needs
• Health Home Eligibility is chronic condition based
• Children or Adults must have two or more chronic conditions or a single qualifying criteria as authorized under the Health Home program in New York
• The HH eligibility criteria is not population based – for example, children in Foster Care do not automatically qualify for Health Homes, they must meet the chronic condition eligibility criteria to qualify
• Children and Adults must also be “appropriate” for Health Home, i.e., they must need the higher level, intensive care management provided by the Children’s and Adult Health Home models
• Following slides will review and provide updates on Health Home Eligibility Criteria
Person must be enrolled in Medicaid and have:
  • Two or more chronic conditions or
  • One single qualifying condition of
    • HIV/AIDS or
    • Serious Mental Illness (SMI) / Serious Emotional Disturbance (SED) – SED definition has been part of the Health Home for children design
    • Complex Trauma (Children Only)

Chronic Conditions Include:
  • Alcohol and Substance Abuse
  • Mental Health Condition
  • Cardiovascular Disease (e.g., Hypertension)
  • Metabolic Disease (e.g., Diabetes)
  • Respiratory Disease (e.g., Asthma)
  • Obesity BMI >25 (BMI at or above 25 for adults, and at or above 85th percentile for children)
  • Other chronic conditions (see DOH website for list of chronic conditions)

**Modifications to the Definition of Serious Emotional Disturbance**

- **SED definition** — must have at least one of the qualifying DSM-V diagnoses and meet the SED functional limitation criteria
- **Added** ADHD for children who are:
  - Have utilized any of the following services in the past three years:
    - Psych inpatient
    - Residential Treatment Facility
    - Day treatment
    - Community residence
    - HCBS Waiver
    - Targeted Case Management
    - AND meet the functional limitation criteria (see next page)
- **Removed** gender dysphoria from list of DSM-V conditions
  - Gender dysphoria is not considered a single qualifying condition for SED in HH
  - Young children self-identify as transgender, but are not SED
SED Definition for Health Home - DSM Qualifying Mental Health Categories*

- Schizophrenia Spectrum and Other Psychotic Disorders
- Bipolar and Related Disorders
- Depressive Disorders
- Anxiety Disorders
- Obsessive-Compulsive and Related Disorders
- Trauma-and Stressor-Related Disorders
- Dissociative Disorders
- Somatic Symptom and Related Disorders
- Feeding and Eating Disorders
- Disruptive, Impulse-Control, and Conduct Disorders
- Personality Disorders
- Paraphilic Disorders
- ADHD with conditions

*Any diagnosis in these categories can be used when evaluating a child for SED. However, any diagnosis that is secondary to another medical condition is excluded.

NOTE: Gender Dysphoria has been removed as a single qualifying Chronic Condition
SMI Definition for Health Home - DSM Qualifying Mental Health Categories*

• Schizophrenia Spectrum and Other Psychotic Disorders
• Bipolar and Related Disorders
• Depressive Disorders
• Anxiety Disorders
• Obsessive-Compulsive and Related Disorders
• Trauma-and Stressor-Related Disorders
• Dissociative Disorders
• Personality Disorders

*Any diagnosis in these categories can be used when evaluating a Adult for SMI. However, any diagnosis that is secondary to another medical condition is excluded.
Functional Limitations Requirements for SED Definition of Health Home
To meet definition of SED for Health Home the child must have experienced the following functional limitations due to emotional disturbance over the past 12 months (from the date of assessment) on a continuous or intermittent basis
•Ability to care for self (e.g. personal hygiene; obtaining and eating food; dressing; avoiding injuries); or
•Family life (e.g. capacity to live in a family or family like environment; relationships with parents or substitute parents, siblings and other relatives; behavior in family setting); or
•Social relationships (e.g. establishing and maintaining friendships; interpersonal interactions with peers, neighbors and other adults; social skills; compliance with social norms; play and appropriate use of leisure time); or
•Self-direction/self-control (e.g. ability to sustain focused attention for a long enough period of time to permit completion of age-appropriate tasks; behavioral self-control; appropriate judgment and value systems; decision-making ability); or
•Ability to learn (e.g. school achievement and attendance; receptive and expressive language; relationships with teachers; behavior in school).
Health Home Appropriateness Criteria: Individuals must meet the Chronic Condition Criteria AND be Appropriate for Health Home Care Management

Appropriateness Criteria: Individuals meeting the Health Home eligibility criteria must be appropriate for the intensive level of care management provided by Health Homes. Assessing whether an individual is appropriate for Health Homes includes determining if the person is:

- At risk for an adverse event (e.g., death, disability, inpatient or nursing home admission, mandated preventive services, or out of home placement)
- Has inadequate social/family/housing support, or serious disruptions in family relationships;
- Has inadequate connectivity with healthcare system;
- Does not adhere to treatments or has difficulty managing medications;
- Has recently been released from incarceration, placement, detention, or psychiatric hospitalization;
- Has deficits in activities of daily living, learning or cognition issues, or
- Is concurrently eligible or enrolled, along with either their child or caregiver, in a Health Home.
Referrals
# Community Referral Application

## Identifying Information

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<th>Name:</th>
<th>Date of Birth:</th>
<th>Gender:</th>
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<th>Alternative Contact(s) Name, Phone #:</th>
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Indicate any need for language/interpretation services; specify language spoken if other than English:

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**List Current Medical or Behavioral Health Treatment Providers, if Known:**

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**Specify Preferred or Recommended Care Management Agency, if any:**
Eligibility Category Information – Check All that Apply
Must meet either A only or B only or two Cs and HAVE active Medicaid to be eligible for Health Home Care Management
Must meet A or C as primary diagnosis and NOT HAVE active Medicaid to be eligible for Non Medicaid Care Management

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<tr>
<th>Check</th>
<th>Category</th>
<th>Specify Diagnosis; Provide Available Detail - <strong>REQUIRED</strong> or will not be processed</th>
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<td>A Serious mental illness</td>
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<td>C Heart Disease</td>
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<td>C BMI &gt; 25</td>
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<td>C Other Chronic Conditions (Specify)</td>
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Referral Mechanisms Children

There are basically 4 ways a Care Management Agency will receive referrals for children:

• As a TCM provider whose TCM kids will roll over automatically into HH
• As a CMA that is assigned referrals in MAPP of children referred by MCOs, LDSS, or SPOA/LGUs
• As a CMA that has referred its eligible clients via MAPP
• As a CMA with additional capacity to serve children referred to CHHUNY from parties outside this system (e.g. Pediatricians)
Referral Mechanisms Adults

There are basically 2 ways a Care Management Agency will receive referrals for adults:

- As a CMA that is assigned referrals from community providers
- As a CMA that is assigned by DOH/MCO assignment lists
Work of the Care Manager
Care Manager Services

Comprehensive care management

Care coordination and health promotion

Comprehensive transitional care from inpatient to other settings, including appropriate follow-up

Individual and family support, which includes authorized representatives

Referral to community and social support services

The use of Health Information Technology (HIT) to link services, as feasible and appropriate.
Questions?
References

New York State Department of Health Webinar, April 29, 2015, September 8, 2015, December 16, 2015, April 7, 2016

Children’s Health Home of Upstate New York, LLC., Presentation December 17, 2015

Care Coordination

http://www.carecoordination.org