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NY State of Health (“NYSOH”) Update

NYSOH Partners with Lyft and Uber to Encourage Driver Enrollment

NY State of Health announced a new partnership with ride sharing companies Lyft and Uber to urge more than 200,000 drivers to visit the Marketplace to shop for and enroll in health insurance. NY State of Health will work directly with Lyft and Uber to promote coverage options and enrollment opportunities for drivers.

Outreach to drivers will include:

- Information sessions
- Distribution of educational materials
- Email campaign to drivers
- Promotion through online driver portals

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VBP Updates

2018 VBP Reporting Requirements Technical Specifications Manual

The Department of Health has released the [2018 Value Based Payment \(“VBP”\) Reporting Requirements Technical Specifications Manual](#). This document specifies the quality measure reporting requirements for Medicaid Managed Care Organizations (“MCOs”) participating in the

NYS Medicaid VBP program. The document includes an overview of the specific reporting requirements for Category 1 measures for each VBP arrangement, a description of the changes to the measure sets from Measurement Year 2017 to 2018, and detailed instructions regarding additional file specifications required for the VBP program.

All questions can be sent to the Department of Health at vbp@health.ny.gov.

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Regulatory Modernization

The first meeting of the Regulatory Modernization Initiative – Long Term Care Need Methodologies and Innovative Models Workgroup will be **Monday, November 20, 2017** from **11:30 a.m. to 1:30 p.m.** in Meeting Room 6, Empire State Plaza in Albany. This meeting is a reschedule of the meeting of November 7, 2017, which was cancelled.

RSVP at RegulatoryModernization@health.ny.gov with "LTC" in the subject line.

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Managed Care Policy and Planning Meeting

On Thursday, the Department of Health held the monthly Policy and Planning Meeting with the State's Medicaid Managed Care plans. Some highlights from the meeting include:

- **2018 State Budget Update:** The State is forecasting a \$4 billion budget deficit and expects to introduce proposals impacting the Medicaid program to help address the shortfall. The State continues to analyze the cost in the MLTC program and review options for reform.
- **Mainstream Enrollment:** Statewide enrollment for October was 4,379,448, with 2,590,702 in NYC and 1,788,746 Upstate. Statewide enrollment increased by 9,131. Statewide enrollment is still down 32,000 since July.
- **MLTC Enrollment:** Now at 211,904, an increase of 3,343 from the enrollment reported at last month's meeting (208,561). Enrollment continues to steadily climb after leveling off in January, February and March, when monthly growth was closer to 1,500 members per month, compared to 2,500 members per month for most of 2015 and 2016. This growth continues to eclipse DOH's projections, as so far this year, there have been more than 19,000 new MLTC enrollees compared to the 12,000-13,000 new MLTC enrollees DOH had anticipated. Virtually all new enrollment continues to be in the partially capitated program, which has 192,273 members, an increase of 3,202 members from a month ago and 5,647 just two months (186,626 members). Most of this growth continues to be in NYC and Long Island. All MLTC programs experienced month-to-month growth with the exception of FIDA, with MAP (8,725 vs. 8,598), PACE (5,737 vs. 5,701), and FIDA IDD (662 vs 625). FIDA enrollment continued its decline, with 59 less members than September (4,507 vs. 4,566). There are currently 61 actively enrollment plans statewide, including 29 partial cap plans, 9 PACE plans, 8 MAP, 14 FIDA, and 1 FIDA-IDD.
- **FIDA:** One plan is moving through the CMS approval process to begin enrollment in Westchester and Suffolk County with an expected target date to begin opt-in enrollment of January 1, 2018. Plans may now post waiver of liability forms on their websites as opposed to allowing hard copies only. These forms must be completed by non-participating providers when appealing through the integrated appeals process. A Maximus FIDA consumer satisfaction survey reported 72% satisfaction with FIDA plans and 94% satisfaction with their plan of care.

- Medicaid Mental Health Parity: The State has requested an eight-month extension for posting the State's Parity Analysis and has engaged a consulting group to assist the group in developing and executing the analysis.
- "In Lieu of" Guidance: Because CMS contractual approval is required before new in lieu of services plans can begin and there must be a prospective start date for implementation, the State acknowledged that the first reasonable start date for plans to expect to be able to begin providing in lieu of services is 4/1/18.
- MLTC Model Contract: MLTC plans asked DOH to provide written guidance that they will not be held responsible for new requirements set forth in the partial cap model contract amendment on a retroactive basis. Plans also asked if DOH had looked into the cost of new amendments, including minimum care management ratios, which they noted would be expensive.
- MLTC VBP: \$10 million in stimulus funding is available for MLTC plans to convert provider contracts to VBP Level 1 by December 31, 2017. The \$10 million will be allocated to each partial cap plan according to each plan's relative market share. If the plan's percentage of contracts converted to VBP Level 1 does not match the percentage of stimulus funding allocated to that plan relative to all other partial cap plans, recoupments will be made from the plan's stimulus funding. Plans will be required to attest early next year to their specific VBP Level 1 conversion percentages.
- CDPAP Fiscal Intermediary Authorization: The Fiscal Intermediary Authorization application was posted to the DOH website November 1 and is due back to the Department December 1. DOH is not sure how long it will take them to review all of the applications. Existing Fiscal Intermediaries may continue operating while their application is under review.
- Minimum Wage Schedule: Plans once again asked DOH to provide a schedule similar to last year identifying the additional funds plans are receiving for minimum wage. DOH indicated this information had been provided but there seemed to be some confusion about the request versus what was provided on plan rate sheets.

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CMS Drug Utilization Review ("DUR") Annual State Reports

Last week, CMS posted the FFY [2016 DUR Annual State Reports](#) and [State Comparison/Summary Report](#) for FFY 2016. This information does not include data on Managed Care Organizations DUR activities. Pursuant to the Mega-Rule, MCOs are required to provide a detailed report of their DUR program activities to the state on an annual basis, beginning with FFY 2018. The New York State report that includes FFS DUR data is available [here](#).

Each State Medicaid program under Section 1927(g) (3)(D) of the Social Security Act is required to submit an annual report on the operation of its Medicaid DUR program. States are required to report on their prescribing patterns, cost savings generated from their DUR programs and their programs' operations, including adoption of new innovative DUR practices.

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Department's Updated Outpatient Dialysis Need Projections

The Department has produced updated [outpatient dialysis need projections](#), reflecting resources and projected need as of November 8, 2017. The projections suggest that there will be a total unmet need of **531 dialysis stations** by 2021. This update includes the most recent patient data (2016) and uses the highest value within a 95% confidence interval of the county projections.

The number of available stations fluctuates on a continuous basis depending on approvals and closures, consequently the projections are offered as a snapshot guide only.

Questions regarding the projections update should be directed to the Bureau of Public Need Review at 518-402-0935.

In addition, it is important to note that the [Public Health and Health Planning Committee \(“PHHPC”\)](#) will be discussing the Chronic End Stage Renal Dialysis Need Methodology this Thursday, November 16, 2017. A primer for the discussion can be found [here](#).

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Federal Audit of DOH Nursing Home Survey Follow-Up

The federal Department of Health and Human Services Office of Inspector General (“OIG”) recently published an [audit report](#) detailing findings that the NYS Department of Health, Division of Nursing Homes and Intermediate Care Facilities for Individuals with Intellectual Disabilities Surveillance did not ensure that their surveyors followed CMS guidance when verifying and documenting the correction of nursing home deficiencies.

Federal regulations require nursing homes that participate in Medicare and Medicaid to submit corrective action plans to the Centers for Medicare & Medicaid Services (“CMS”) or to the State Department of Health (“DOH”) for certain deficiencies identified during surveys. DOH must verify the correction of identified deficiencies by obtaining evidence of correction or through onsite reviews.

The OIG audit found that, in calendar year (CY) 2014, DOH did not always verify nursing homes’ correction of deficiencies identified during surveys. Based on sample results, OIG estimated that 72% of the nursing homes’ correction of deficiencies were not verified by DOH. Auditors recommended that DOH ensure that surveyors follow CMS guidance for verifying and documenting the correction of nursing home deficiencies in accordance with Federal requirements.

While DOH agreed that it did not provide documentation to support that it had verified correction of deficiencies in all of OIG samples, it indicated that it has taken steps taken to implement the OIG’s recommendation.

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Nursing Home and ACF Cold Weather Advisory

The Department of Health (“DOH”) has recently issued Dear Administrator Letters ([DAL: NH 17-07 - Cold Weather Advisory](#) & [DAL 17-20: Cold Weather Advisory](#)) to encourage nursing home administrators and Adult Care Facilities (“ACFs”) to take the necessary precautions to ensure that residents are comfortable and safe in nursing homes throughout the winter months. The letters include steps that should be taken to protect residents during the cold weather months as well as advice on prevention and management of hypothermia and frostbite.

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eMedNY Update

The eMedNY webpage has added several new provider communications ([here](#) & [here](#)).

First, in a communication to physicians (“[Obstetrical Deliveries Prior to 39 Weeks Gestation](#)”), the Department has identified Medicaid billing issues related to coding (procedure and diagnosis) for early delivery obstetrical claims (less than 39 weeks gestation). To resolve this issue, both FFS and MMC are enacting claim coding and billing guideline changes, which are detailed in the article.

Second, in a communication to communication to clinic providers (“[APG Billing for Dental Anesthesia](#)”), the Department specifies new dental procedure codes for the submission of general anesthesia and intravenous sedation. The new billing codes are effective with date of service **January 1, 2016**, and are a result of the Current Dental Terminology (CDT) 2016 American Dental Association (ADA) code updates.

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Health Home Update

Chronic Disease Training Series for Health Home Care Managers

The final two webinars in the Chronic Disease Training Series will occur in December and January. On **December 6**, the Department will cover asthma facts, causes, diagnosis, monitoring asthma control, and asthma management including medications, environmental triggers, asthma action planning and supporting children in school. On **January 31, 2018**, the live webinar will be covering the impact of arthritis on adults and the benefits that chronic disease self-management programs (“CDSMP”) can have in improving arthritis symptoms and quality of life.

To register for these webinars, click [here](#). **Note:** When you register for the live webinars through OHIP, the calendar appointment will be titled “Health Home Serving Children Implementation Policy Bi-Weekly Webinar”. The only webinars pertaining to the Chronic Disease Training Series are those on December 6, 2017 and January 31, 2018.

To access the entire Chronic Disease Training Series, visit the online modules through MCD, [here](#). **Note:** This program is **FREE** for NY residents. The \$80 Individual Registration Fee will be adjusted to \$0 during the registration process for individuals in NY.)

The webinar slides are also posted to the NYS DOH Health Home Serving Children webpage under the “Chronic Conditions” tab, [here](#).

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Upcoming Calendar

<i>Thursday, November 16, 2017</i>	Public Health and Health Planning Council Committee Day 10:15 a.m. Empire State Plaza, Concourse Level, Meeting Room 6, Albany, NY
<i>Thursday, November 16, 2017</i>	New York State AIDS Advisory Council 10:30 a.m. to 1:00 p.m. 90 Church Street, 4th floor, CR 4A/B, New York, NY

<p>Monday, November 20, 2017</p>	<p>Regulatory Modernization Initiative- Long Term Care Need Methodologies and Innovative Models Workgroup</p> <p>11:30 a.m. to 1:30 p.m.</p> <p>Empire State Plaza, Concourse Level, Meeting Room 6, Albany, NY</p> <p>Individuals interested in attending are asked to RSVP at RegulatoryModernization@health.ny.gov with "LTC" in the subject line. The meeting will be available via webcast here.</p>
<p>Monday, November 20, 2017</p>	<p>Assembly Hearing on Nursing Home Quality and Patient Safety and Enforcement</p> <p>11:00 a.m.</p> <p>Assembly Hearing Room, 250 Broadway, 19th Floor, New York, NY</p>
<p>Wednesday, December 6, 2017</p>	<p>Public Health and Health Planning Council (“PHHPC”)</p> <p>Joint Meeting of the Public Health Committee and the Ad Hoc Committee to Lead the Prevention Agenda</p> <p>10:30 a.m. to 12:30 p.m.</p> <p>Joint Meeting of the Health Planning Committee and the Public Health Committee</p> <p>1:00 p.m.</p> <p>90 Church Street, 4th floor, CR 4A/B, New York, NY</p>
<p>Thursday, December 7, 2017</p>	<p>Public Health and Health Planning Council Full Council Meeting</p> <p>9:30 a.m.</p> <p>90 Church Street, 4th floor, CR 4A/B, New York, NY</p>
<p>Thursday, December 7, 2017</p>	<p>Early Intervention Coordinating Council</p> <p>10:15 a.m. to 3:00 p.m.</p> <p>Empire State Plaza Convention Center, Meeting Room 2, Albany, NY</p>

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