



CORE Transition: Important Workflow Reminders and FAQs

Effective **February 1, 2022**, New York State received federal approval to transition four Behavioral Health Home and Community Based Services (BH HCBS) to a new service array called Community Oriented Recovery and Empowerment (CORE) services.

Below are answers to questions providers might have.

- [Information on CORE Services, Including Eligibility](#)
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Frequently Asked Questions

Information on CORE Services, Including Eligibility

1. What BH HCBS will transition to the CORE service array?

These four BH HCBS will transition to CORE services:

- Psychosocial Rehabilitation
- Community Psychiatric Support and Treatment
- Empowerment Services – Peer Support
- Family Support & Training

2. How are CORE services different from BH HCBS?

CORE Services differ from BH HCBS in the following ways:

- The BH HCBS access requirements, including the independent eligibility assessment, plan of care, level of service determination, and federal home and community-based settings restrictions, will not apply to CORE Services.
- Member referrals are not required from Care Management Agencies (CMAs) or Recovery Coordination Agencies (RCAs) to access CORE services. Any provider who is designated a **Licensed Practitioner of the Healing Arts (LPHA)** can recommend members directly to CORE providers.

3. Who is eligible for CORE services?

CORE is available for all current Health and Recovery Plan (HARP) and HIV Special Needs Plan (HIV-SNP) enrollees. In 2023, CORE services will become available in the MAP benefit package when specialty behavioral health services are carved into the MAP benefit package. At that time, MAP plans will offer CORE services as a covered benefit for eligible enrollees.

4. When is the CORE available to eligible Healthfirst members?

All HCBS providers will be provisionally approved as CORE providers beginning **February 1, 2022**. CORE providers can begin providing CORE services on **February 1, 2022**. Members must transition from BH HCBS to CORE no later than **May 2, 2022**.

5. What about my members I provided services to as a HCBS provider (before/after CORE designation)?

- Members who are currently receiving HCBS can continue to do so until May 2, 2022. Before or up to May 2, 2022, the CORE (formerly BH HCBS) provider must submit to Healthfirst the CORE Service Initiation Notification Form to continue providing CORE services after May 2, 2022.
- Members who are not currently receiving services as of February 1, 2022, will need a CORE Service Initiation Notification Form submitted by the CORE provider when initiating services.

Frequently Asked Questions

Member Referrals, Prior Authorization/Concurrent Review

1. Is prior authorization or concurrent review needed for these services?

For the first year of CORE services (**ending January 31, 2023**), prior authorization and concurrent review will not be required. However, CORE providers must submit the **CORE Service Initiation Notification Form** to Healthfirst via the Healthfirst **Provider Portal**, Member Document Upload feature, within the first **three (3) business days** of the first CORE service visit.

2. Is notification required? If so, what are the timeframes?

Yes, notification is required within the first **three (3) business days** of the first CORE service visit.

3. I'm currently providing HCBS. What must I do to become a CORE provider?

Designated BH HCBS providers will receive provisional designation for CORE services during the transition period. Provisional designation is time-limited, with the intent of ensuring continuity of care for members currently served while also giving providers time to obtain full designation for CORE services. Providers must be fully designated for CORE services by **July 31, 2022**. New York State will work with provisionally designated CORE providers seeking to obtain full designation status. Provisionally designated CORE providers will complete required tasks and submit required paperwork between February 1, 2022 and July 31, 2022, to become fully designated CORE providers.

4. If my agency has individuals who are LPHAs, can they refer individuals?

Yes, if your agency employs LPHAs, they can directly refer members to CORE providers. The LPHA is required to submit to the CORE provider the **LPHA Recommendation Form**.

5. What is a LPHA?

A LPHA is a Licensed Practitioner of the Healing Arts designation, defined as any of the following:

- Nurse Practitioner
- Physician
- Physician Assistant
- Psychiatric Nurse Practitioner
- Psychiatrist
- Psychologist
- Registered Professional Nurse
- Licensed Mental Health Counselor
- Licensed Creative Arts Therapist
- Licensed Marriage & Family Therapist
- Licensed Psychoanalyst
- Licensed Clinical Social Worker

A Licensed Master Social Worker under the supervision of an LCSW, a licensed psychologist, or a psychiatrist employed by the agency is also considered a LPHA.

Frequently Asked Questions

Billing for CORE Services

1. When do CORE rates and billing changes become effective?

CORE rates and billing changes go into effect **February 1, 2022**.

2. What is different when billing for CORE services versus HCBS?

Rates and rate code combinations will remain the same for Community Psychiatric Support and Treatment (CPST), Family Support and Training (FST), and Peer Support. Some Psychosocial Rehabilitation (PSR) rate code combinations, rates, and other billing-related information will change as a result of the transition to CORE, including the addition of two new PSR rate code modifiers for employment focus and education focus, and the discontinuation of the PSR per diem rate code.

3. Will short-term and intensive crisis respite be discontinued?

Short-term and Intensive Crisis Respite services and rate codes will no longer apply after **February 1, 2022**, as these services are fully transitioning to the Crisis Intervention (1115 Waiver Benefit). Beginning **February 1, 2022**, no new BH HCBS Short-Term or Intensive Crisis Respite program admissions may occur. All enrollees should be referred to Crisis Residence programs for crisis respite services.

4. Are there new travel rate code supplements?

There will be two new provider travel supplement rate codes for CORE. Please be aware that staff travel time cost is built into the CORE service rates. There is no reimbursement for "staff time" while in travel status. Refer to [CORE Benefit and Billing Guidance](#). Travel codes are to be billed only for successful contacts with the member and may be billed for either public transportation or mileage. Contact your dedicated Behavioral Health Account Manager for help.

Frequently Asked Questions

Additional Information and Support

1. Where can I find CORE updates?

For updates on CORE, visit the Behavioral Health and Foster Care section at [HFProviders.org](https://www.healthfirst.org/HFProviders.org). You can also access the [Provider Alert](#) on this topic.

2. Where can I find more information on Translation Services?

Healthfirst has contracted with an external vendor to enable three-way translation calls among the BH-HCBS provider, the member, and the translator. [Click here](#) for more information.

3. Where can I find additional information on CORE?

For more information, refer to the Office of Mental Health (OMH) website [CORE Overview](#).

4. What if I don't have a Healthfirst Provider Portal account?

For support on obtaining a Healthfirst Provider Portal account, contact your Network Account Manager.

5. Whom can I contact if I have more questions?

Please reach out to the dedicated Behavioral Health Account Manager in your area:

Territory: Nassau, Suffolk

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