



HARP-HCBS **MCO Approval Protocol**

Excellus Protocol

1. Community Health Navigators & Partnering Care Management Agencies will submit the following documents to the Excellus email: member.documents@excellus.com *
 - BH HCBS Eligibility Assessment Results Summary
 - HCBS Level of Service Request
 - DOH-5055 (with Excellus listed as consented entity)

*The submitted documents should be named/uploaded as follows:

- ◇ File Name: NameHealthHomenamePOCversion# (Example: JohnDoeBassettHealthHomePOCV1).

*If there are multiple documents attached in one file, please add that document name onto the end (JohnDoeABCHealthHomePOCV1DOH5055).

- ◇ There should not be spaces or special characters
 - ◇ If possible, please attach both the DOH 5055 and POC as one document
2. The assigned Excellus HARP Care Manager will review the documents and notify the member's assigned Navigator/Care Manager directly regarding HCBS Approval Determinations.
 3. After the selected HCBS Providers have submitted HCBS Individual Service Plans (ISPs) for each service and receive Determinations of Approval, the Navigator/Care Manager will submit a revised/updated BH HCBS Plan of Care to the Excellus email: member.documents@envolvehealth.com
 - a. Also must be done anytime revisions/updates are made to the Member's BH HCBS Plan of Care.

Fidelis Protocol

1. Community Health Navigators & Partnering Care Management Agencies will submit the following documents directly to the Member's assigned Fidelis HARP Care Manager by fax: **347-868-6427**
 - BH HCBS Eligibility Assessment Results
 - HCBS Level of Service Request
2. Fidelis HARP Care Managers will communicate directly with the member's assigned Navigator/Care Manager regarding the HCBS Level of Service Determinations for each service.
3. After the selected HCBS Providers have submitted HCBS Individual Service Plans (ISPs) for each service and receive Determinations of Approval, the Navigator/Care Manager will submit a revised/updated BH HCBS Plan to the Member's Fidelis HARP Care Manager.
 - a. Also must be done anytime revisions/updates are made to the Member's BH HCBS Plan of Care.

United Health Care Protocol:

To be determined. Contact Bassett CHN Administration if needed.



CDPHP Protocol:

1. Community Health Navigators & Partnering Care Management Agencies will submit the following documents directly to the Member's assigned UHC HARP Care **Manager by fax: (518)295-2025**
 - Completed/signed CDPHC Consent Form
 - BH HCBS Eligibility Assessment Results
 - HCBS Level of Service Request
2. CDPHP HARP Care Managers will communicate directly with the member's assigned Navigator/Care Manager regarding the HCBS Level of Service Determinations for each service.
3. After the selected HCBS Providers have submitted HCBS Individual Service Plans (ISPs) for each service and receive Determinations of Approval, the Navigator/Care Manager will submit a revised/updated BH HCBS Plan to the Member's CDPHPs HARP Care **Manager by fax: (518)295-2025**
 - a. Also must be done anytime revisions/updates are made to the Member's BH HCBS Plan of Care.