Licensed Practitioner of the Healing Arts (LPHA) Attestation

INSTRUCTIONS

HCBS Level of Care (LOC) Determination is comprised of meeting three factors: Target Population, Risk Factors, and Functional Criteria. Each of the 3 factors require collection of supporting documentation and materials. The Health Home Care Manager (HHCM), Child and Youth Evaluation Service (C-YES), or Developmental Disability Regional Office (DDRO) Children's liaison should obtain the supporting documentation and materials prior to completing the Home and Community Based Services (HCBS)/Level of Care (LOC) Determination in the Uniform Assessment System (UAS). This form is part of the enrollment application for HCBS for a Medicaid (or Medicaid eligible) member <21 years of age.

Functional Criteria will be completed by the HHCM, C-YES or DDRO and be considered as part of the LOC determination prior to the Medicaid (or Medicaid eligible) member receiving HCBS services.

The HHCM, C-YES or DDRO will refer the member to an approved LPHA to review appropriate materials and supporting documentation and complete this form to support Target and Risk factors that contribute to the member's HCBS Level of Care (LOC) to determine HCBS eligibility.

A Licensed Practitioner of the Healing Arts (LPHA) who has the ability to diagnose within their scope of practice under NY State law must attest that the member meets the target and risk eligibility requirements to receive HCBS (see Appendix A below for complete list of LPHAs). The LPHA must determine in writing that the child, in the absence of HCBS is at risk of institutionalization (i.e hospitalization). The LPHA must provide documentation to support the target and risk criteria and complete this form.

- 1. Section A- MUST be completed
- 2. The LPHA must complete ONE of the following sections B, C OR D. The Medicaid (or Medicaid eligible) member should be identified in ONE of the following Target populations, Serious Emotional Disturbance (SED), Medically Fragile (MF), or Developmentally Disabled (DD), which correspond to Sections B,C,OR D respectively.

Risk will be identified within each of Sections B, C, or D based on the Target population identified.

3. Section E MUST be completed for ALL target populations.

Section A					
Demographics					
Child/Youth First Name	Middle Initial	Last Name			
Date of Birth	Biological Sex ☐ Male ☐ Female	Gender Expression	CIN# (if available)		
Preferred Language	Current/Primary Address				

Section B

Serious Emotional Disturbance (SED) Target Criteria

1. Ages 0 to their 21st birthday						
Child/youth is currently between the ages of 0 to their 21st birthday AND 2. Child/youth meets any one of the DSM diagnoses below as determined by the appropriately qualified LPHA						
					Serious Emotional Disturbance (SED) – the member has Statistical Manual of Mental Disorders (DSM) diagnose	_
					 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 Gender Dysphoria Elimination Disorders Sleep-Wake Disorders Sexual Dysfunctions Medication-Induced Movement Disorders Attention Deficit/Hyperactivity Disorders Tic Disorders
Diagnoses Name and Code	#					
Diagnoses Category						
AND						
☐ The Medicaid member has experienced serious emotional disturintermittent basis, as determined by a the LPHA.	bance over the past 12 months on a continuous or					
Serious emotional disturbance means a child or adolescent has a most current Diagnostic and Statistical Manual of Mental Disorders (emotional disturbance over the past 12 months on a continuous or	(DSM) AND has experienced functional limitations due to					
The functional limitations must be moderate in at least two of the foareas:	ollowing areas or severe in at least one of the following					
ability to care for self (e.g. personal hygiene; obtaining and ea	ating food; dressing; avoiding injuries); or					
family life (e.g., capacity to live in a family or family like environsiblings and other relatives; behavior in family setting); or	nment; relationships with parents or substitute parents,					
social relationships (e.g. establishing and maintaining friendsh other adults; social skills; compliance with social norms; play a						
self-direction/self-control (e.g. ability to sustain focused attention	on for along enough period of time to permit completion of					
age-appropriate tasks; behavioral self-control; appropriate judg						

Section B, continued
Serious Emotional Disturbance (SED) Risk Factors
The child meets one of the following factors 1–4 AND MUST also meet factor 5.
1. The child is currently in an out-of-home placement, including psychiatric hospital, or
2. The child has been in an out-of-home placement, including psychiatric hospital within the past six months, or
3. The child has applied for an out-of-home placement, including placement in psychiatric hospital within the past six months, or
4. The child currently is multi-system involved (i.e., two or more systems) and needs complex services/supports to remain successful in the community,
AND
5. The child must be SED as determined by a licensed practitioner of the healing arts (LPHA) who has the ability to diagnose within his/her scope of practice under the state law. The LPHA signing this form has determined that the child (in the absence HCBS) is at risk of institutionalization (i.e., hospitalization or nursing facility placement).
Outof-home placement in LOCRisk Factor #1–4 includes: RRSY, RTF, RTC, or other congregate care setting, such as SUD residential treatment facilities, group residences, institutions in the OCFS system or hospitalization.
Multi-system involved means two or more child systems including: child welfare, juvenile justice, OASAS clinics or residential treatment facilities or institutions, OMH clinics or residential facilities or institutions, OPWDD services or residential facilities or institutions, or having an established IEP through the school district.
Institutionalization - admission to a hospital (medical or psychiatric), ICF/IID, RTF or nursing facility
Section C
Medically Fragile (MF) Target Criteria
1. Ages 0 to their 21st birthday
☐ Child/youth is currently between the ages of 0 to their 21st birthday
Note: MF children may optionally transition to MLTC on their 18th birthday
The child must have a documented physical disability Check one:
☐ Current and approved SSICertification or
☐ DOH5144 or
Completed and approved Forms: DOH-5151, DOH-5152 and DOH-5153
Medically Fragile (MF) Risk Factors
The child must be Medically Fragile as determined by a licensed practitioner of the healing arts (LPHA) who has the ability to diagnose within his/her scope of practice under the state law. The LPHA signing this form has determined that the child (in the absence of HCBS) is at risk of institutionalization (i.e., hospitalization or nursing facility placement). The LPHA must submit written clinical documentation to support the determination.
Institutionalization - admission to a hospital (medical or psychiatric), ICF/IID, RTF or nursing facility

Section D

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Developmental Disability who are Medically Fragile (DD/MF) Target Criteria		
1. Ages 0 to their 21st birthday		
☐ Child/youth is currently between the ages of 0 to their 21st birthday		
Medically Fragile as defined by subset of questions from CANS-NY Algorithm- The HHCM, C-YES, or DDRO will complete the subset of questions from the CANS-NY		
3. Child has developmental disability as defined by OPWDD which meets one of the criteria a-c as well as criteria d and e		
a. Is attributable to intellectual disability, cerebral palsy, epilepsy, neurological impairment, familial dysautonomia, Prad- er-Willi syndrome or autism, OR		
 □ b. Is attributable to any other condition of a child found to be closely related to intellectual disability because such con- dition results in similar impairment of general intellectual functioning or adaptive behavior of a child with intellectual disability OR requires treatment and services similar to those required for such children, OR 		
C. Is attributable to dyslexia resulting from a disability described above; and originates before such child attains age 22;		
AND		
d. Has continued or can be expected to continue indefinitely; and		
e. Constitutes a substantial handicap to such child's ability to function normally in society.		
Developmental Disability who are Medically Fragile (DD/MF) Risk Factors		
☐ The child must be Medically Fragile as determined by a licensed practitioner of the healing arts (LPHA) who has the ability to diagnose within his/her scope of practice under the state law. The LPHA signing this form has determined that the child (in the absence of HCBS) is at risk of institutionalization (i.e., hospitalization or nursing facility placement). The LPHA must submit written clinical documentation to support the determination.		
Institutionalization - admission to a hospital (medical or psychiatric), ICF/IID, RTF or nursing facility		
Section E		
LPHA information and signature		
Name of LPHA: License No. (ExML0000022222)		
Business Street Address: City, State, and Zip code		

Date:

Signature:

APPENDIX A

Licensed Professional of the Healing Arts (LPHA)

Licensed Practitioner of the Healing Arts: An individual professional who is a Licensed Psychiatrist, Licensed Clinical Social Worker, Nurse Practitioner, Physician, Physician Assistant or Psychologist and practicing within the scope of their State license.

- **a. Psychiatrist** is an individual who is licensed and currently registered to practice medicine in New York State, who (i) is a diplomat of the American Board of Psychiatry and Neurology or is eligible to be certified by that Board, or (ii) is certified by the American Osteopathic Board of Neurology and Psychiatry or is eligible to be certified by that Board.
- **b. Licensed Clinical Social Worker (LCSW)** is an individual who is currently licensed and registered as a Clinical Social Worker by the New York State Education Department.
- **c. Nurse Practitioner** is an individual who is currently certified and currently registered as a nurse practitioner by the New York State Education Department.
- **d. Physician** is an individual who is licensed and currently registered as a physician by the New York State Education Department.
- **e. Physician Assistant** is an individual who is currently licensed and registered as a physician assistant by the New York State Education Department.
- f. Licensed Psychologist is an individual who is currently licensed and currently registered as a psychologist by the New York State Education Department from the New York State Education Department and who possesses a doctoral degree in psychology.