TEXAS HEALTH AND HUMAN SERVICES COMMISSION

CHRIS TRAYLOR
EXECUTIVE COMMISSIONER

Memorandum

To: Managed Care Program Oversight
Enrollment Resolution Services
Program Support and Utilization Review
Managed Care Organizations

From: Emily Zalkovsky
Director, Program Management
Medicaid/CHIP Division

Subject: Form H2060, Needs Assessment Questionnaire, Completion Requirements for STAR+PLUS HCBS Members Receiving Community First Choice Services

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Effective Date: January 20, 2016

This memorandum applies to the Home and Community Based Services (HCBS) STAR+PLUS waiver (SPW) program, including HCBS SPW delivered by a Medicare-Medicaid Plan.

Per the STAR+PLUS Handbook and Uniform Managed Care Contract, Section 8.3.3., managed care organizations (MCOs) must complete Form H2060, Needs Assessment Questionnaire, for HCBS STAR+PLUS Waiver members. The MCO must use Form H2060:

- whenever there is an assessment of the need for or a change in services, including the initial contact with the member;
- at the member's annual reassessment;
- when the member requests services or a change in services; and
- when the MCO determines there is a need for a change in the member's services.

Effective with this memorandum, if an HCBS SPW member also receives Community First Choice services, the MCO can complete Form H6516, Community First Choice Assessment, in lieu of completing the Form H2060. Form H6516 contains all required elements of the Form H2060 and, therefore, can be used for assessing and reassessing HCBS SPW services for members receiving CFC.

If you have any questions regarding this memorandum, you may contact Amanda Dillon at 512-462-6396 or at Amanda.dillon@hhsc.state.tx.us.