



MEMORANDUM

To: Mental Health Outpatient Treatment and Rehabilitative Services (MHOTRS) Programs

From: New York State Office of Mental Health and Department of Health

Date: February 2, 2026

Subject: MHOTRS Participation in the New York Health Equity Reform (NYHER) 1115 Waiver Social Care Networks (SCNs)

Dear MHOTRS Programs,

The New York State Office of Mental Health (NYS OMH), in close collaboration with the Department of Health (DOH), is outreaching MHOTRS programs to ensure awareness of, and engagement with, the NYS Medicaid's [Social Care Network \(SCN\) program](#) through the [New York Health Equity Reform \(NYHER\) 1115 Waiver](#), including ways MHOTRS programs can participate. Building partnerships between behavioral health providers and regional lead SCNs will help ensure Medicaid members with behavioral health conditions can be screened for, navigated to, and can access the health-related social needs (HRSN) services they are eligible to receive.

In January 2025, DOH launched nine [regional SCNs](#), each with a lead entity, to consistently identify and address the HRSN of Medicaid members, and to support an ecosystem of organizations that meet these needs. SCNs contract with and reimburse community-based organizations, behavioral health providers, health care providers, and other organizations, to:

1. **Screen** Medicaid members for HRSN,
2. **Navigate** members to services which address their identified HRSN, and
3. **Deliver** enhanced HRSN services related to housing, nutrition, and transportation.

MHOTRS programs can play a critical role in ensuring Medicaid members are screened and navigated to HRSN services.

NYS OMH and DOH seek the support of MHOTRS programs to help Medicaid enrollees get screened for HRSN and connected to an SCN.

Upon screening, MHOTRS clients with certain health conditions, such as Serious Mental Illness, and social needs may be determined eligible for one-time or time-limited services as part of the SCN program, in addition to existing benefits and services already available in the community.

MHOTRS clients enrolled in Medicaid managed care have the opportunity to access a rich menu of enhanced (or “level 2”) HRSN services in the following categories:

1. Nutrition services
 - Nutritional counseling and classes
 - Medically tailored or clinically appropriate home-delivered meals
 - Food prescriptions
 - Fresh produce and nonperishables (i.e., pantry stocking)
 - Cooking supplies (kitchenware, microwave, refrigerator)
2. Housing supports
 - Housing transition and navigation services
 - Community transitional services
 - Rent/utilities
 - Pre-tenancy and tenancy sustaining services
 - Home remediation
 - Asthma remediation
 - Home accessibility and safety modifications
 - Medical respite
3. Social care management and navigation
 - Enhanced HRSN-related care management, including outreach, referral, education, and linkages to other state and federal programs
 - Connection to clinical case management
 - Connection to childcare, employment, education, and interpersonal violence resources
4. Transportation
 - Reimbursement for public and private transportation to connect to HRSN services and HRSN case management activities

Flexible Options to Help Clients Get an SCN Screening

MHOTRS programs are encouraged to connect with regional lead SCNs and can support the screening of Medicaid members several different ways, including:

1. Inform clients about SCNs and the services and supports they can provide.
2. Encourage clients to complete a self-screening. All SCNs have an option on their websites for Medicaid enrollees to self-screen.
3. Refer clients to an SCN screener who can assist the client with completing the screening.
 - MHOTRS programs can contact their regional SCN to ask if they could schedule times when a screener can visit a MHOTRS program location to assist clients get screened.
4. Contract directly with an SCN to be reimbursed for screening and navigating clients.

As outlined in the [Social Care Network Program, Billing, and Governance Operations Manual](#), providers contracted with lead SCNs can receive time-based reimbursement for screening any Medicaid member (\$17.50 per 15-minute increment, up to \$35/screening), consistent with the SCN regional fee schedule. Time spent under screening includes the time spent explaining the

SCN program to a member, obtaining consent, walking through the screening with the member, inputting the member’s information and answers to screening questions, and responding to the member’s questions about next steps.

Contracting with an SCN for Screening, Navigation, and/or HRSN Services

MHOTRS programs can directly contract with lead SCNs and receive reimbursement for screening, navigation, or HRSN service provision. MHOTRS programs can select which SCN services they want to provide and do not have to contract for provision of all SCN services.

Organizations contracted with an SCN are required to meet the regional SCN’s requirements related to training, data entry and sharing, connection to IT platform, and reimbursement. Additionally, connection to SCN IT platforms allow for insight into SCN closed-loop referrals, supporting effective and streamlined care management with feedback to providers on SCN services rendered.

Step in SCN member journey and relevant fee schedule section	Fee schedule rate
Screening	\$17.50/15 min, up to \$35 per screening
Eligibility Assessment (EA)	\$17.50/15 min
Navigation to Existing Federal, State, and Local Services	\$17.50/15 min, up to \$140 per event (as of 1/31/25)
Navigation to Enhanced HRSN Services	\$17.50/15 min, up to \$350 per month
Enhanced HRSN Service Delivery, including Care Management	

As an example, providing screening, assessments and navigation to 500 clients a month can bring in a monthly revenue of up to \$192,500.

While MHOTRS programs are certainly encouraged to contract with SCNs, as appropriate, it is not required. Regardless of contractual partnerships, all MHOTRS programs are recommended to minimally develop an awareness and understanding of SCNs to educate and link individuals and families accordingly.

MHOTRS and SCN Allowable Service Combinations

MHOTRS and SCN services are complementary, not duplicative. Individuals receiving services from a MHOTRS program are **not** excluded from the services and resources offered through SCNs, including but not limited to nutrition, housing, and transportation services. Individuals receiving MHOTRS can be connected to SCNs and receive an appropriate screening to determine eligibility for social care services and resources.

MHOTRS programs may already complete screenings related to HRSN or social determinants as part of their current assessment process or other workflows. These screenings are not duplicative of the SCN HRSN screening (even if they are using the same AHC tool).

Screening for HRSN services may be done as part of a comprehensive assessment, though to be reimbursed via NYHER, MHOTRS programs would need to:

- be contracted with the regional SCN,
- ask additional screening questions¹ that are not included in the existing AHC screening tool (e.g., question 0 for consent, employment, education, demographic questions) to ensure a complete screening, and
- complete the screening directly in the SCN IT platform, or in an interoperable platform where data quality standards are met, and the screening can be sent to and accepted by the SCN.

MHOTRS provider agencies contracted with an SCN for completion of SCN screenings cannot submit a MHOTRS program claim for completion of the SCN's HRSN screening, as the provider agency will be separately reimbursed by the SCN.

Thank you in advance for your support of this important work. Please submit any questions to SDH@health.ny.gov, copying omhchildclinics@omh.ny.gov and omh.sm.adult-clinic@omh.ny.gov.

Additional resources can be found on DOH's [SCN website](#):

Information for providers, including how to partner with SCNs:

- [An introduction to the SCN program for healthcare providers](#), including how providers can engage with SCNs and be reimbursed for HRSN screening and navigation
- [Guidance for providers on SCN IT platforms](#)

Information that can be shared with members:

- [A fact sheet](#) on how the SCN program can address members' HRSNs
- [A short video](#) providing a brief overview of how SCNs can help members access services
- Contact information for members to get in touch with their local SCN

¹ Screening questions are outlined in the [Social Care Network Program, Billing, and Governance Operations Manual](#) and are in alignment with the Centers for Medicaid and Medicare Services' [AHC Health-Related Social Needs Screening Tool](#).