



CIRCARE

INTEGRATING HEALTH SERVICES

CORE-HCBS Provider Fact Sheet

Circare offers a range of Home & Community-Based Services (HCBS) and Community Oriented Recovery & Empowerment (CORE) services for HARP-enrolled individuals 21 and older.

To receive HCBS services, an individual must have a Care Manager (CM) or be connected to a Recovery Coordination Agency (RCA). Circare will provide RCA services to any individual who is not connected to a Care Management Agency.

For HCBS services, the individual must be referred by their CM or RCA CM. CORE services do not require a CM or provider referral. Individuals may self-refer for CORE services, and family/friends and non-CM providers may refer individuals to CORE services.

CORE services are designed for individuals whose mental/behavioral health symptoms are a barrier to achieving their goals and objectives, and they will benefit from ongoing support. HCBS services are for those whose symptoms are barriers so they can focus on building educational and/or employment skills.

HCBS Services

- Habilitation
- Education Support
- Pre-Vocational Support
- Intensive Supported Employment
- Ongoing Supported Employment

CORE Services

- Empowerment Services - Peer Support
- Family Support and Training
- Psychosocial Rehabilitation
- Psychosocial Rehabilitation with Education Services
- Psychosocial Rehabilitation with Employment Services

Which Service is Optimal?

Importantly, evidence suggests that individuals achieve and sustain recovery best when they are simultaneously involved in more than one service. This is especially true when Peer Support is coupled with efforts to further education and obtain competitive employment.

Your clients may say things that provide clues to the kinds of support they would value. This *Fact Sheet* may help them crystalize and identify their needs and wants. Should they decide to explore which Circare services might be of interest, they complete both sides of the *Referral Form*. Our Specialists will work with them to identify their interests, needs, values and goals. Together they will discuss the best service options as they collaborate on the initial Individual Service Plan.



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Here are some of the more common things we hear individuals say, matched to our services:

- **Improving Independence**

- “I want to learn how to manage my symptoms – I don’t want them to get worse.”
- “I used to manage my money. I’d like to do that again and be able to make a budget.”
- “I’d like to learn how to schedule my time better, to remember my appointments.”
- “I want computer skills, so I know how to use a computer or smart phone.”
- “I used to keep up my own apartment – I’d like to do that again.”
- “I’d like to learn how to take the bus – or get transportation to appointments.”

Service objectives are to develop participant skills to the greatest degree possible where they live, work, learn, and socialize, to overcome barriers caused by the individual’s behavioral health disorder and promote independence and full community participation. Services focus on developing new skills that support more independent living:

instrumental activities of daily living, following instructions, using community resources.

- **CORE Psychosocial Rehabilitation** – when symptom management is included.
- **HCBS Habilitation** – when symptoms generally don’t interfere with learning skills.

- **Getting and Keeping Employment**

- “I want to work but I’m not ready yet – I want to explore and research more.”
- “I want to work – but I don’t want to lose my benefits.”
- “To get a good job, I want to get my GED, attend EOC, BOCES or Community College.”
- “If I went back to school, I think I’d like help studying, scheduling classes, etc.”
- “I’d like help writing a resume, filling out job applications, or applying online.”
- “I need help with disclosing my disability and asking for accommodations.”

The 6 employment-focused services help the individual gain and retain competitive employment. Which service is most appropriate depends on their readiness for employment, if they need additional education or training to get a competitive job, if they are currently working, and what skills they want to develop: exploring potential jobs, attending classes or training specific to employment, resume writing, interviewing, problem solving, work/life balance, coping skills on the job. Services that support furthering education are an integrated part of helping the individual get and keep a job. CORE services include symptom management support; HCBS services do not.

- **CORE Psychosocial Rehabilitation with Education Focus**
- **HCBS Educational Support Services**
- **CORE Psychosocial Rehabilitation with Employment Focus**
- **HCBS Pre-Vocational Services**
- **HCBS Intensive Supported Employment**
- **HCBS Ongoing Supported Employment**

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- **Support from Someone Who Has Similar Experience**

“I’d like to get better at speaking up for myself.”

“I’d like to socialize more, but my friends are still using, so I’m hesitant.”

“I need help communicating my mental health issues with my friends & family.”

“I need to be better connected to activities and resources in my community.”

Services focus on rehabilitation, recovery, resilience, delivered by a peer who is living in recovery from a behavioral health diagnosis. In a unique way, through *shared personal experiences*, peers and individuals work together to develop skills for coping with and managing symptoms, building the individual’s natural supports of family and friends who support their recovery and enhance the quality of their personal and family life.

- **CORE Empowerment Services – Peer Support**

- **Support for the ‘Family of Choice’**

“My family/roommate doesn’t understand my mental health.

“I’d like to get along better with my family or friends.”

“I think my family/friends could help me more if they knew more about my illness.”

The individual’s *family of choice* are those who support them or who may live with them. Services offers instruction, emotional support, and skill building necessary to actively support the individual’s goals and sustain their recovery.

- **CORE Family Support & Training**

Referring Individuals to Services

With your help as needed, the individual completes both sides of the *Provider Referral* form.

Care Managers: if your client wishes to add our CORE-HCBS Direct Service Staff to their Care Team, please add us to an updated **DOH-5055** for them to sign and send it with the *Referral*.

For Care Managers only & for HCBS services only: Please include a *HARP Eligibility Assessment Report, HARP Eligibility Assessment Summary Report, and Service Level Determination/Level of Service Determination (LOSD)*.

Send all documents to us:

- Fax to: (315) 472-0084
- Scan & in an encrypted email to: centralizedintake@cir.care
- Mail: CIRCARE, CORE-HCBS Referrals, 620 Erie Blvd. West, Suite 302, Syracuse NY 13204
- Call us to refer by phone or if you have any questions: (315) 472-7363 and ask for the CORE-HCBS Program. Leave a VM and the appropriate Circare professional will return your call within 3 business days.