

NEW YORK STATE DEPARTMENT OF HEALTH

Nursing Home Transition and Diversion Medicaid Waiver

Home and Community-Based Services Medicaid Waiver for Nursing Home Transition and Diversion

The Home and Community-Based Services (HCBS) Medicaid Waiver for Nursing Home Transition and Diversion (NHTD) is one of the options available to New Yorkers with disabilities and seniors so they may receive services in the most appropriate, least restrictive setting. This summary provides a general overview of the NHTD waiver.

I. Philosophy

The NHTD Medicaid waiver was developed based on the philosophy that individuals with disabilities and/or seniors have the same rights as others to:

- Be in control of their lives.
- Encounter and manage risks and learn from their experiences.

II. What is an HCBS Medicaid Waiver?

A waiver:

- Is an opportunity for comprehensive services to be available in the community rather than in an institution.
- Allows states to assemble a package of carefully tailored services to meet the needs of a targeted group in a community-based setting.
- Maintains the waiver participant's health and welfare through an individualized service plan.
- Assures the overall cost of serving waiver participants in the community is less than the cost of serving a similar group in an institution.



III. Why did New York State Develop the NHTD Medicaid Waiver?

- State legislation authorized a new HCBS Medicaid waiver to provide a cost-effective community-based alternative to nursing facility care, reflecting the State's commitment to serve all persons in the least restrictive setting, appropriate to their needs.
- Individuals with disabilities and seniors, their families and other interested persons advocated for additional options for community-based services and supports.
- Otherwise existing Medicaid services and other supports may not be sufficient or most efficient to meet the needs of some individuals with disabilities and seniors to transition into or remain in the community.

IV. What are the Expected Outcomes?

- Participants will have an additional community-based choice.
- Participants will have opportunities to live meaningful and productive lives in their communities.
- Families and other informal caregivers will have access to additional supports to assist them in their caregiver roles.

V. To be Eligible for the NHTD Medicaid Waiver an Individual Must:

- Be capable of living in the community with needed assistance from available informal supports, non-Medicaid supports and/or Medicaid State Plan services and be in need of one or more waiver service;
- Be eligible for nursing home level of care;
- Be authorized to receive Medicaid Community Based Long Term Care;
- Be at least 18 years of age or older;
- Be considered part of an aggregate group that can be cared for at less cost in the community than a similar group in a nursing home;
- Choose to live in the community as a participant in this waiver rather than in a nursing home; and
- Not participate in another HCBS waiver.

VI. Regional Resource Development Centers (RRDC)

The NHTD waiver is administered through a network of Regional Resource Development Centers (RRDC), each covering specific counties throughout the State. The contact person at the RRDC is the Regional Resource Development Specialist (RRDS). Additionally, the RRDC employs a Nurse Evaluator (NE).



Responsibilities of the RRDS include:

- Interviewing potential waiver participants;
- Assisting participants to access approved providers for Service Coordination;
- Reviewing Service Plans for approval;
- Determining whether an applicant participant meets all non-financial eligibility requirements for the waiver;
- Maintaining regional budgets for waiver services; and
- Issuing Notice of Decision forms to applicants to approve or deny waiver participation and to participants as necessary for ongoing participation.

Responsibilities of the NE include:

- Utilizing clinical expertise to review medically complex Service Plans;
- Providing technical assistance to the RRDS and waiver service providers; and
- Resolving issues associated with level of care determinations.

VII. Quality Management Specialists (QMS)

The NHTD waiver relies on a network of Quality Management Specialists (QMS) throughout NYS, each covering specific regions. The primary responsibility of the Specialists is to assure quality under the waiver through a range of functions, including:

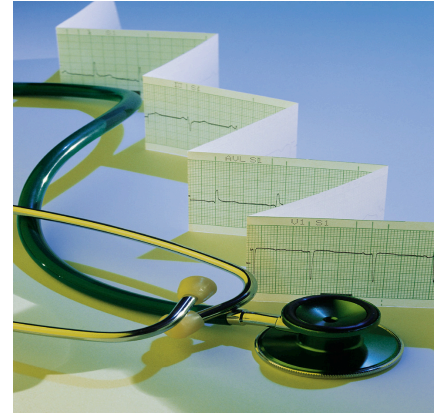
- Assisting in the retrospective review of Service Plans;
- Overseeing the incident reporting process;
- Conducting participant satisfaction surveys; and
- Performing trend analysis in their regions with recommendations for improvements.

VIII. Available NHTD Waiver Services

NHTD waiver services are used to complement already available sources of support and services. The following provides general definitions. More specific information will be provided to applicants and participants as part of the service planning process. Others may access on the DOH web under Long Term Care

http://www.nyhealth.gov/facilities/long_term_care/.

1. Service Coordination
Assistance with the development and implementation of a person-centered individualized Service Plan that will lead to the waiver participant's independence, integration into the community, health and welfare.
2. Assistive Technology
Equipment that will improve the participant's independence, decrease reliance on staff and be a cost effective aid for community integration. This service supplements Durable Medical Equipment provided through the general Medicaid program.
3. Community Integration Counseling
Counseling service provided to waiver participants who are coping with altered abilities and skills, revisions in long term expectations and/or changes in their roles in relation to significant others.
4. Community Transitional Services
Assistance in transitioning from a nursing home back to the community, including the cost of moving, essential furnishings, deposits for utilities, security deposits or one-time cleaning services prior to occupancy.
5. Congregate and Home Delivered Meals
Meals for waiver participants who cannot prepare or obtain nutritionally adequate meals for themselves, or when the provision of such meals will decrease the need for more costly supports to provide in-home meal preparation.
6. Environmental Modifications Services
Internal and external physical adaptations to the home necessary to assure the waiver participant's health and welfare in that setting. Environmental modifications may be made to a residence owned by the participant or to rental units with permission received from the landlord.
7. Home and Community Support Services
Oversight and/or supervision as a discrete service or in combination with assistance with activities of daily living (ADL) and instrumental activities of daily living (IADL).
8. Home Visits by Medical Personnel
Services provided by a physician, nurse practitioner or physician's assistant to diagnose, treat and monitor wellness to preserve the waiver participant's functional capacity to remain at home. An evaluation of the caretaker's ability to maintain his/her role is conducted, as well as an assessment of the living environment to identify if it can support the participant's medical needs.
9. Independent Living Skills Training Services
Training to improve or maintain the waiver participant's ability to live as independently as possible by focusing on essential community living skills such as task completion, money management, interpersonal skills, sensory/motor skills, problem solving skills and the ability to maintain a household.
10. Moving Assistance
Transport of the participant's possessions and furnishings when moving from an inadequate or unsafe housing situation or to a location where more informal supports will be available.



11. Nutritional Counseling/Educational Services

Assessment, planning, education and counseling for the waiver participant's nutritional needs and eating patterns.

12. Peer Mentoring

Improvement of the waiver participant's self-sufficiency, self-reliance, and ability to access needed services, goods and opportunities in the community accomplished through education, teaching, instruction, information sharing, and self-advocacy training, provided by a "peer" (with similar disabilities).

13. Positive Behavioral Interventions and Supports (PBIS)

Services intended to decrease the frequency or intensity of the waiver participant's significant behavioral difficulties that may jeopardize his/her ability to remain in the community of choice due to inappropriate responses to events in his/her environment.



14. Respiratory Therapy

Services providing preventive, maintenance and rehabilitative airway-related techniques and procedures to the waiver participant in his/her home.

15. Respite Services

Relief for non-paid primary caregivers of a waiver participant provided in a 24 hour block of time in the home.

16. Structured Day Program Services

Outpatient congregate setting providing services designed to improve or maintain waiver participants' skills and abilities to live as independently as possible within the community. Services may include a wide array of interventions and supports ranging from pre-vocational skill building to socially-oriented activities.

17. Wellness Counseling Service

Intermittent evaluation visits to waiver participants who are medically stable to assist them in maintaining optimal health status.

IX. The Use of a Regional Aggregate Budgeting System

Federal rules require cost neutrality, which is the assurance that the overall Medicaid costs for waiver participants is less than the Medicaid costs for a similar group of Medicaid recipients residing in a nursing home.

The NHTD waiver will use a regional aggregate cap to maintain cost neutrality. This will permit the waiver to serve individuals with a wide range of needs.

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For more information #all ,



(800) 752-1821

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