



Department
of Health

NYS Department of Health Nursing Home Transition and Diversion (NHTD) Program

Medicaid Waiver Orientation Training: Unit 1

Purpose

This training serves as an introduction and overview of the New York State Department of Health (NYSDOH) Nursing Home Transition and Diversion (NHTD) Medicaid Waiver program.

The training provides a fundamental understanding of the waiver program, services provided, approaches to care, documentation, and the participant rights and protections.

The training represents a basic, minimum level of knowledge required prior to providing waiver services and that should be repeated on an ongoing annual basis.

Objectives

Participants in this training will come away with the ability to:

- Describe the waiver program, including its history, goals, and organizational structure
- Identify characteristics of the waiver population and participant rights
- Implement best practices as defined by the philosophy and requirements of the waiver program

People Choose Community Living Over Residing in Institutions

Recommended Content

Americans with Disabilities Act

In 1999 the U.S. Supreme Court recognized that the **Americans with Disabilities Act (ADA)** and its regulations established a right to a life in the community and an end to the isolation and segregation that is inherent to institutionalization.

- The ADA is a civil rights law that prohibits discrimination against individuals with disabilities in all areas of public life, including jobs, schools, transportation, and all public and private places that are open to the general public.
- The purpose of the law is to make sure that people with disabilities have the same rights and opportunities as everyone else.
- It guarantees equal opportunity for individuals with disabilities in public accommodations, employment, transportation, state and local government services, and telecommunications.

The Olmstead Act

- This landmark 1999 United States Supreme Court decision was based on the Americans with Disabilities Act.
- Requires states to eliminate unnecessary segregation of persons with disabilities and to ensure that persons with disabilities receive services in the most natural setting appropriate to their needs.
- **The Olmstead Act** applies to people of all ages who need Long-Term Services and Supports, including those who acquire their disabilities after they reach age 65. Many older adults need assistance with activities of daily living.
- Medicaid is the main funding source for long-term services and supports, which are increasingly home and community based.

Home and Community-Based Services 1915(c) Waivers

- Enabled states to provide home and community-based services that help Medicaid beneficiaries participate in services in the most appropriate natural setting.
- The **Home and Community-Based Services (HCBS) Final Rule**, a federal regulation effective **March 17, 2014**, set new standards to promote community involvement and independence for people who receive Medicaid funded Home and Community-Based Services (HCBS).
- These federal standards, including their more robust person-centered planning standards, apply to all HCBS provided through New York's 1915(c) waivers, Community First Choice Option, and the 1115 waiver, which includes Managed Care and Managed Long Term Care.

NYS Department of Health Nursing Home Transition and Diversion Waiver

- **The Nursing Home Transition and Diversion (NHTD) Medicaid waiver** builds upon federal requirements and philosophy that individuals with disabilities and/or seniors have the same rights as others.
- This includes the right to be in control of their lives, encounter and manage risks, and learn from their experiences. This is balanced with the Waiver program's responsibility to assure the waiver participants' health and welfare.
- Person-centered philosophy drives the goals and objectives of the NHTD waiver. It informs the service plans, defines the roles and responsibilities of the participant and staff, and defines effective program operations.

Research Findings and Personal Accounts

There is a high preponderance of evidence that individuals moving from institutional to community settings consistently develop their daily living skills (adaptive behavior) to a higher level than their matched peers who remain institutionalized, and/or that they themselves had developed prior to leaving the institutional settings.

- The consistency of these findings is notable.
- People who moved from an institution to a community living environment noted that it was fundamental to improving quality of life.
- They found everyday activities to be meaningful, particularly those activities often taken for granted by those who have not experienced institutionalization.

Research Findings and Personal Accounts continued

- Participating in the community leads to building or rebuilding one's social identity.
- Participants described loss of autonomy when living in institutional settings, which led some to grapple with their sense of self and their identity as members of a community.
- Most participants described a positive change in their sense of self as they transitioned to becoming fully participating members of their communities.

Sources: Administration on Community Living (<https://acl.gov/about-community-living>); personal stories on the ADA's impact (<https://www.mprnews.org/story/2010/07/22/ada-stories>); "Olmstead: Community Integration for Everyone" (https://www.ada.gov/olmstead/olmstead_about.htm); NYS Money Follow the Person Demonstration (MFP) (https://www.health.ny.gov/health_care/medicaid/redesign/nys_money_follows_person_demonstration.htm); testimonials from HCBS recipients; and anecdotal evidence.

Conclusions

- Based on successful implementation of Federal Acts and Rulings, Research, and Personal Accounts, evidence indicates overwhelming satisfaction living in the community versus residing in an institution.
- Individuals want and choose living in the community in part because:
 - They are respected, held in high regard, and have the right to self-determination.
 - They establish goals for a meaningful quality of life.
 - They reside in the most appropriate natural setting.

Conclusions continued

Individuals want and choose living in the community in part because:

- There is increased social, domestic, and self-care skill development.
- They have the right to choose, as well as taking appropriate risks, with the ability to learn from them.
- They are active members of the community, where partnerships and friendships are encouraged and skills are taught as needed, yielding positive outcomes.

Nursing Home Transition and Diversion (NHTD) Waiver Program

Recommended Content

Nursing Home Transition and Diversion (NHTD) Medicaid Waiver

- The Nursing Home Transition and Diversion (NHTD) Medicaid Waiver is a Home and Community Based Services (HCBS) program, administered by the New York State Department of Health (DOH) through contractual agreements with Regional Resource Development Centers (RRDC).
- The NHTD waiver is for individuals who have a physical disability and are aged 18-64; or seniors aged 65 and older. Medicaid funding is used to provide supports and services to assist individuals toward successful inclusion in the community. It allows these individuals the opportunity to receive services in the most appropriate, natural setting.
- Waiver participants may be referred to the program from a nursing facility or other institution (transition) or be referred from a community source and choose to participate in the waiver to prevent institutionalization (diversion).

Nursing Home Transition and Diversion (NHTD) Medicaid Waiver continued

- Waiver services may be considered when informal supports, local, State and federally funded services and Medicaid State Plan services are not sufficient to assure the health and welfare of the individual in the community, or when waiver services are a more efficient use of Medicaid funds.
- NHTD waiver services can only be provided to eligible individuals whose application has been approved by their local RRDC.

What is a Home and Community Based Services (HCBS) 1915(c) Medicaid Waiver?

In 1981, Congress authorized the waiver of certain federal requirements to enable a state to provide home and community services (other than room and board) to individuals who would otherwise require institutional/nursing facility services reimbursed by Medicaid.

The waiver programs are called 1915(c) waivers, named after the section of the Social Security Act that authorized them.

Under 1915(c) waiver authority, states can provide services not usually covered by the Medicaid program, as long as these services are required to keep the person from being institutionalized.

A 1915(c) 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.

Why did New York State Develop the NHTD Medicaid Waiver?

- In 2007, State legislation authorized a new HCBS Medicaid waiver, the NHTD 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.
- Existing Medicaid services and other supports were not sufficient to meet the needs of some individuals with disabilities and seniors.

Philosophy

The NHTD Medicaid waiver was developed based on the philosophy that individuals with disabilities and/or seniors have the same rights as others. This includes the right to be in control of their lives, encounter and manage risks and learn from their experiences. This is balanced with the waiver program's responsibility to assure the waiver participants' health and welfare.

Waiver services are provided based on the participant's unique strengths, needs, choices and goals. The individual is the primary decision-maker and works in cooperation with providers to develop a Service Plan. This process leads to personal empowerment, increased independence, greater community inclusion, self-reliance and meaningful productive activities. Waiver participant satisfaction is a significant measure of success of the NHTD waiver.

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 and services to assist them in their caregiver roles.

NHTD Waiver Eligibility Criteria

An individual applying to participate in the waiver must meet all of the following criteria in order to be approved for the NHTD waiver. The individual must:

- Be between age 18 and 64 with a physical disability, or age 65 and older upon application to the waiver;
- Choose to participate in the waiver;
- Be able to identify a residence in which they will be residing when receiving waiver services. Residential settings of 4 or more unrelated individuals are excluded. The location must be Home and Community Based (HCB) Settings compliant and cannot be a congregate care setting;

NHTD Waiver Eligibility Criteria continued

The individual must:

- Be a recipient of Medicaid coverage that supports community-based long-term care services;
- Be assessed to need a nursing facility level of care (LOC) and have the ability to safely live in the community. The applicant's LOC score is determined by the Uniform Assessment System – New York (UAS-NY) Community Health Assessment (CHA) and a CHA score of 5 or greater indicates the individual requires a nursing facility LOC.
- Have informal supports and Medicaid services sufficient to safely serve the individual in the community; and
- Be able to live in the community without compromising their health and welfare, as determined by the Regional Resource Development Specialist (RRDS). Informal supports are used to supplement waiver and state plan services whenever possible.

Goals of the NHTD Waiver

- Offer an alternative to institutionalization
- Provide care in the home and community
- Expand service coverage to meet target population needs
- Must be cost neutral, meaning the average cost of the waiver does not cost more than the average cost of institutional care for participants
- Provide care with a person-centered approach

Recommended Content

