NEW YORK STATE MEDICAID PROGRAM

HOME AND COMMUNITY-BASED SERVICES MEDICAID WAIVER FOR INDIVIDUALS WITH TRAUMATIC BRAIN INJURY MANUAL

POLICY GUIDELINES

Table of Contents

SECTION I - REQUIREMENTS FOR PARTICIPATION IN MEDICAID	2
SECTION II - HCBS/TBI WAIVER SERVICES	3
TARGET POPULATION	
THE SERVICE PLAN	3
SECTION III - DEFINITIONS	
COMMUNITY INTEGRATION COUNSELING	5
ENVIRONMENTAL MODIFICATIONS	5
HOME AND COMMUNITY SUPPORT SERVICES	5
INDEPENDENT LIVING SKILLS TRAINING AND DEVELOPMENT	5
Intensive Behavioral Programs	
Respite Care	6
SERVICE COORDINATION	
ASSISTIVE TECHNOLOGY (SPECIAL MEDICAL EQUIPMENT AND SUPPLIES)	6
STRUCTURED DAY PROGRAMS	7
SUBSTANCE ABUSE PROGRAMS	
Transportation	
COMMUNITY TRANSITIONAL SERVICES	7

Section I - Requirements for Participation in Medicaid

Home and Community-Based Services Medicaid Waiver for Individuals with Traumatic Brain Injury (HCBS/TBI) waiver services may be provided by not-for-profit or proprietary health and human services agencies such as certified home health agencies, nursing facilities, hospitals or diagnostic and treatment centers, or by individuals.

Providers of waiver services must meet the standards established for each waiver service, apply to, and be approved by the Department of Health for participation in the waiver and enroll in the Medicaid Program.

Providers may be approved to provide a single waiver service or multiple waiver services.

Version 2005 – 1 Page 2 of 7

Section II - HCBS/TBI Waiver Services

The HCBS/TBI waiver is a federally approved initiative permitting New York State to make available under Medicaid twelve services, not included in the State Medicaid Plan, for persons with traumatic brain injuries (TBI) that meet specified eligibility criteria. The HCBS/TBI waiver is one component of a comprehensive strategy developed by the State to:

- repatriate individuals with TBI who reside in nursing facilities, in or out-of-state; and
- offer an alternative for individuals with TBI living in the community who are at significant risk of placement in a nursing facility.

Target Population

An individual participating in the HCBS/TBI waiver must:

- have a diagnosis of TBI or a related diagnosis;
- be eligible for Medicaid;
- be between the ages of 18 and 65 upon admission to the waiver;
- be assessed as needing a nursing home level of care;
- have or find a living arrangement which meets the individual's needs;
- be able to be served with the funds and services available under the waiver and the State Medicaid Plan; and
- choose to participate in the waiver rather than reside in the nursing facility.

The Service Plan

An individualized written Service Plan must be developed for each waiver participant:

 The written plan must describe the participant's strengths, abilities and preferences and must include an assessment of the individual to determine the services needed to prevent institutionalization.

Version 2005 – 1 Page 3 of 7

- The written plan must identify the waiver service(s) to be furnished; the amount, frequency and duration of each service; and the provider(s) who will furnish each service.
- The plan must also describe supports provided by informal caregivers, such as family
 or neighbors, as well as services provided under the State Medicaid Plan and other
 federal and State funding sources.

Waiver services are used only when all other sources of support and services have been fully explored and utilized. **No** waiver service will be reimbursed if not included in the written Service Plan.

The process for developing the Service Plan includes, at a minimum, the potential waiver participant and a service coordinator selected by the participant. The participant may choose to have family, friends or advocates participate in the process.

All Service Plans must be reviewed by a Regional Resource Development Specialist (RRDS).

The Service Plan must be reviewed at least every six months. The Service Plan *must also* be reviewed when there are significant changes in the waiver participant's physical, cognitive, or behavioral status, when expected outcomes are not realized, or when there is a change in the availability of informal supports or formal services.

Version 2005 – 1 Page 4 of 7

Section III - Definitions

For the purpose of the Medicaid program, certain terms are defined as follows:

Community Integration Counseling

Services provided in the waiver participant's residence or in the community to assist the waiver participant, family and/or other significant individuals to more effectively manage the stresses and difficulties associated with the waiver participant living in the community.

Environmental Modifications

Physical adaptations to the waiver participant's residence and primary vehicle to ensure the participant's health, safety and welfare and which increase the individual's independence and integration in the community.

Home and Community-Support Services

Services provided in the waiver participant's residence and in the community to assist the individual's ability to live in the community through non-medical assistance. These services may include assistance, training, and supervision with activities of daily living, heavy household tasks, and companion or chore services.

Independent Living Skills Training and Development

Services provided in the waiver participant's residence or in the community to improve and maintain the individual's community living skills so that the individual can live as independently as possible. The services may include:

- assessment, training, and supervision of, or assistance to, an individual with self-care,
- medication management,
- task completion,
- communication skills,
- interpersonal skills,
- socialization,
- sensory/motor skills,
- mobility,
- community transportation skills,
- reduction/elimination of maladaptive behaviors,

Version 2005 – 1 Page 5 of 7

- problem solving skills,
- · money management, and
- ability to maintain a household.

Intensive Behavioral Programs

Services provided in the waiver participant's residence or in the community to eliminate/reduce a waiver participant's severe maladaptive behavior(s) which, if not modified, will interfere with the individual's ability to remain in the community. These services are provided in the individual's residence and in the community.

Respite Care

Services provided primarily in the waiver participant's residence to provide short-term relief for caregivers of participants who are unable to care for themselves.

Service Coordination

The key to individual choice and satisfaction is person-centered service coordination. The Service Coordinator:

- Is responsive to the individual and helps the waiver participant identify his or her unique wishes and needs;
- Promotes activities which will increase the individual's independence and life satisfaction:
- Assists in the integration of the individual in the community of his/her choice;
- Helps in increasing the individual's productivity and participation in meaningful activities; and
- Assists in arranging for daily living supports and services to meet the individual's needs.

Assistive Technology (Special Medical Equipment and Supplies)

Devices, controls, or appliances to increase the waiver participant's ability to perform activities of daily living or to perceive, control or communicate with the environment. May include durable and non-durable medical equipment not usually funded under the State Medicaid Plan.

Version 2005 – 1 Page 6 of 7

Structured Day Programs

Services provided in a congregate, non-residential, non-medical setting or in the community, to improve or maintain the waiver participant's skills and ability to live in a non-institutional setting. The focus will be on the development of social, problem-solving and task-oriented skills and services may include tasks identified in Independent Living Skills Training and Development.

Substance Abuse Programs

Interventions provided in a non-residential setting or in the community to reduce/eliminate the use of alcohol and/or drugs by the waiver participant which may interfere with the individual's ability to remain included in the community. The services may include technical assistance to existing community support systems, such as Alcoholics Anonymous, to enable the existing systems to appropriately meet the needs of waiver participants.

Transportation

Services to enable the waiver participant to access non-medical community services and resources in order to improve the individual's ability to make use of needed services and to improve the individual's integration in the community.

Community Transitional Services

Services intended to assist a waiver participant to transition from a nursing home to living in the community. The services may include:

- the cost of moving furniture and other belonging,
- security deposits required to obtain a leases on an apartment or home,
- · purchasing essential furnishings,
- set-up fees or deposits for utility or service access (e.g. telephone, electricity, health), and
- health and safety assurances such as pest removal, allergen control or one time cleaning prior to occupancy.

Version 2005 – 1 Page 7 of 7