



## NEW YORK STATE SERVICES

### Description of Current Service System/Options/General information:

The New York State Department of Health State agency is responsible for the administration of the New York Medicaid Program under Title XIX of the Social Security Act. NY has implemented the 1915 b/c option. They have experienced recent reductions in budgets/services. Administration was cut, not services. Quality was a priority. There is no balanced budget required. Their DD service system is state run (now 5 regions was 13). Services are provided by the state and private providers. Managed care is in the works.

### Overall eligibility determination process:

#### Three-Step Review Process

- DDRO staff review the eligibility request to make sure it is complete.
- A committee of DDRO clinicians evaluates the request and reviews any additional information that has been provided by the person.
- Reviews are done by an independent Eligibility Review Committee of licensed practitioners not involved in the First and Second Step Reviews.

#### Required documents for eligibility determination requests:

- A psychological report which includes an assessment of intellectual functioning. *For people with IQ scores above 60*, an interpretive report of a standardized assessment of adaptive behavior, including summary, composite, scale, and domain scores, is required. *For people with IQ scores below 60*, an adaptive assessment may be based on an interpretive report using information gathered from interviews with caregivers, records review, and direct observations.
- A social/developmental history, psychosocial report or other report that shows that the person became disabled before age 22.
- Acceptable Measures of Intellectual and Adaptive Behavior

### **Needs Assessment:**

OPWDD has worked closely with researchers from interRAI to modify the interRAI Intellectual Disabilities Needs Assessment tool. The tool was found to have strong reliability and validity when used to assess individuals in various studies.

A needs assessment process will establish consistent practices in assessing individuals' interests and needs across the state and to ensure that the system provides supports and services according to people's needs, rather than according to regional budget allocations.

Reassessments will occur on an ongoing basis, perhaps annually, to detect changes in the support needs of an individual.

### **Appeals:**

In the appeals process the individual or family member does not appeal the results of a needs assessment, but rather, can appeal a decision about services.

### **Assistive Technology:**

Assistive Technology is a category of services that encompasses both environmental modifications (E-Mods) and adaptive devices. E-Mods are physical modifications to the home that can increase or maintain the individual's ability to remain in his/her home.

### **Skill Building Services Day Services:**

**Community Habilitation:** Supports include adaptive skill development, assistance with activities of daily living, community inclusion and relationship building, training and support for independence in travel, transportation, adult educational supports, development of social skills, leisure skills, self-advocacy and informed choice skills, and appropriate behavior development to help the individual access their community.

**Day Habilitation Services:** Assist individuals to acquire, retain or improve their self-help, socialization and adaptive skills.

**Prevocational Services:** Support and training related to the ability to obtain and retain employment, excluding training on the job tasks.

**Article 16 Clinics:** Treatment facilities that provide clinical services to individuals with developmental disabilities as well as to caregivers and other support staff whose participation in the service are deemed necessary to maintain the effectiveness of the treatment, enable the individual to remain in his/her current residential setting and enhance the individual's quality of life.

**Self Directed Services:**

Consolidated Supports and Services (CSS) is self-directed service waiver that empowers people with disabilities and their families to design and manage services. CSS Plans and Budgets allow participants to access the supports needed to live at home or in a home of their own, pursue interesting and meaningful employment, volunteer, or other community activities, engage in satisfying, productive relationships with family, friends, and community members maintain a healthy lifestyle.

Recreation will not be covered unless it falls under family supports  
Respite may also fall under this.

**Residential/Community Services:**

**Community Residence (CR):** Supervised CR have staff immediately available on site 24/7 and include supplies for daily living, like food and toiletries. Supportive CR, staff is on site only during certain times of the day and up to 20 hours per week.

**Family Care:** Community-based residential housing in certified private homes.

**Individualized Residential Alternative (IRA):** Community residence that provides room, board and individualized service options. Supervised IRAs provide 24-hour staff support and supervision for up to 14 residents.

Supportive IRAs are limited to 3 or fewer individuals and provide need-based supports and services for those who are living in their own homes or apartments, but do not require 24-hour staff support and supervision.

**Intermediate Care Facilities (ICF's)** provided in an institutional or a community setting.

Medicaid does not currently fund any housing.

**Employment Services:**

Supported employment is Medicaid reimbursed.

**Services to Specific Populations:**

**Family Supports:**

Family Support Services Coordinators are available to help families access Family Support Services. Arrangements can be made for specialized equipment and home modifications.

**Autism:**

Intensive Behavioral (IB) Services are short-term (6 month) services that focus on developing effective behavior management strategies for individuals whose challenging behavioral issues put the individual at risk of placement in a more restrictive residential setting.

**Older Adults/Seniors Services and Residential: Senior Center**

**Integration Services:** Special efforts on the part of community senior centers, to include adults with developmental disabilities age 60 or older in activities.

**24-Hour Nursing Residences for the Medically Frail:** 24-hour supervised small group homes that may be certified as ICFs or IRAs.

**Supervised Group Homes for Aging Individuals:** These are IRA's or ICF's that primarily serve aging Individuals, but may include enriched staffing and clinical supports.

**Integrated Group Homes:** Certified residential IRA's and ICF's that serve both aging and younger individuals in an integrated setting.

**Supported Living:** Direct support assistance provided for those who wish to continue living somewhat independently. Available services include, apartment maintenance and medication management.

**Support Services (Non skill-building):**

Transportation: Medicaid pays for private and public transportation. Service varies from region to region.