Starting Soon…

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Medicaid Monday: The Home Care Assessment Process

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Agenda 10/20/25

- 2025 Medicaid Numbers: Review
- New York Independent Assessor
- MLTC Enrollment
- Obtaining Necessary Hours of Care
- Immediate Needs Procedure

MEDICAID INCOME & ASSET ELIGIBILITY RECAP

	INCOME / MTH		ASSET LIMIT	
YEAR	SINGLES	COUPLES	SINGLES	COUPLES
2025	$1,820	$2,453	$32,396	$43,781

- Community Spouse Income Allowance: $3,948
- Community Spouse Resource Allowance: $75,820 - $157,920
- Institutionalized Spouse Income Allowance: $50 (no change)

Medicaid Home Care Options – Once Approved for Medicaid Services

1. **Managed Long-Term Care** (MLTC)
   - Personal Care Services Program (PCSP)- Agency model
   - Consumer Directed Personal Assistance Program (CDPAP)
2. **Nursing Home Transition and Diversion Medicaid Waiver Program** (NHTD)
   - Now has a capitation number **planned** for NYS
3. **Traumatic Brain Injury Waiver** (TBI)
4. **Program for All-Inclusive Care for the Elderly** (PACE)

****Key is to work with a qualified team of professionals to help select the best fit for all involved****

What is NYIA?

New York Independent Assessor (NYIA) program

- Assesses applicants for community-based long-term service eligibility

Who Are They?

- Registered nurses who conduct a community health assessment (CHA)
- Providers, (physicians, NPs, PAs), who are in the Independent Practitioner Panel (IPP) under NYIA

Limitation: INDEPENDENT clinicians with NO prior relationship to client

NYIA Role

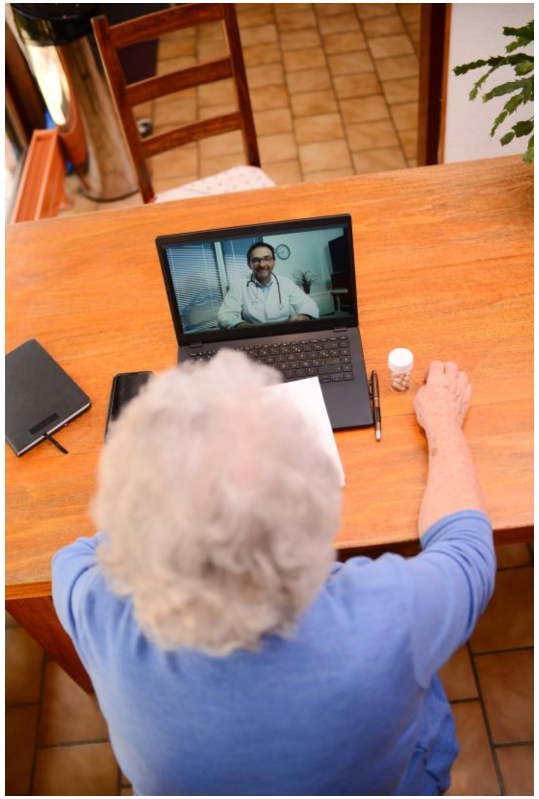
- Regulates nurses and providers completing assessments
- Assesses caregiving hours (through Maximus)
- Issues practitioner orders for services

NYIA Process: Step 1 – Community Health Assessment (CHA)

- Assesses applicant's ability to perform Activities of Daily Living (ADLs)

- NEW THRESHOLD – Applicant must require assistance with at least 3 ADLs or require assistance with 2 ADLs if dementia is present
  - Physician must sign form certifying dementia diagnoses, DOH-5821

- NYIA will conduct one Community Health Assessment



Assistance, ADLs, & IADLs

- Levels of assistance:
  - Supervision: needs someone close by for safety.
  - Contact Guard Assistance: Touching for assistance
  - Minimum Assistance: needs 25% help.
  - Moderate Assistance: 50% of help needed.
  - Maximum Assistance: needs 75% help or more.
  - Dependent/ Total: needs 100% help.
- ADLs: Now need assistance with 3 ADLs to qualify
  - Eating
  - Dressing
  - Bathing
  - Grooming
  - Toileting
  - Mobility/ ambulation

- IADLs:
  - Meal preparation
  - Housekeeping
  - Financial management
  - Medication management
  - Groceries
  - Laundry

NYIA Process: Step 2 Medical Assessment

- After Community Health Assessment,
  - Applicant completes Clinical Assessment

    -Meets with member of the Independent Practitioner Panel.
- Independent Practitioner's Panel
  - Providers regulated by NYIA
  - Requires time and certification
  - Assessing provider can request clarifying information from your regular provider if you are agreeable

NYIA Process Step 2: Practitioner's Order and Plan of Care

- The provider who completes the Clinical Assessment is the only practitioner who can order or authorize personal care
  - Recommends a Plan of Care
  - Recommends number of hours needed for care

- **Limitation: personal doctor is <u>not</u> used:**
  - To order or authorize personal care
  - Or to recommend a plan of care or number of hours needed for care

NYIA – Step 2 – Medical Exam and Practitioner's Order and Plan of Care

- **Provider determines if individual is self-directing**
  - If individual can safely receive PCS/CDPAS at home based on their medical stability

- **Outcome notice** informs applicant if approved or denied ability to obtain

  in-home help.

- **Applicant enrolls with a Managed Long Term Care Company (MLTC)**
  - Or contacts local DSS office to begin development of plan of care for Immediate Needs

Step 2A - For Most – Enrollment in MLTC

- **Following CHA and CA, most applicants contact MLTC**
  - Re-assessed by nurse employed by the MLTC
  - Have you completed ADLs **within 3 days** of this assessment?
    - **Assessment uses same UAS tasking tool** used during the CHA completed by NYIA
    - Next, **MLTC will award the number of hours** that MLTC will provide to the new enrollee.

NYIA – Step 3 – Independent Review Panel (If Necessary)

- ***Additional medical review***
  - Required the first time an authorization for PCS/CDPAS services exceeds 12 hours per day, on average

- **Medical review conducted by an "Independent Review Panel"** (IRP) established by the NY Independent Assessor (NYIA).
  - Reviews:
    - Individual's community health assessment
    - Practitioner's Order
    - Plan of Care
  - Tasked with determining whether the applicant is capable of <u>safely</u> remaining in the community

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Independent Review Panel

- Following review, conducted **on paper, not in-person,** IRP recommends changes in scope, type, amount or duration of services

- IRP cannot specify recommended number of hours

The Reality: Disappointing Results

Delays in processing

- **Application timelines** not being honored due to lack of staff in many local DSS Offices
- **Difficulty** in scheduling CHA or CA within 14 day period following call to NYIA
- **Lack of sufficient hours** – MLTC's often award less hours of care than are needed – Appeals + Fair Hearings

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If Your Client Has "Immediate Needs"

Application filed with local Medicaid office, requiring:

- Complete Medicaid application
- Attestation of Immediate Need
- Signed Physician's Order for the in-home services

  - **Result – Medicaid to be authorized within 12 calendar days following submission of application**

  - NYIA completes Community Health Assessment and Clinical Assessment
  - Local DSS completes plan of care
  - MLTC enrollment is delayed until after plan of care is instituted

Helpful Information

After Medicaid Approval:

NYIA can be contacted at (855) 222-8350 or www.nymedicaidchoice.com

Following CHA and CA:

A list of MLTC plans and the counties they service can be found here:
https://www.health.ny.gov/health_care/managed_care/mltc/mltcplans.htm

Who can Speak for You?

- Professional Healthcare Advocate
- Family member who is educated in the system
- Health Care Proxy
- Power of Attorney
- Close friend with medical information rights/ releases

What's the Benefit of a Third Party Advocate?

- Skilled professionals with experience navigating the system
  - **Evaluates the client** and gathers medical evidence to represent actual functional abilities
  - **Ensures clients** do not underestimate their care needs
  - **Can clarify** assessor's questions
  - **Knows the client** from personal interaction (assessor has never met the client)

Sources to Pay for Third Party Advocate

- Pooled Income Trust
- Long-Term Care Insurance
  -Care Coordination Benefit
- Self-Pay from personal funds

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