Home and Community-Based 1915(c) Waivers for Respite Support and 1115 Managed Long-Term Services and Supports

Medicaid is a program in every state that pays for medical assistance for certain individuals and families with low incomes and resources. It is the largest source of funding for medical and health-related services for America’s poorest people. Because Medicaid is funded jointly by the federal and state governments, the services paid for vary from state to state. In addition to medical services, Medicaid will pay for home and community-based services (HCBS) through the state plan as well as through Medicaid waivers that offer services as a lower-cost alternative to treatment in a medical or long term care facility, such as a nursing home. Respite is usually paid for through one or more of the following types of waivers: research and demonstration (1115), managed care (1915b) and HCBS (1915c) waiver programs. Many states are transforming their Medicaid programs and moving traditional HCBS waiver services to some form of Managed Long Term Services and supports.

Many of New York’s Home and Community-Based Services (HCBS) 1915(c) waivers have been, or are being, incorporated into the 1115 Demonstration: “Partnership Plan” and will be operated as Managed Long Term Services and Supports (MLTSS). The transition to MLTSS is occurring in phases with specific populations transitioning through 2020. Thus far only NY Long Term Home Health Care Program, NY Nursing Home Transition and Diversion, and Traumatic Brain Injury waivers are part of the demonstration, however the others will move over in the future. All of the waiver services offered by the HCBS 1915(c) waivers including respite care are to continue to be provided in the MLTSS delivery system. The state’s Medicaid waivers that include respite are:

**Partnership Plan Demonstration:**
The demonstration is designed to permit New York to use a managed care delivery system to deliver benefits to Medicaid recipients, create efficiencies in the Medicaid program, and enable the extension of coverage to certain individuals who would otherwise be without health insurance. The state’s goal in implementing the Partnership Plan section 1115(a) demonstration is to improve access to health services and outcomes for low-income New Yorkers by: improving access to health care for the Medicaid population; improving the quality of health services delivered; expanding access to family planning services; and expanding coverage with resources generated through managed care efficiencies to additional low-income New Yorkers. Respite services continue for those populations previously served through HCBS 1915(c) waivers.

**OPWDD Comprehensive Waiver:**
Provides day habilitation, live-in caregiver, prevocational, residential habilitation, respite, supported employment, community transition services, agency with choice financial management services (FMS), individual directed goods and services, support brokerage, assistive technology-adaptive devices, community habilitation, environmental modifications (home accessibility), family education and training, intensive behavioral services, pathway to employment, and plan of care support services for individuals with autism, intellectual disabilities (ID), and developmental disabilities (DD) ages 0–no maximum age. Also serves those eligible for both Medicaid and Medicare.

**Care at Home III, IV or VI Waivers (CAH):**
These waivers provide case management, respite, and assistive technology to individuals with autism, intellectual disabilities (ID), and developmental disabilities (DD) ages 0–17.

**NY Bridges to Health for Children with SED Waiver**
Provides day habilitation, health care integration, skill building, special needs community advocacy and support, accessibility modifications, adaptive and assistive equipment, crisis avoidance and management and training, crisis respite, family/caregiver supports and services, intermediate crisis response services, intensive in-home supports, and planned respite, vocational services for individuals with mental illness ages 19-20 and with Severe Emotional Disabilities (SED) ages 0-18.
NY Bridges to Health for Children with Developmental Disabilities (DD) Waiver
Provides day habilitation, health care integration, skill building, special needs community advocacy and support, accessibility modifications, adaptive and assistive equipment, crisis avoidance and management and training, crisis respite, family/caregiver supports and services, immediate crisis response services, intensive in-home supports and services, planned respite, vocational services for individuals with autism, Developmental Disabilities (DD), Intellectual Disabilities (IID) ages 0-20.

NY Bridges to Health for Children who are Medically Fragile Waiver
Provides day habilitation, health care integration, skill building, special needs community advocacy and support, accessibility modifications, adaptive and assistive equipment, crisis avoidance and management and training, crisis respite, family/caregiver supports and services, immediate crisis response services, intensive in-home supports and services, planned respite, vocational services for individuals with medically fragile conditions ages 0-20.

NY Care at Home I/II Waivers
Provides case management, bereavement services, expressive therapies, family palliative care education (training), home and vehicle modifications, massage therapy, pain and symptom management, and respite for individuals with physical disabilities ages 0-17.

NY OMH SED Waiver
Provides for crisis response, family support, individualized care coordinator (case management), intensive in-home, respite, and skill building services for individuals with severe emotional disabilities (SED) ages 5 – 21.
The demonstration is designed to permit New York to use a managed care delivery system for benefits to Medicaid recipients, create efficiencies in the Medicaid program, and to extend coverage to certain individuals who would otherwise be without health insurance. The state’s goal in implementing the Partnership Plan section 1115(a) demonstration is to improve access to health services and outcomes for low-income New Yorkers by: improving access to health care for the Medicaid population; improving the quality of health services delivered; expanding access to family planning services; and expanding coverage with resources generated through managed care efficiencies to additional low-income New Yorkers. This demonstration provides a variety of traditional Medicaid services, including long-term services and supports for specific populations; but this description focuses on respite.

**Waiver Type**
1115

**Target Population-Eligibility**
Individuals previously eligible for the NY Long Term Home Health Care Program, NY Nursing Home Transition and Diversion, and Traumatic Brain Injury waivers and the AIDS Home Care Program (AHCP) now are eligible for respite under this waiver. These include individuals who are: 65 years and older; are between birth and 64 years and have physical disabilities; or have a diagnosis of AIDS, infected with HIV or have an illness or disability attributable to such infection. Also eligible are those diagnosed with traumatic brain injury (TBI) or a related condition, are between ages 18 and 64, and injured after age 18. Individuals with a TBI with structural non-degenerative brain damage as the primary diagnosis are eligible for the waiver. In addition, a limited number of individuals with anoxia, toxic poisoning, encephalitis, and other neurological conditions which result in conditions similar to a traumatic brain injury will also be served. Individuals with gestational or birth difficulties such as cerebral palsy or autism or who have a progressive degenerative disease, are not eligible for the waiver.

**Level of Care**
The level of care that an individual requires is that which is available in nursing facility (NF).

**Respite Services**
Respite is an individually designed service intended to provide relief to natural, non-paid supports who provide primary care and support to a waiver participant. The primary location for the provision of respite is in the waiver participant’s home, or where appropriate, temporarily in an institutional setting. Respite may be provided outside of the participant’s home in settings such as in the home of a relative or other individual’s private residence or in an institutional setting such as a hospital or nursing facility.

**Respite Provider Eligibility**
In order to participate in the Medicaid Program, providers are required to enroll with the DOH. For provider enrollment information, please refer to eMedNY at http://www.emedny.org/info/ProviderEnrollment/index.html

**Caregiver Eligibility**
Respite may not be provided by a legally responsible person, legal guardian, or a relative.

**Enrollment Limit**
Enrollment limit unavailable.

**How to Apply**
To apply for this waiver you must be enrolled in Medicaid. You can make an appointment to apply for Medicaid through your local LDSS: http://www.health.ny.gov/health_care/medicaid/ldss.htm

Once enrolled in Medicaid, you can request to be enrolled in the Partnership Plan through your LDSS.

**Contact Information**
For general help contact the Medicaid Helpline: 1-800-541-2831, for information about Medicaid Managed Care call: 1-800-505-5678.

To find out more about Managed Care in New York access the Managed Care page of the NY Department of Health website: http://www.health.ny.gov/health_care/managed_care/index.htm

Information on the Partnership Plan can be found on this page: http://www.health.ny.gov/health_care/managed_care/appextension/

**Link to Waiver Application**

**Expiration Date**
06/26/2016 (Renewal application pending)

**Date of Last Update**
01/15/2016
**NEW YORK**

**NY OPWDD Comprehensive Waiver (Currently Being Overhauled into the “People First Waiver”)**

State Operating Agency: The New York State Office for People with Developmental Disabilities (NYS-OPWDD)

**Description**

The goal of the waiver is to serve more people with a wider range of individualized community-based services that are less expensive than institutional care. Through participant directed service model, services are delivered in various ways in accordance with the needs of the waiver participants. The current renewal includes necessary changes to implement FIDA-IDD (Fully Integrated Duals Advantage for Individuals with Intellectual and Developmental Disabilities) incorporating OPWDD Waiver services as part of a purely voluntary managed care plan that will be operational in 2016 in nine down-state counties. The services provided by this waiver include: day habilitation, live-in caregiver, prevocational, residential habilitation, respite, supported employment, community transition services, agency with choice financial management services (FMS), individual directed goods and services, support brokerage, assistive technology-adaptive devices, community habilitation, environmental modifications (home accessibility), family education and training, intensive behavioral services, pathway to employment, and plan of care support services. This is a new service provision model that encourages increased use of community resources to meet the needs and enrich the lives of persons with developmental disabilities.

There are currently no plans to move this waiver to the 1115 “Partnership Plan” demonstration; however, there will be in the future. In order to stay up to date access the NYS-OPWDD website; this can be found in the Contact Information section below.

**Waiver Type**

1915(c) HCBS operating concurrently with 1915(a)(1)(a) voluntary managed care waiver

**Target Population-Eligibility**

Individuals between the birth death who are diagnosed as having one or more of the following: autism, developmental disability (DD), or an intellectual disability (ID) including those dually eligible or both Medicaid and Medicare. There is no minimum or maximum age requirement for participation in this waiver.

**Level of Care**

The level of care that an individual requires is the care available in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

**Respite Services**

In-home respite and out-of-home respite services are provided to participants unable to care for themselves that are furnished on a short-term basis because of the absence or need for relief of those persons who normally provide care for the participant. Respite care is not furnished or provided for the purpose of compensating relief or substitute staff in certified community residences. Respite services are provided in the following locations: individual's home or place of residence; Family Care home; Medicaid certified ICF/DD; Individualized Residential Alternative (IRA), or Community Residence (CR); and free-standing Respite facility under the auspices of OMRDD. Federal financial participation will not be claimed for the cost of room and board except when provided as part of respite care in a facility approved by the State that is not a private residence.

**Respite Provider Eligibility**

Qualified providers are required to enroll with the DOH. For provider enrollment information, please refer to: eMedNY at [http://www.emedny.org/info/ProviderEnrollment/index.html](http://www.emedny.org/info/ProviderEnrollment/index.html)

**Caregiver Eligibility**

Respite may not be provided by a: Legally Responsible Person (parent, spouse or adult children (including sons and daughters-in-law), Legal Guardians. Respite may be provided by a qualified relative who is at least 18 years of age, does not fall into any of the above categories, and does not live in the same residence as the participant.

**Enrollment Limit**

1944: Year ending 03/31/2021.

**How to Apply**

To apply, contact your regional Developmental Disabilities State Operations Office; which you can find via the NYS-OPWDD website: [http://www.opwdd.ny.gov/node/1211](http://www.opwdd.ny.gov/node/1211)

Or you may contact a provider agency that serves the county in which the person lives.

**Contact Information**

Contact the Office for People with Developmental Disabilities at INFORMATION LINE 1-(866)-946-9733 if you have general questions about the waiver. Otherwise you may contact one of the People First Waiver Liaisons in your area; which you can find here: [http://www.opwdd.ny.gov/opwdd_services_supports/people_first_waiver/documents/ddso_waiver_liais](http://www.opwdd.ny.gov/opwdd_services_supports/people_first_waiver/documents/ddso_waiver_liais)

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**Medicaid Waivers for Respite Support - 2015**
**ARCH National Respite Network and Resource Center**
**www.archrespite.org**
NEW YORK

For more general information about the services provided by this waiver or to check on the progress of the waiver renewal process, reference the People First Transformation page on the NYS-OPWDD website: http://www.opwdd.ny.gov/opwdd_services_supports/people_first_waiver/HCBS_waiver_services

There is also a very helpful Access to Services Resource Booklet provided by the NYS-OPWDD that describes how to access waiver services and navigate the entire process; which can be found here: http://www.opwdd.ny.gov/welcome-front-door/resource-booklet

<table>
<thead>
<tr>
<th>Link to Waiver Application</th>
<th><a href="http://www.opwdd.ny.gov/node/6216">http://www.opwdd.ny.gov/node/6216</a></th>
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<tbody>
<tr>
<td>Expiration Date</td>
<td>03/31/2021</td>
</tr>
<tr>
<td>Date of Last Update</td>
<td>06/15/2016</td>
</tr>
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</table>
### Description
The three Care at Home (CAH) Medicaid Home and Community Based Waivers previously operated by OPWDD have been combined into one HCBS waiver. The OPWDD CAH waiver provides services to children with severe developmental disabilities and complex medical conditions living at home with their families. The Care At Home Waiver program allows Medicaid to pay for some services not provided through "regular" Medicaid, such as case management, respite, home adaptations and vehicle modification that can make home care an option for children and their families. Services include case management, respite, and assistive technology services. There are currently no plans to move this waiver to the 1115 “Partnership Plan” demonstration; however, there will be in the future. In order to stay up to date access the NYS-OPWDD website; this can be found in the Contact Information section below.

### Waiver Type
1915(c)

### Target Population-Eligibility
Individuals between the age of 0 and 17 who demonstrate complex health care needs, i.e., require medical therapies designed to replace or compensate for a vital body function or to avert immediate threat of life by reliance on medical devices, nursing care, and monitoring of prescribed medical therapy for the maintenance of life expected to continue for more than twelve months. All children who reach the 17th birthday begin transition planning one year before they will reach the age limit of eighteen (18). In most instances, the case managers transition the children to the general developmental disability HCBS Waiver that is also operated by OPWDD. Some families opt to use only state plan services. CAH III further specifies that individuals enrolled in this waiver must be unmarried.

### Level of Care
Intermediate Care Facility for the Individuals with Intellectual Disabilities (ICF/IID) with the subcategory of medically fragile children.

### Respite Services
Services provided to participants unable to care for themselves that are furnished on a short-term basis because of the absence or need for relief of those persons who normally provide care for the person.

### Respite Provider Eligibility
Respite providers must be on contract with the local Developmental Disabilities Services Office (DDSO). Providers must apply through the local DDSO, which does the initial screening for character and competence of the agency. After receiving local DDSO approval, central office reviews and approves the application. The third step is forwarding the application to DOH for final approval. At each step the respective agency level staff evaluates the provider based on available data to support its competence to deliver respite services appropriately.

### Caregiver Eligibility
Respite may not be provided by a legally responsible person, relative, or legal guardian.

### Enrollment Limit
600

### How to Apply
Contact your regional Care at Home (CAH) Coordinator in order to begin the application process. You can find your regional coordinator via the NYS-OPWDD website: [http://www.opwdd.ny.gov/node/3563](http://www.opwdd.ny.gov/node/3563)

### Contact Information
Contact the Office for People with Developmental Disabilities at INFORMATION LINE 1-(866)-946-9733 for more general questions about the CAH waivers. For general information about services and eligibility, access the NYS-OPWDD website: [http://www.opwdd.ny.gov/opwdd_services_supports/supports_for_independent_and_family_living/Care_at_Home](http://www.opwdd.ny.gov/opwdd_services_supports/supports_for_independent_and_family_living/Care_at_Home)
Otherwise, you can contact your regional coordinator found in the How to Apply section above.

### Link to Waiver Application
Link to application unavailable.

### Expiration Date
Expiration date determined pending approval of waiver.

### Date of Last Update
1/15/2016
NY Bridges to Health (B2H) for Children with SED Waiver

State Operating Agency: The New York State Office of Children and Family Services (OCFS) Division of Juvenile Justice and Opportunities for Youth (DJJOY)

**Description**

This waiver provides day habilitation, health care integration, skill building, special needs community advocacy and support, accessibility modifications, adaptive and assistive equipment, crisis avoidance and management and training, crisis respite, family/caregiver supports, immediate crisis response services, intensive in-home supports and services, planned respite, vocational services for individuals with mental illness or Severe Emotional Disabilities (SED). The waiver provides services not otherwise available to children with these disabilities within the context of their complicated family/caregiver circumstances to improve their overall health and welfare and avoid unwanted placement in a medical institution. B2H allows the State to supplement the Medicaid State Plan and other supports with an array of services tailored to address the unmet health care needs of this complex population in the least restrictive, most home-like, and integrated setting appropriate to their needs.

**Waiver Type**

1915(c)

**Target Population-Eligibility**

Children in the care and custody of either the Local Departments of Social Services (counties and New York City) (LDSS) or OCFS/DJJOY for children initially entering the waiver. Once enrolled, eligibility can continue after the child is discharged from LDSS or OCFS DJJOY custody. Must be diagnosed with: mental illness between the ages of 19 and 20 years old, or SED between 0 and 18 years old.

**Level of Care**

The individual must require the level of care at an inpatient psychiatric facility for individuals age 21 and under.

**Respite Services**

*Planned respite* services provide planned short-term relief for family/caregivers (non-shift staff) that are needed to enhance the family/caregiver’s ability to support the child’s disability and/or health care needs. This service may only be provided in a one-to-one, individual session. The service is direct care for the child by staff trained to support the child’s disability-related needs while providing relief from caregiver activities for the family/caregiver. This may occur on an hourly basis (in-home or out-of-home by an approved respite care and services provider or on a daily/overnight basis (in-home or out-of-home by an approved respite care and services provider.

*Crisis respite* provides emergency short-term relief for family/caregivers (non-shift staff) needed to resolve a crisis and segue back to the child’s successful functioning and engagement in Individualized Health Plan activities. Assists the family/caregivers in supporting the child’s disability and/or health care issues. This service may only be delivered in an individual, one-to-one session. The service provides direct care for a child while providing relief from caregiver activities for the family/caregiver during a crisis. Crisis respite may be provided on an hourly basis (in-home or out-of-home by an authorized foster care provider) or daily/overnight basis (in-home or out-of-home by an authorized foster care provider).

**Respite Provider Eligibility**

Local Departments of Social Services (LDSS) make the eligibility determinations, enrollment decisions and referrals to Health Care Integration Agencies (HCIA). HCIA employ Health Care Integrators (HCIs) and Waiver Service Providers (WSPs) who are responsible for coordinating and administering the services. [http://www.docfs.state.ny.us/main/b2h](http://www.docfs.state.ny.us/main/b2h)

*Planned Respite* Out-of-home, non-medical respite agencies must be approved respite care and services providers pursuant to the applicable regulation under subcontract with an HCIA. *Crisis Respite* Not-for-profit respite provider agencies under subcontract with an HCIA. For out-of-home, non-medical respite, agencies must be authorized to provide foster care.

**Caregiver Eligibility**

Respite may not be provided by a Legally Responsible Person, Relative, or Legal Guardian.

**Enrollment Limit**

3929: Year ending 12/31/2015

**How to Apply**

Local Departments of Social Services (LDSS) initiate requests for waiver services and forward request to the appropriate Health Care Integration Agency (HCIA) [http://www.docfs.state.ny.us/main/b2h](http://www.docfs.state.ny.us/main/b2h)
| Contact Information | Contact The New York State Office of Children and Family Services  
|                     | Phone: (518) 473-7793 |
| Expiration Date | 12/31/2015 (Renewal application in progress) |
| Date of Last Update | 01/15/2016 |
### Description
This waiver provides day habilitation, health care integration, skill building, special needs community advocacy and support, accessibility mods, adaptive and assistive equipment, crisis avoidance and management and training, crisis respite, family/caregiver supports and services, immediate crisis response services, intensive in-home supports and services, planned respite, vocational services. B2H DD provides services not otherwise available to children with developmental disabilities within the context of their complicated family/caregiver circumstances to improve their overall health and welfare and avoid unwanted placement in a medical institution. The B2H DD waiver allows the State to supplement the Medicaid State Plan and other supports with an array of services tailored to address the unmet health care needs of this complex population in the least restrictive, most home-like, and integrated setting appropriate to their needs.

### Waiver Type
1915(c)

### Target Population-Eligibility
Children in the care and custody of either the Local Departments of Social Services (counties and New York City) (LDSS) or OCFS Division of Juvenile Justice and Opportunities for Youth (DJJOY) for children initially entering the waiver. Once enrolled, eligibility can continue after the child is discharged from LDSS and OCFS DJJOY custody. These participants are under 21 years old and diagnosed with: autism, developmental disability, and/or intellectual disability.

### Level of Care
Participants’ disabilities are sufficiently severe to require placement in a medical institution. The individual has to meet the level of care required in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

### Respite Services
- **Planned respite** services provide planned short-term relief for family/caregivers (non-shift staff) that are needed to enhance the family/caregiver’s ability to support the child’s disability and/or health care issues. This service may only be provided in a one-to-one, individual session. The service is direct care for the child by staff trained to support the child’s disability-related needs while providing relief from caregiver activities for the family/caregiver. This may occur on an hourly basis (in-home or out-of-home by an approved respite care and services provider or on a daily/overnight basis (in-home or out-of-home by an approved respite care and services provider.

- **Crisis respite** provides emergency short-term relief for family/caregivers (non-shift staff) needed to resolve a crisis and segue back to the child’s successful functioning and engagement in Individualized Health Plan activities. Crisis respite assists the family/caregivers in supporting the child’s disability and/or health care issues. This service may only be delivered in an individual, one-to-one session. The service provides direct care for a child while providing relief from caregiver activities for the family/caregiver during a crisis. Crisis respite may be provided on an hourly basis (in-home or out-of-home by an authorized foster care provider) or daily/overnight basis (in-home or out-of-home by an authorized foster care provider).

### Respite Provider Eligibility
Local Departments of Social Services (LDSS) make the eligibility determinations, enrollment decisions and referrals to Health Care Integration Agencies (HCIA). HCIA employ Health Care Integrators (HCIs) and Waiver Service Providers (WSPs) who are responsible for coordinating and administering the services. [http://www.ocfs.state.ny.us/main/b2h](http://www.ocfs.state.ny.us/main/b2h)

- **Planned Respite** Out-of-home, non-medical respite agencies must be approved respite care and services providers pursuant to the applicable regulation under subcontract with an HCIA.

- **Crisis Respite** Not-for-profit respite provider agencies under subcontract with an HCIA. For out-of-home, non-medical respite, agencies must be authorized to provide foster care.

### Caregiver Eligibility
Respite may not be provided by a: Legally Responsible Person, Relative, or Legal Guardian.

### Enrollment Limit
676: Year ending 12/31/2015
<table>
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<tr>
<th><strong>How to Apply</strong></th>
<th>Local Departments of Social Services (LDSS) initiate requests for waiver services and forward request to the appropriate Health Care Integration Agency (HCIA) <a href="http://www.ofcs.state.ny.us/main/b2h">http://www.ofcs.state.ny.us/main/b2h</a></th>
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</table>
| **Contact Information** | Health Care Integration Agencies (HCIA) [http://www.ofcs.state.ny.us/main/b2h](http://www.ofcs.state.ny.us/main/b2h)  
New York State Office of Children and Family Services  
Phone: (518) 473-7793 |
| **Link to Waiver Application** | [http://ocfs.ny.gov/main/b2h/Application%20for%20a%201915%28c%29%20Home%20and%20Community-Based%20Services%20Waiver%20%28DD%29.pdf](http://ocfs.ny.gov/main/b2h/Application%20for%20a%201915%28c%29%20Home%20and%20Community-Based%20Services%20Waiver%20%28DD%29.pdf) |
| **Expiration Date** | 12/31/2015 (Renewal application in progress) |
| **Date of Last Update** | 01/15/2016 |
NY Bridges to Health for Children who are Medically Fragile (B2H MedF) Waiver

State Operating Agency: The New York State Office of Children and Family Services (OCFS) Division of Juvenile Justice and Opportunities for Youth (DJJOY)

<table>
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<tr>
<th>Description</th>
<th>The B2H MedF waiver provides day habilitation, health care integration, skill building, special needs community advocacy and support, accessibility modifications, adaptive and assistive equipment, crisis avoidance and management and training, crisis respite, family/caregiver supports, immediate crisis response services, intensive in-home supports and services, planned respite, vocational services for individuals with medically fragile conditions. It provides services not otherwise available to children with these conditions within the context of their complicated family/caregiver circumstances to improve their overall health and welfare and avoid unwanted placement in a medical institution. This waiver supplements the Medicaid State Plan and other supports with an array of services tailored to address the unmet health care needs of this complex population in the least restrictive, most home-like, and integrated setting appropriate to their needs.</th>
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<tr>
<td>Waiver Type</td>
<td>1915(c)</td>
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<tr>
<td>Target Population-Eligibility</td>
<td>Children in the care and custody of Local Departments of Social Services (counties and New York City) for initial entry into the waiver. Once enrolled, eligibility can continue after discharge from LDSS custody. Must be diagnosed as medically fragile and be under 21 years of age.</td>
</tr>
<tr>
<td>Level of Care</td>
<td>The individual must require the level of care provided in a nursing facility (NF).</td>
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<tr>
<td>Respite Services</td>
<td>Planned respite services provide planned short-term relief for family/caregivers (non-shift staff) that are needed to enhance the family/caregiver’s ability to support the child’s disability and/or health care issues. This service may only be provided in a one-to-one, individual session. The service is direct care for the child by staff trained to support the child’s disability-related needs while providing relief from caregiver activities for the family/caregiver. This may occur on an hourly basis (in-home or out-of-home by an approved respite care and services provider or on a daily/overnight basis (in-home or out-of-home by an approved respite care and services provider). Crisis respite provides emergency short-term relief for family/caregivers (non-shift staff) needed to resolve a crisis and segue back to the child’s successful functioning and engagement in Individualized Health Plan activities. Crisis respite assists the family/caregivers in supporting the child’s disability and/or health care issues. This service may only be delivered in an individual, one-to-one session. The service provides direct care for a child while providing relief from caregiver activities for the family/caregiver during a crisis. Crisis respite may be provided on an hourly basis (in-home or out-of-home by an authorized foster care provider) or daily/overnight basis (in-home or out-of-home by an authorized foster care provider).</td>
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<tr>
<td>Respite Provider Eligibility</td>
<td>Local Departments of Social Services (LDSSs) make the eligibility determinations, enrollment decisions and referrals to HCAs. HCAs employ Health Care Integrators (HCIs) and Waiver Service Providers (WSPs) who are responsible for coordinating and administering the services. <a href="http://www.ofcs.state.ny.us/main/b2h">http://www.ofcs.state.ny.us/main/b2h</a> Planned Respite Out-of-home, non-medical respite agencies must be approved respite care and services providers pursuant to the applicable regulation under subcontract with an HCA. Crisis Respite Not-for-profit respite provider agencies under subcontract with an HCA. For out-of-home, non-medical respite, agencies must be authorized to provide foster care.</td>
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<tr>
<td>Caregiver Eligibility</td>
<td>Respite may not be provided by a: Legally Responsible Person, Relative, or Legal Guardian.</td>
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<td>Enrollment Limit</td>
<td>181: Year ending 12/31/2015.</td>
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<tr>
<td>How to Apply</td>
<td>Local Departments of Social Services (LDSS) initiate requests for waiver services and forward request to the appropriate Health Care Integration Agency (HCAA) <a href="http://www.ofcs.state.ny.us/main/b2h">http://www.ofcs.state.ny.us/main/b2h</a></td>
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NEW YORK

The New York State Office of Children and Family Services Phone: (518) 473-7793

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<tr>
<td>Expiration Date</td>
<td>12/31/2015 (Renewal application in progress)</td>
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<tr>
<td>Date of Last Update</td>
<td>01/15/2016</td>
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### Description
The purpose of the waiver is to avoid unnecessary institutionalization for eligible children by providing appropriate access to NY Medicaid State Plan and waiver services. Provides case management, bereavement services, expressive therapies, family palliative care education (training), home and vehicle modifications, massage therapy, pain and symptom management, and respite. This waiver will be moved to the 1115 demonstration in the future; however, there are currently no plans to do so.

### Waiver Type
1915(c)

### Target Population- Eligibility
Children under the age of 18 who have physical disabilities.

### Level of Care
The individual must require the level of care provided in a nursing facility or hospital.

### Respite Services
Provides respite services to the participant’s informal caregiver(s) as temporary relief from their special child care duties. Respite care is provided in accordance with the participant’s plan of care, as approved by the physician, case manager, LDSS CAH I/II coordinator and in conference with the child and his/her family, so that essential medical tasks are continued to maintain the participant’s health and safety. Respite service is contingent upon the availability of providers. Respite is not provided when the participant is an inpatient of a hospital for a medical procedure.

### Respite Provider Eligibility
NYSDOH maintains an open enrollment process, where applicable, for entities interested in approval as a CAH I/II Medicaid waiver provider. The provider must submit an application to NYSDOH waiver management staff demonstrating compliance with the qualifications and competencies necessary to meet waiver participant needs. In addition, the provider must complete the eMedNY provider enrollment process ([http://www.emedny.org/info/ProviderEnrollment/index.html](http://www.emedny.org/info/ProviderEnrollment/index.html)) to verify that the provider meets all federal and State requirements for Medicaid participation.

### Caregiver Eligibility
Respite may not be provided by a: Legally Responsible Person, Relative, Legal Guardian

### Enrollment Limit
Enrollment limit unavailable.

### How to Apply
Contact your local Department of Social Services: [https://www.health.ny.gov/health_care/medicaid/ldss.htm](https://www.health.ny.gov/health_care/medicaid/ldss.htm)

### Contact Information
Contact New York State Department of Health (NYSDOH) CAH I/II staff at 518-486-6562 or your LDSS (each county’s number can be found here: [https://www.health.ny.gov/health_care/medicaid/ldss.htm](https://www.health.ny.gov/health_care/medicaid/ldss.htm)).

Or for more information, access the Care at Home I/II page on the Department of Health website: [http://www.health.ny.gov/publications/0548/care_at_home_physically_disabled.htm](http://www.health.ny.gov/publications/0548/care_at_home_physically_disabled.htm), or email cah@health.ny.gov

### Link to Waiver Application
Link to application unavailable.

### Expiration Date
11/30/2012 (renewal application in progress)

### Date of Last Update
01/16/2016
NY OMH SED (Serious Emotional Disturbance) Waiver
State Operating Agency: New York State Office of Mental Health (OMH)

Description
The goals of the HCBS Waiver include: serving children with complex health or mental health needs in their homes and communities, decreasing the need for placements in psychiatric inpatient levels of care, including Residential Treatment Facilities, increasing the array of Medicaid reimbursable community-based services available to these children/adolescents and their families, using a culturally sensitive, individualized, strength-based approach to build resiliency, assist achieving age related developmental tasks and promote emotional well-being, providing services and supports specifically needed by each unique family to develop the ability to care for their child in their home in a supportive environment, offering children and families a choice of providers, when possible; providing services that promote better outcomes that are also cost-effective, and demonstrating an integrated model of partnership with the family, treatment provider, waiver services and natural supports that are involved with the child and family.

The HCBS Waiver is available in 61 of New York State’s 62 counties. The Waiver does not operate in Oneida County which has a “look alike” program, Kids Oneida.

This waiver provides for crisis response, family support, individualized care coordinator (case management), intensive in-home, respite, prevocational, supportive employment, skill building and youth peer advocate services for individuals with Serious Emotional Disturbance (SED). Service delivery is both traditional and non-traditional.

This waiver has not yet been moved to the 1115 demonstration; however, it will be in the future.

Waiver Type 1915(c)

Target Population-Eligibility
Children and adolescents: With serious emotional disturbance; between the ages of 5 and 17 years (prior to 18th birthday), who demonstrate complex health and mental health needs, who are at imminent risk of admission to a psychiatric institution or have a need for continued psychiatric hospitalization, whose service and support needs cannot be met by just one agency/system, who are capable of being cared for in the home and/or community if services are provided, who have a viable and consistent living environment with parents/guardians who are able and willing to participate in the HCBS waiver. Participants aging out by virtue of reaching their 21st birthday are transitioned into the adult mental health system as needed by referring them to the Single Point of Access/Entry into the adult system in each county.

Level of Care
The child must meet the inpatient psychiatric facility level of care.

Respite Services
Respite workers temporarily care for the child, on an emergency or planned basis, providing relief from care-giving responsibilities for the family. Respite provides a needed break for the family and the child to ease the stress at home and promote overall wellness for the child and his/her family. Respite Workers supervise the child and engage the child in recreational activities that support his/her constructive interests and abilities. Respite activities include providing supervision and recreational activities that match the child’s developmental stage and/or transporting a child to school, an appointment or a program. Respite care may be provided on a planned or emergency basis, day or night, in the child’s home or in the community by trained respite workers with one child or a group of children enrolled in the SED Waiver.

Respite Provider Eligibility
Providers must demonstrate to OMH that they meet local, state, and federal rules and regulations. Both OMH and DOH review the services each year, to ensure participants' health and welfare. These rules and regulations can be found here: http://www.omh.ny.gov/omhweb/guidance/hcbs/competencies/respite.html

Caregiver Eligibility
Respite may not be provided by a: legally responsible person, relative, or legal guardian.

Enrollment Limit
2002: Year ending 12/31/2018 (pending approval of renewal application)
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