

Navigating Housing and Care Options for Older Adults with Medicaid/Medicare



About NY Connects

- Federally funded, NYS designated Aging and Disability Resource Center (ADRC)
- FREE, person-centered long-term care guidance, information and referral services, options counseling
- Older adults, persons with disabilities of all ages, and those who support them (caregivers, families, professionals)
- www.nyconnects.ny.gov
 - For local contact information by county
 - Statewide database of long-term care resources
- **(800) 342-9871** (NY Connects statewide line – all counties)



In the scope of things...

- A focus on dually eligible individuals, seniors
- Very complex options – difficult to navigate
- Person centered decisions
- Honoring dignity of risk
- Knowing what's needed now and speculating what may be needed later
- Congregate housing or care at home
- Safety and difficult situations



Today's Objectives

- Housing Options for Older Adults
 - Types of housing available to persons with Medicaid
 - Admission/Retention Standards
- Options to receive care in the home
- When challenges arise
- Case studies/samples



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First, preferences...

- Even individuals who need skilled nursing home level of care can often be accommodated with care in their own home
- Consider care needed now and in future
- Is supervision needed?
- What informal/family support is available?
- Other preferences, such as proximity, neighborhood, perspective of care



Then, consider needs...

- Activities of Daily Living (ADLs)
 - 'hands on care' such as dressing, bathing, grooming, transferring, toileting
 - How much care is needed?
- Instrumental Activities of Daily Living (IADLs)
 - 'hands off care' such as help with housekeeping, meal preparation, laundry, grocery shopping, errands, bill paying, using the telephone
 - How much care is needed?
- Cognitive Impairments
 - Is supervision or monitoring needed?
 - Geriatric assessments



Housing Options for Seniors

What's Included?

Own Home	Rental Apartments – Market Rent or Subsidized	Independent Living & Supportive Housing	Assisted Living Options	Nursing Home
				Skilled Nursing Services
			Med mgmt*	Med mgmt
			Personal Care*	Personal Care
	Apartment or Townhome	Apartment or Room	Apartment or Room	Room - may be shared
		Housekeeping	Housekeeping	Housekeeping
		Meals (options)	Meals	Meals
	Maintenance	Maintenance	Maintenance	Maintenance
	[Socialization]	Socialization	Socialization	Socialization



**Fees cover minimal services only*



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Housing Options for Seniors

Who's in Charge, Admission/Retention

Own Home	Rental Apartments – Market Rent or Subsidized	Independent Living or Supportive Housing	Assisted Living	Nursing Home
(none)	Fair Housing/ADA	Fair Housing/ADA	NYS DOH regulations	NYS DOH regulations
Protective Standards	Protective Standards	Protective Standards	NYS DOH admission & retention stds	NYS DOH admission & retention stds
			Must be approved for admission based on MD order, facility assessment	Must be approved for admission based on PRI, facility assessment (MDS)

Own home/apartment

- No admission/retention standards
- Protective standards apply
- Informal/Neighborhood support
- Friends/Neighbors remain close
- Must continue paying for home, taxes, utilities
- Home maintenance/repairs
- Care can be paid for by Medicaid
- Care Assessment by Medicaid program



Independent Living

- Age 62+
- No admission/retention standards
- Protective standards apply
- Congregate setting
- Socialization opportunities, meals, housekeeping included
- Often 24-hr staff (concierge/security only)
- No personal care staff
- Must be able to pay for rent
 - Individuals with high income & minimal assets:
 - Pooled trust to pay for IL rental fees, Medicaid to pay for care
- No assessment for IL; most facilities screen somewhat
- Care can be paid for by Medicaid
- Care assessment by Medicaid program



Assisted Living, defined

Assisted Living is a general term that is used across the United States to describe a residence for seniors where assistance is provided, as needed, with activities of daily living, such as bathing, dressing, grooming, ordering and taking medications, and making doctors' appointments. Meals, snacks, housekeeping and laundry services are also provided.

Empire State Association of Assisted Living, www.esaal.org



'Assisted Living' in NYS

Enriched Housing Program	Adult Home	Assisted Living Residence	Special Needs Assisted Living Residence (Dementia Care)	Enhanced Assisted Living Residence	Assisted Living Program
Does not accept Medicaid	Does not accept Medicaid	Does not accept Medicaid	Does not accept Medicaid	Does not accept Medicaid	MAY accept Medicaid for care and services
Private pay, may accept SSI	Private pay, may accept SSI	Private pay, may accept SSI*	Private pay, may accept SSI*	Private pay, may accept SSI*	Private pay or SSI for room/board, Medicaid for care (some)



**Most do not accept SSI*



'Assisted Living'

– Enriched Housing

- 62+
- Facility may/may not accept resident with Medicaid
- Medicaid does not fund facility care
- Facility MAY accept SSI Congregate Care III income as payment of room/board/minimal services
- Must meet admission/retention criteria
- Assessment for housing by facility staff and physician (DSS3122)
- More care possible? Managed Long-Term Care plan may pay for added care
 - Facility/Plan must collaborate
 - Assessment for MLTC/care in addition to 3122
 - Must meet admission/retention criteria
 - Health Home Care Manager may stay involved



'Assisted Living'

– Adult Home

- 18+
- Facility may/may not accept resident with Medicaid
- Medicaid does not fund care/facility directly
- Facility MAY accept SSI Congregate Care III income as payment of room/board/minimal care
- Must meet admission/retention criteria
- Assessment for housing by facility staff and physician (DSS3122)
- More care possible? Managed Long-Term Care plan may pay for added care
 - Facility/Plan must collaborate
 - Assessment for MLTC/care in addition to 3122
 - Must meet admission/retention criteria
 - Health Home Care Manager may stay involved



'Assisted Living'

– Assisted Living Program

- 18+ or 62+, a program applied to Adult Homes & Enriched Housing Programs
- Facility may/may not accept resident with Medicaid
- Medicaid can pay for care if slot available
- Residents with skilled nursing needs, stable conditions
- Facility may accept SSI Congregate Care III income as payment of room/board/minimal care
- Must meet admission/retention criteria of ALP
- Assessment: UAS Level II by facility-contracted assessment service
- Once admitted to ALP, Health Home CM discharges



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Nursing Home

- Individuals with a skilled nursing need, an acute medical need, or who require substantial personal care assistance
- Assessment: Patient Review Instrument (PRI)
- If MLTC member, must choose a nursing home in the plan's network
 - Additional MLTC assessment (UAS Level II) for MLTC to substantiate the admission
- If not already MLTC member, must choose a plan networked with the nursing home once admitted
 - Nurse from plan will visit resident for UAS Level II assessment per plan's requirement
- Health Home CM discharges upon admission
- Once admitted, facility submits form to switch to chronic care Medicaid



Medicaid Care Options at Home

- Care/Services for individual to safely remain in the home (house, apartment, family member's home, some assisted living)
- Common options for duals to receive personal care and services include:
 - Nursing Home Transition and Diversion Medicaid Waiver
 - Managed Long Term Care
 - Immediate Care through local DHS



Nursing Home Transition & Diversion Medicaid Waiver

- Nursing Home Transition and Diversion Medicaid Waiver
 - For those assessed to need nursing home level of care
 - 18+ with active Medicaid
 - Home & Community Based Care with service coordination
 - May choose consumer directed care (CDPAS) <https://www.nymedicaidchoice.com/ask/about-long-term-care>
 - Persons with cognitive impairment may be eligible for additional Personal Care Assistance through local DSS/DHS
 - NHTD Regional Resource Development Center for details
- https://www.health.ny.gov/facilities/long_term_care/waiver/nhtd_manual/
- Health Home CM discharges upon enroll



Managed Long Term Care (MLTC)

- Mostly for dually eligible population (may be accessed by Medicaid-only)
- For those age 18+ (21+ mandatory) and who are assessed to need 120 days+ of long-term care services
- Can provide needed care and support for non-skilled nursing eligible population
- Most (traditional MLTC plans) do not cover physician/hospital/acute care
- Specialty health services, Health care services (nursing, home health aide, home support), Personal care services (ADL's and IADL's), Adult Day Health Services & Social Adult Day Services, Home delivered meals, Personal emergency response systems, Non-emergency medical transportation, Home/Environmental modifications, Medical equipment, Social support, Nursing Home
- Member may choose consumer directed care (CDPAS)
- Members may keep Health Home Care Manager with Services Agreement
- <https://www.nymedicaidchoice.com/ask/about-long-term-care-plans>



Types of MLTC Plans

	Traditional MLTC Plan (MLTC Plan)	Medicaid Advantage Plus (MAP)	Program of All Inclusive Care for the Elderly (PACE)
Minimum Age	18 yrs or older	18 yrs or older	55 years or older
Population Served	Dually eligible or Medicaid only	Dually eligible	Dually eligible or Medicare only
Who is eligible?	County residents assessed to need 120+ days of LTC	County residents assessed to need 120+ days of LTC	County residents assessed to need 120+ days of LTC
May choose own doctor?	Yes	No	Sometimes
Covers physician & hospital care	No (Medicare or straight Medicaid covers this)	Yes	Yes
Covers long term care services	Yes	Yes	Yes
Accessing Care	<ol style="list-style-type: none"> CFEEC Assessment UAS-NY for Care Plan 	<ol style="list-style-type: none"> CFEEC Assessment UAS-NY for Care Plan 	<ol style="list-style-type: none"> CFEEC Assessment UAS-NY for Care Plan



How to Access MLTC

- NY Medicaid Choice (a program of Maximus) is New York State's managed care broker
 - <https://www.nymedicaidchoice.com/>
 - 1. Call NY Medicaid Choice's Conflict Free Evaluation and Enrollment Center to request assessment (UAS Level II)
 - **1-855-222-8350**
 - 2. Call NY Medicaid Choice to choose an MLTC plan
 - **1-888-401-6582**
 - 3. MLTC plan nurse does assessment (UAS Level II)
- Enrollment by 18th of month with all assessments/paperwork in place, plan services may begin by 1st of following month



Getting Care FAST: Immediate Care

- Immediate Care may be requested by local DSS/DHS
 - Personal Care Assistance (PCA) or Consumer Directed Personal Assistance Program (CDPAP) can be provided pending the individual's enrollment in a managed plan, managed long-term care plan, or waived service
 - Expedited Medicaid approval, LTC rider
 - "FAST" is typically 2-3 weeks
- Physician's Orders DOH 4359, Attestation of Need for Immediate Care, and Assessment (by county's intake team) required
- Contact local DHS/DSS PCA Intake Unit
 - Some counties contract intake service to a local Certified Home Care Agency
 - Or, contact local NY Connects office for help



When Challenges Arise

- NY Connects
 - (800) 342-9871
 - www.nyconnects.ny.gov
- MLTC Questions/Advocacy
 - Independent Consumer Advocacy Network (ICAN), <http://www.icannys.org/>, 844-614-8800
- Adult Protective Services (APS)
 - Eligibility: 1) One or more physical or cognitive impairments, and 2) unable to meet his/her essential needs or protect him/herself from harm, and 3) no one willing/able to assist responsibly
 - Call NY Connects for local contact/referral to APS



Stella

- Stella is 82, has arthritis, high blood pressure and a history of mini strokes, and she is fearful of falling (uses a walker)
- Her family describes her as "sharp as a tack"
- She has Medicaid, income \$1250, she has a pooled trust
- Stella wants to remain in her existing home, an in-law apartment in her daughter's home
- Stella needs help with laundry, housekeeping and meal prep, in addition to help in/out of the shower, dressing, and assistance with urinary incontinence management
- Stella's family is not available days, and she doesn't want to be a burden in the evenings



Richard

- Richard is 94 and has been living in the same home for 70 years and has no living relatives
- He is a veteran, has diabetes, COPD and osteoarthritis, and although he seems cognitively well during morning and daytime visits, his physician reports he has significant short-term memory loss
- Richard has been found by neighbors twice, wandering his neighborhood, lost
- He was recently hospitalized for dehydration and elevated blood glucose levels after getting lost in his neighborhood
- Richard denies all memory loss, refuses support or care, and adamantly refused to leave his home



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