

**Discharge Planning Workgroup Meeting
 Minutes for Meeting of October 7, 2010
 40 North Pearl Street, (16 floor CR) Albany, 217 So Salina Street, (Room 4A)
 Syracuse Area Office, 317 Lenox Avenue, (Room 909) New York City Office
 1:00 pm – 3:00 pm**

<p>WELCOME and Review of Day</p>	<p>Anna Colello welcomed all conference participants from each of the three video conferencing locations</p>
<p>Nursing Home Transition and Diversion Waiver Presented by Colleen Maloney</p>	<p><i>NHTD Update</i> Currently, 608 participants are being served through the NHTD waiver. The waiver was renewed on September 1, 2010 for five years. DOH made several changes to the waiver program in the renewal application, including: Service Plan Approvals: Service plans are now reviewed every twelve months (rather than every six months). Addendums are still required for any changes to the Service Plans. RRDC Interim Service Coordination: In recognition of the importance to facilitate enrollment and establish a Service Plan quickly, this new service will be available to new participants in the NHTD waiver for up to six months while they arrange for Service Coordination from an enrolled provider. If chosen by the participant, the staff currently serving under the Regional Resource Development Center (RRDC) NHTD contract will not be allowed to be the ISC; this service must be other staff at the RRDC organization. Serious Reportable Incidents Procedures: The SRIs are now handled by the RRDCs, rather than at the State level. Provider Qualifications: There were some minor eligibility changes to provider qualifications in the approved waiver application, such as references to a General Equivalency Degree (GED) have been changed to a High School Diploma; staff with a GED who are already providing services are grandfathered in. Environmental Modifications and Vehicle Modifications: In recognition of the fact that participants may need both environmental and vehicle modifications, the services have been separated into two distinct categories. Assessment Tool: Starting December 1, DOH expects to implement a new community-based assessment tool, rather than the current PRI/SCREEN. (In light of the UAT, this is not being implemented). The waiver renewal application submitted to the Centers for Medicare & Medicaid Services (CMS) is available on the DOH Web site at http://www.health.ny.gov/facilities/long_term_care/waiver/docs/application_2010-06-14.pdf.</p>

<p>Money Follows the Person Presented by Tracie Crandall; Laurie Schacher; and John DelGrosso</p>	<ul style="list-style-type: none"> • Federal demonstration for enhanced federal reimbursement for 365 days for certain long term care services for persons coming out of a nursing home • The money does not go to the person; the additional federal reimbursement is used to offset the costs of several long term care rebalancing activities identified in collaboration with stakeholders • Eligibility <ul style="list-style-type: none"> - Must have been in nursing home for at least three (3) months exclusive of Medicare covered rehab days - Must be in receipt of Medicaid - Must transition to qualified residence • Money Follows the Person has been extended to 2016 • Currently, there are 146 active MFP participants (of those, 46 are Traumatic Brain Injury individuals)
<p>Provider Perspective NHTD Presented by Joyce Ross</p>	<p><i>Provider Perspective</i></p> <p>During the meeting, an NHTD provider and Licensed Home Care Services Agency (LHCSA) from the Southern Tier discussed their experience with serving patients through the waiver. Among the lessons learned are:</p> <p>Many of the patients are difficult to serve, requiring many hours and frequent intervention;</p> <p>The most successful cases are those with strong family support;</p> <p>Past behavior of the participant is a strong indicator of future behaviors and should be considered when deciding whether or not to accept a case;</p> <p>Successes will boost employee morale and failures will devastate it;</p> <p>Staff need to be recognized for the extraordinary commitment they make;</p> <p>Once a commitment has been made to accept a case, closing it is difficult.</p>

Next Steps	Deborah Greenfield from Office of Children and Family Services will chair the next Discharge Planning Meeting on January 13, 2011. (later rescheduled)
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Please note that all power point presentations will be on NYS Department of Health website.