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Community Integration for Every New Yorker



Olmstead Plan One Year Update

October 22, 2014

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Olmstead Cabinet



Olmstead Report

- Executive Order No. 84 created Olmstead Plan Development and Implementation Cabinet
- Olmstead Cabinet issued final report in October 2013
- Ongoing oversight of Olmstead implementation through Most Integrated Setting Coordinating Council



The Olmstead Plan

- Community transition
- Assessment and outcomes measurement
- Reforms to support community integration
- Accountability



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Community Transition

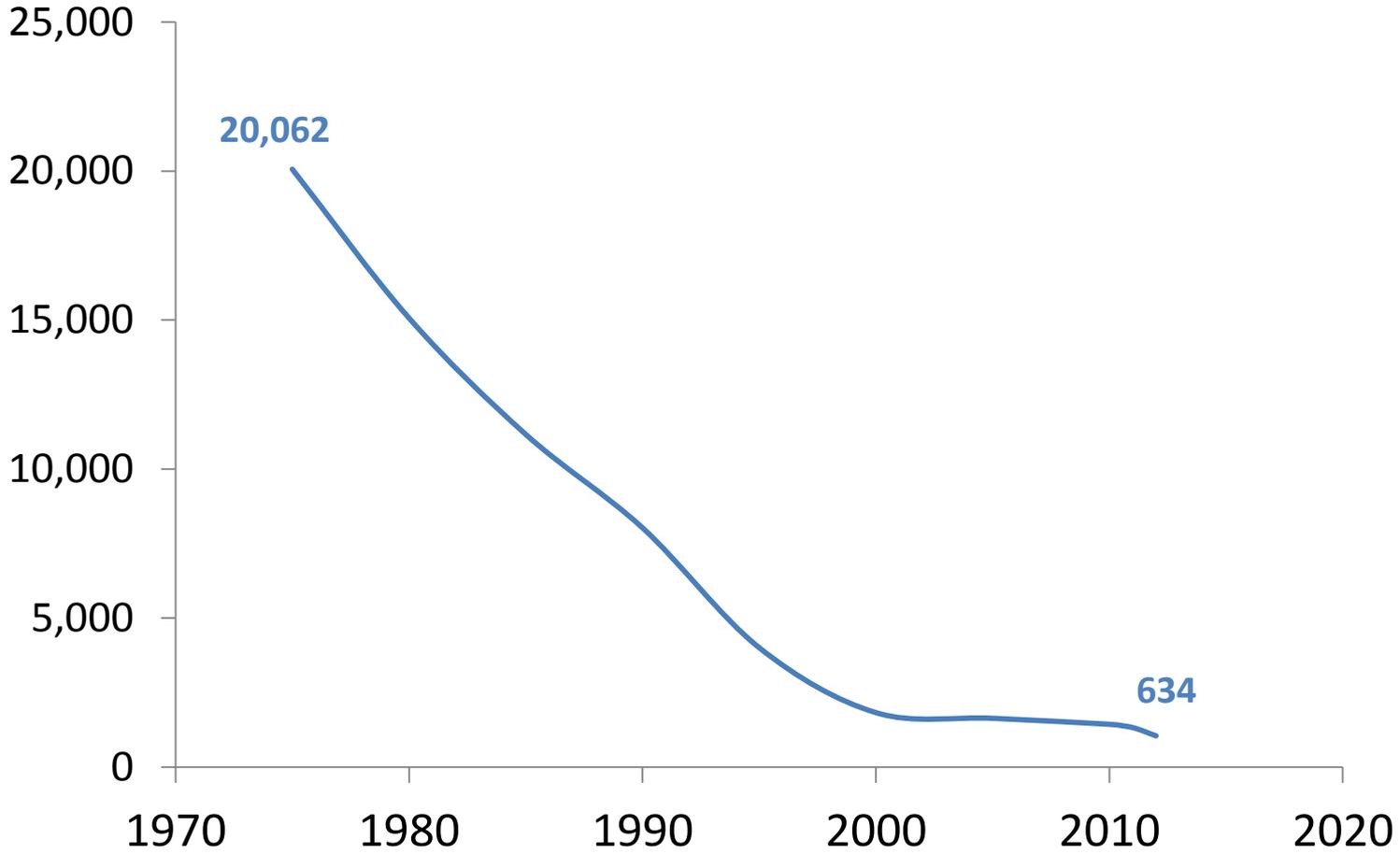


Individuals with Intellectual and Developmental Disabilities

- Enhancing system capacity through partnerships
- System education on broader array of living environments
- Reduce reliance on institutional supports
 - Developmental center closure and reduction plans
 - Community ICF transition plan

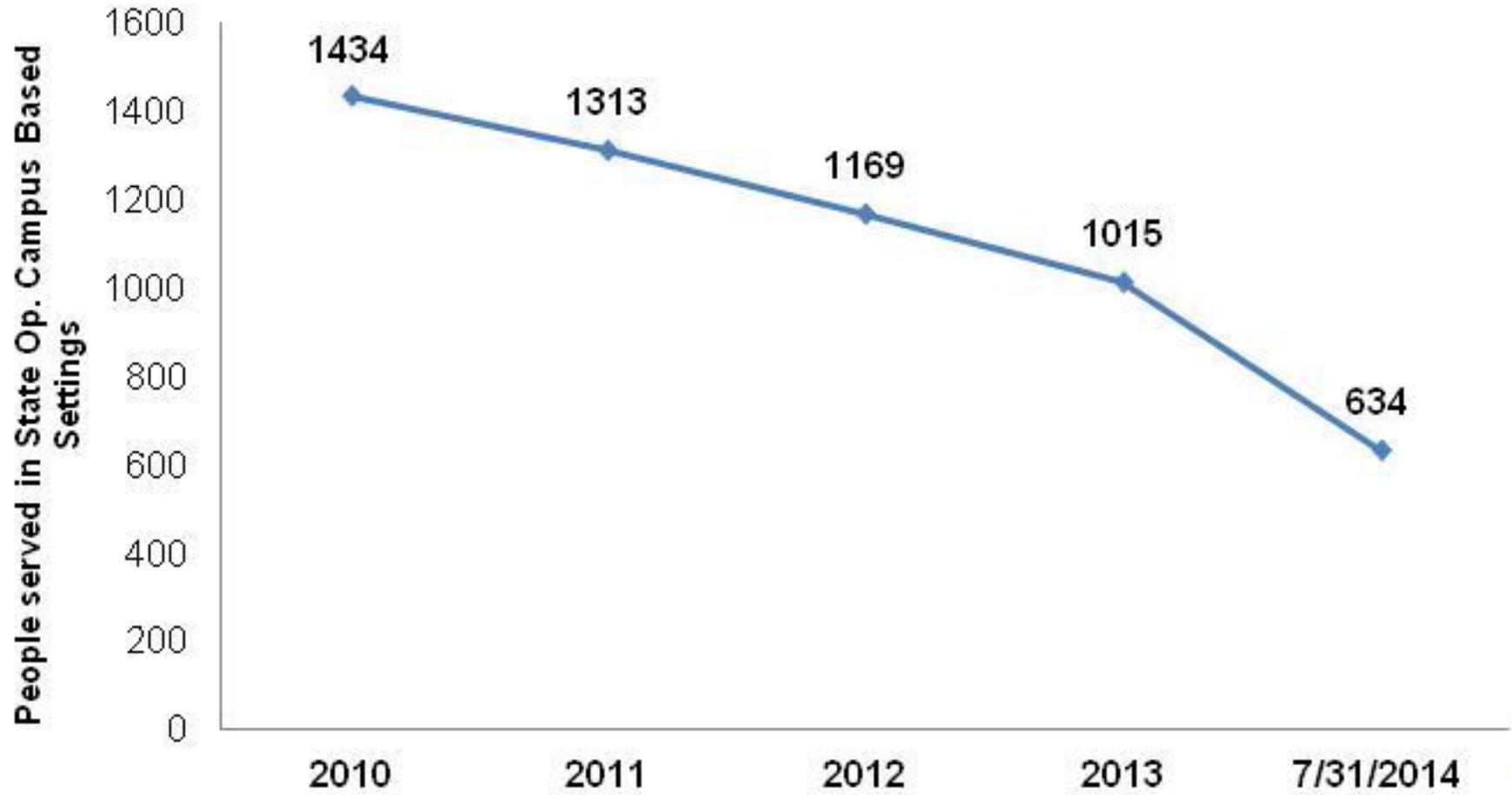


Developmental Center Census: 1975-2014



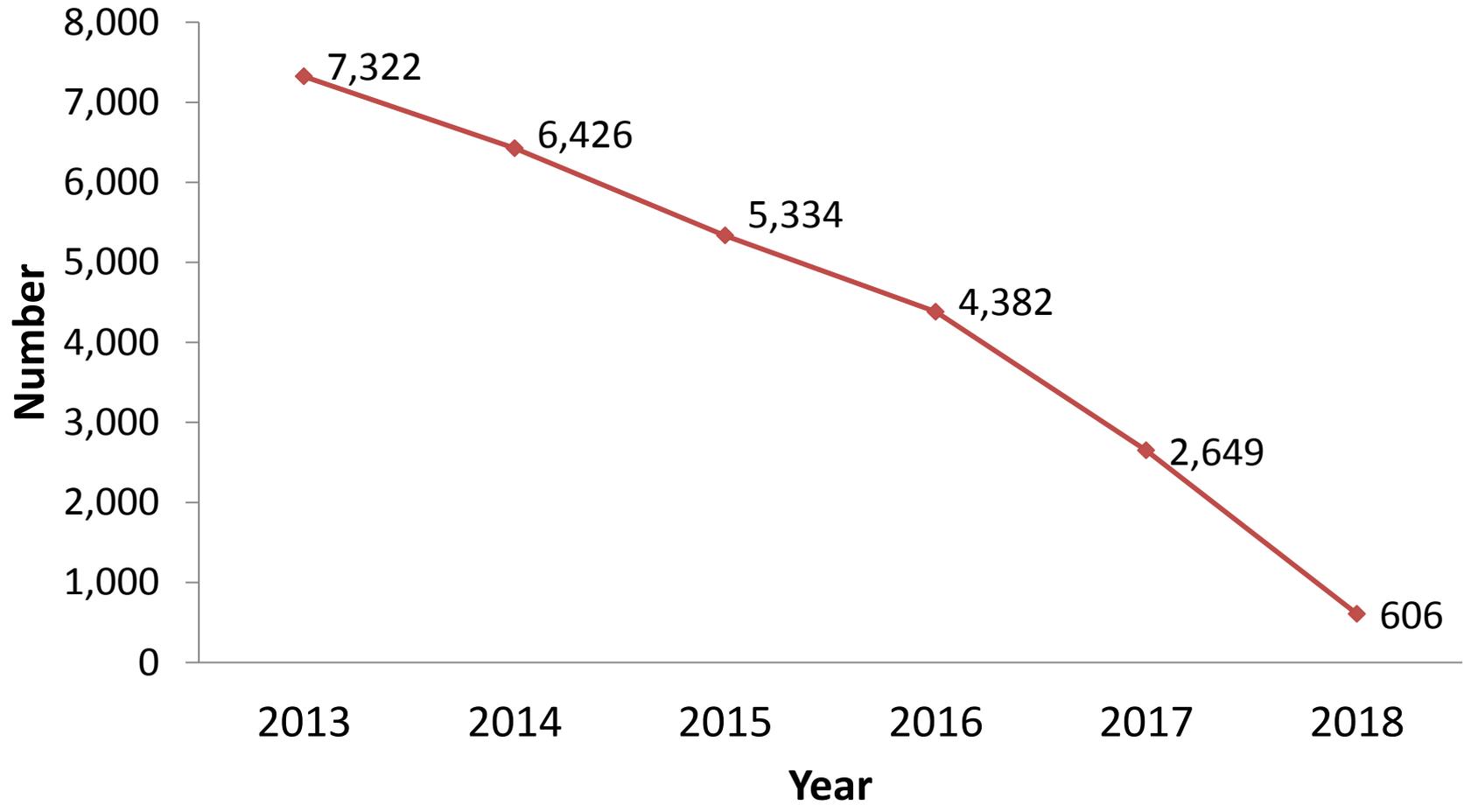


Developmental Center Census Reductions





ICF Transition Goals: 2013-2018





OPWDD Activities to Increase Employment Outcomes

- New service initiated in July 2014—**Pathway to Employment**—to provide greater assessment and skill building to facilitate improved job matches
- Changing **supported employment** model and reimbursement to incentivize job retention; January 2015 implementation



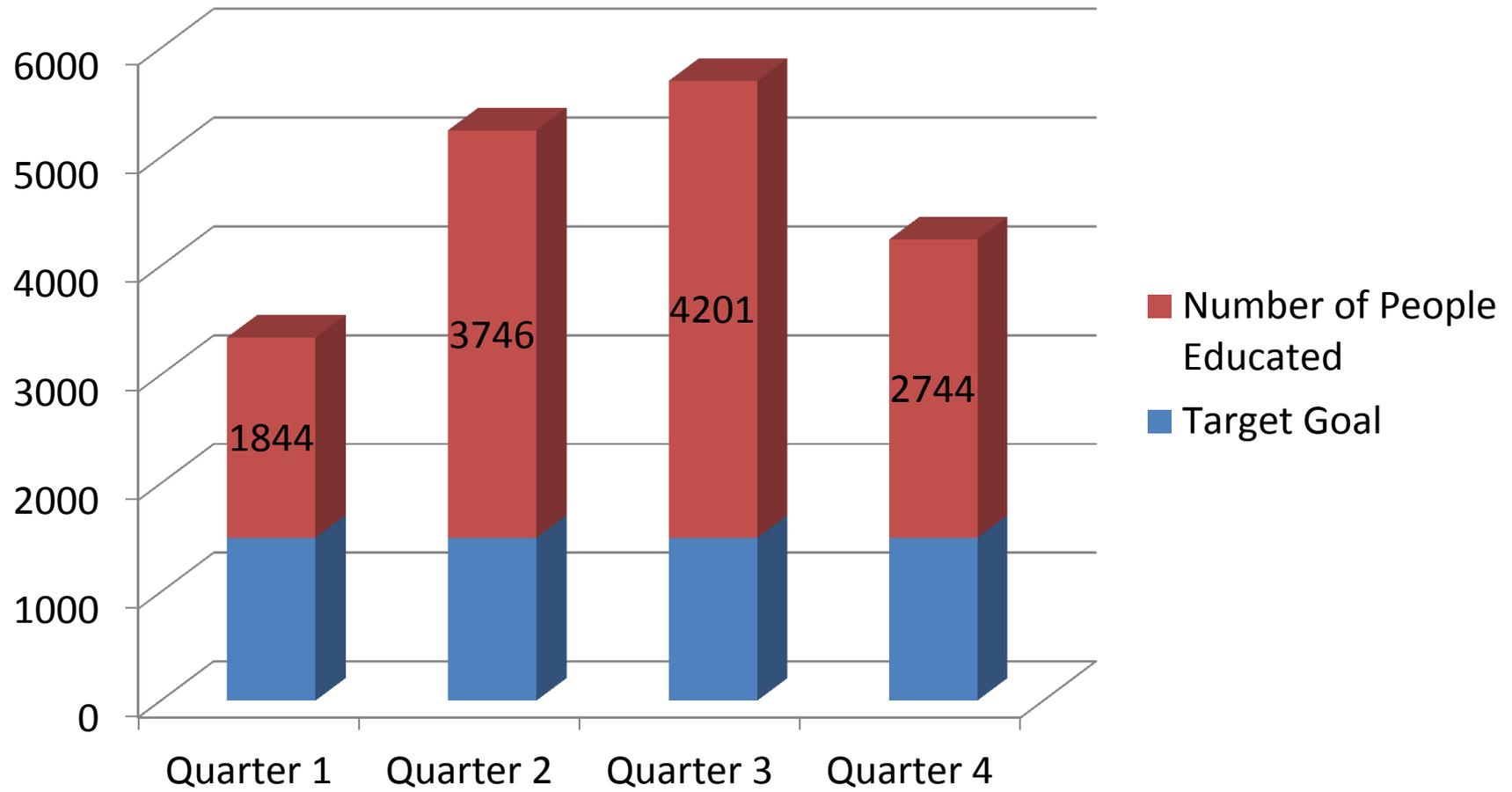
OPWDD Competitive Employment Outcomes

DATE	NUMBER EMPLOYED*
As of April 1, 2013	7,044
As of March 31, 2014	7,369
NET GAIN	325

*Employed in integrated setting at or above minimum wage.

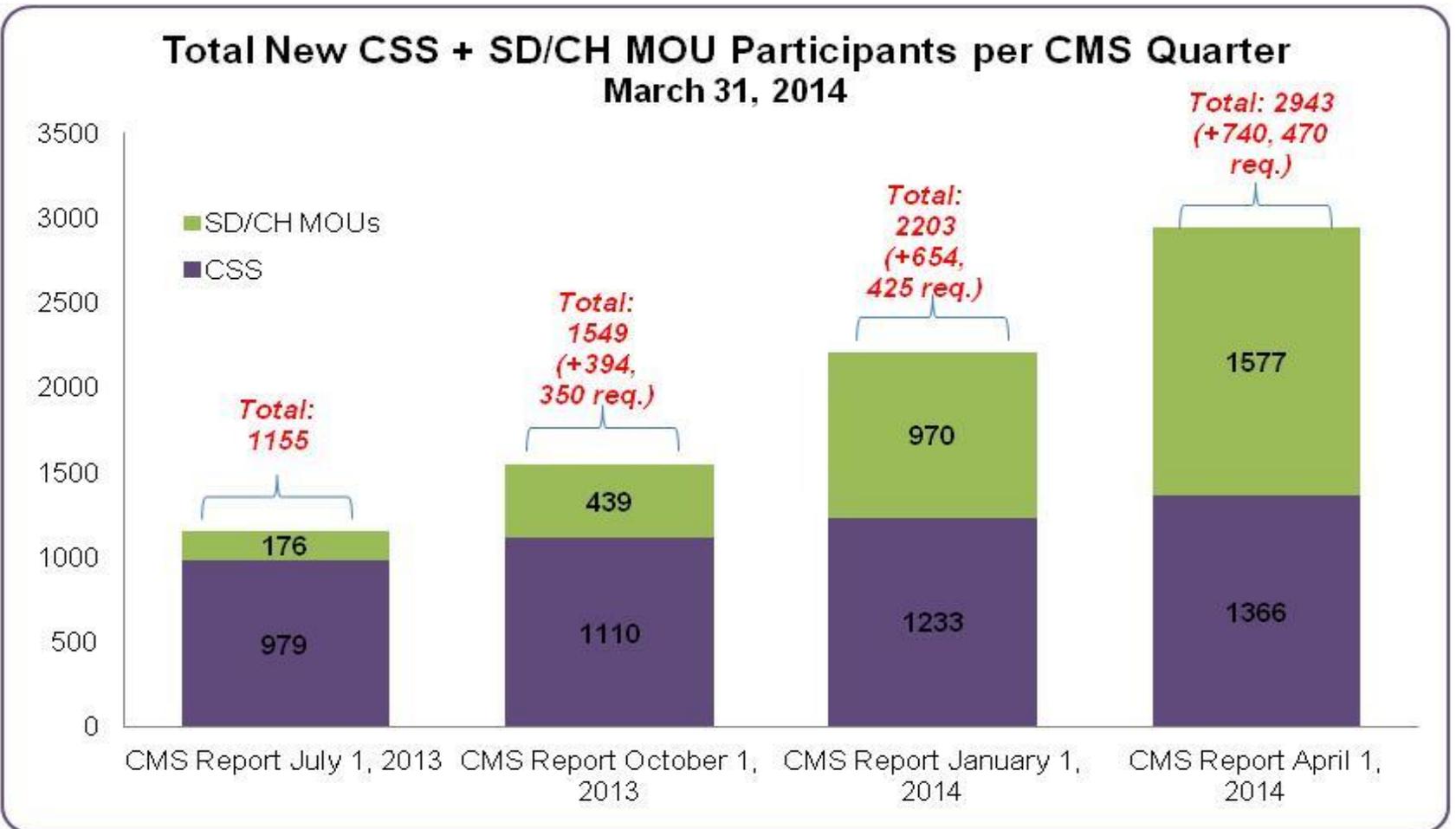


Education on Self Direction





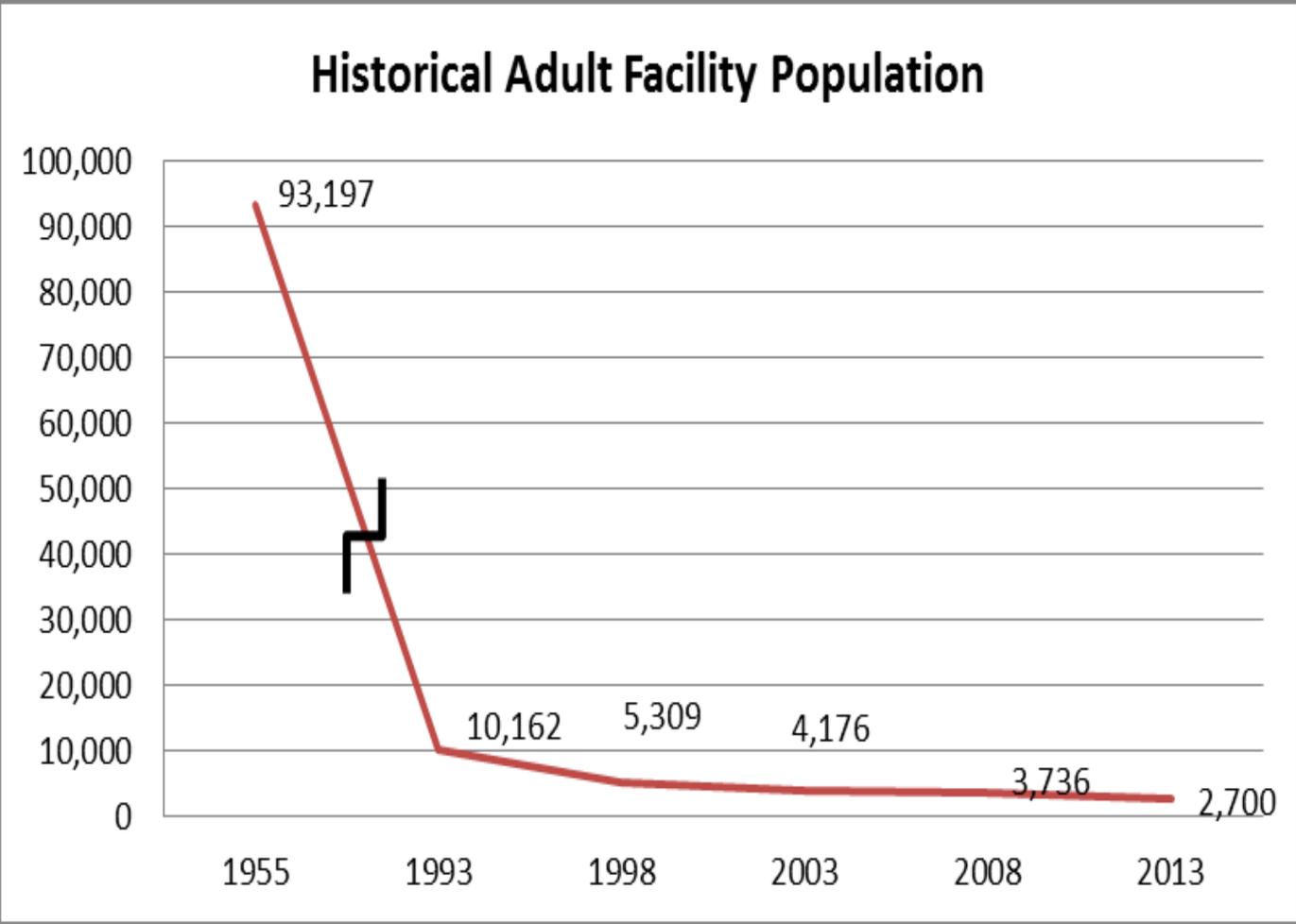
Total Growth of People who Self Direct





Individuals with Mental Illness

- Transform network of psychiatric center inpatient and community services to enable individuals in care to live in the most integrated setting possible
- Focus state psychiatric center system on high quality, intensive treatment with shorter lengths of stay and enhanced treatment and support in the community
- Hospital adult inpatient census declined from 2,962 on April 1, 2012 to 2,577 on September 1, 2014





Community Pre-Investment

- \$44 million annualized “pre-investment” for:
 - 628 Units of Supported Housing (\$7.1 million)
 - 168 Waiver Slots (\$4.5 million)
 - State Operated Community Services (\$14.9 million)
 - Other Community/Aid to Localities (\$15.9 million)
 - Suicide Prevention and Forensic funding (\$1.5 million)
- Specific services and programs developed with State Operations and Aid to Localities subject to ongoing regional consultation and planning



Reducing Long-Term Stay Census

- Number of long stay individuals in OMH PCs in April 2013 was 1,060.
- Olmstead Report set goal of 10 percent reduction in long stay population over two years.
- We are currently at 936, already exceeding our goal.



Persons in Nursing Homes

- The Olmstead report provided the framework for New York to serve people with disabilities in the most integrated setting appropriate to their needs
- The Olmstead goal is to reduce long stay patients in nursing homes by 10 percent over five years



Department of Health Olmstead Planning Committee

- DOH established a Olmstead planning committee that meets bi-weekly
- Work plan developed and implemented
- Subgroups researching key topics:
 - Assessment Tools
 - Regulatory Barriers
 - Data

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Assessment and Outcomes Measurement



Common Assessment and Outcomes Measurement Workgroup

- Cross-agency workgroup established fall 2013:
 - DOH
 - OMH
 - OPWDD
 - OASAS
 - SOFA
 - Justice Center
- November 2013 – subgroups formed
 - Assessment (OPWDD lead)
 - Measurement (DOH lead)



Programs

- DOH
 - MLTC, ALP, Personal Care, CDPAP, LTHHCP, TBI, Adult Day Health, Care at Home, and NH Transition and Diversion waivers
- OMH
 - BHOs, HARPs
- OPWDD
 - All eligible individuals
- OASAS
 - HARPs, BHOs
- SOFA



Developing Common Assessment Instruments

- DOH
 - Uniform Assessment System (UAS)
- OPWDD
 - Coordinated Assessment System (CAS)
- OMH
 - In development (core set comprised of UAS and CAS)
- OASAS
 - In development (UAS and CAS)
- SOFA
 - Comprehensive Assessment for Aging Network Community Based Long Term Care Services (COMPASS)



Developing Olmstead Dashboard

- Five participating agencies completed a survey to understand applicable Olmstead outcome measures
- Data gathered on measures identified as most robust
- Developing public Olmstead dashboard based upon existing data
- Measures will evolve over time as systems of support change



Key Olmstead Domains

- Most Integrated Living Setting
- Employment
- Meaningful Day Activities
- Access to Transportation
- Access to and Use of Self-Directed Models
- Choice in Services and Supports



Dashboard Screen Shots



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"People with disabilities have the right to receive services and supports in settings that do not segregate them from the community; it is a matter of civil rights."
- Governor Andrew M. Cuomo



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Department of Health Managed Long Term Care Measures:

Population: Medicaid enrollees in Managed Long Term Care (MLTC) plans have met the following criteria: have a chronic illness or disability that makes them eligible for services usually provided in a nursing home; are able to stay safely at home at the time when joining the plan; are expected to need long-term care services for more than 120 days from the date of enrollment; meet the age requirement of program, and the plan; and reside in the area served by the plan.

Data Sources: The measures are based on either satisfaction or functional assessment data. The satisfaction data were obtained from a Department of Health sponsored survey administered in the spring of 2013 to MLTC enrollees who had six months of continuous enrollment in 2012. The functional assessment data are from the Semi Annual Assessment of Members (SAAM) from ADD DATES.



Dashboard Screen Shots



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- Housing 
- Employment 
- Services 
- Choice 
- Community 

Satisfaction with Care Coordination

[\[MLTC\]](#) Percentage of members who rated the quality of care manager/case manager services or supplies within the last 6 months as good or excellent. **86%**
Department of Health (DOH)

Percent of people who report service coordinators help them get what they need. **90%**
Office for Persons with Developmental Disabilities (OPWDD)

Percent of people who report that staff helped them obtain the information they needed so that they could take charge of managing their illness. **87%**
Office of Mental Health (OMH)

Satisfaction with Services and Supports

[\[MLTC\]](#) Percentage of members who rated their managed long-term care plan as good: **84%**
Department of Health (DOH)

[\[MLTC\]](#) Percent of members who would recommend their plan to others. **90%**
Department of Health (DOH)

Percent of people satisfied with supports and services by indicating they like where they live. **82%**
Office for Persons with Developmental Disabilities (OPWDD)

Services and Supports

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Next Steps

- Challenges in consistent data collection bring need to build common data elements into systems
- Integrated approach envisioned with transition to managed care will help build common outcome measures upon full implementation
- Workgroup to identify measures that are lacking and recommend future data sources

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Supporting Community Integration



Balancing Incentive Program

- The Balancing Incentive Program (BIP) supports the key elements of Olmstead Plan:
 - Under BIP, New York will enhance the existing New York Connects network to assure a no wrong door/single point of entry for long-term care services and supports, implement a standardized assessment instrument, and assure conflict-free case management services
 - BIP will improve access to information and assistance so that people with disabilities will be able to make informed choices regarding services and settings



BIP No Wrong Door

- Expand existing NY Connects system to cover entire state and all populations with long term services and supports needs
- Contract with four to six independent living centers and/or not-for-profit community based organizations for individuals with physical disabilities to provide for statewide coverage
- Specialized no wrong doors are being designated that will serve individuals with population-specific LTSS needs, including:
 - OPWDD's Front Door
 - OMH's Behavioral Health Door



BIP No Wrong Door: Progress and Next Steps

- Progress:
 - Proposed design of the No Wrong Door (NWD) Structure
 - Solicitation of stakeholder input on proposed NWD structure
 - Drafted Applications, Standards & RFA for NY Connects organizational expansion
 - Drafted RFP's for additional functionality and automation
 - Updated NY Connects standards to reflect BIP standards
- Next Steps:
 - NYS Budget process & sustainability
 - Develop technical specifications
 - Develop training materials
 - Implementation planning



Home and Community Based Services Settings

- At the July MISCC meeting, DOH discussed the Home and Community Based Services settings final rule and the state's transition plan as it impacts the Olmstead goal of community integration
- To seek input from the public, DOH held two webinars in July and posted the HCBS transition plan in the state register
- The state asked CMS for additional time to receive public comment on the OPWDD People First Waiver
- As a result of this extension, DOH will continue to revise the statewide transition plan pursuant to public comments and additional guidance from CMS



Supportive Housing

- New Yorkers with disabilities need affordable, accessible housing to lead integrated lives
- Over the past three years, the state has made an investment of more than \$388 million in supportive housing programs targeted at New York's Medicaid recipients with a high level of need
- Recent pilot projects include:
 - Nursing Home to Independent Living Supportive Housing Pilot Program
 - The Senior Supportive Housing Services Pilot Program



Olmstead Review Process

- In 2013, HCR implemented an Olmstead-specific review process for all projects requesting funding under the competitive Unified Funding application process
- Unified Funding Olmstead review is conducted in collaboration with state, federal, and/or local funding partners
- Prior to award of funding, the review assesses whether persons with disabilities will be served in the most integrated setting appropriate to their needs



2014 Olmstead Review Enhancements

- In 2014, HCR implemented a new pre-application conference requirement for any applicant targeting 50% or more of a project's bedrooms to persons with disabilities
- Conferences must include HCR and the state, federal or local agency that is providing the funding for appropriate services
- Purpose of this conference is to explore whether the contemplated project is consistent with the Olmstead decision



Section 811 Program

- In May, HCR as lead agency submitted an application to HUD under the Section 811 Project Rental Assistance Program NOFA
- The application limits the maximum percentage of units targeted to persons with disabilities to no more than 25% of a project's total units
- The 811 application proposes an integrated, person-based service and rental support model
- Awards anticipated December 2014



Employment First Executive Order

- Issued in October 2014
- Builds on Olmstead Cabinet's work to enhance employment for persons with disabilities
- Creates Employment First Commission
- Cross-disability focus
- Report to issue in March 2015



NYESS Administrative Employment Network

- To date, the NYESS Administrative Employment Network (AEN), through a partnership with over 200 partners, including one-stops and local community rehab partners, have achieved the following milestones:
 - Over 8,000 individuals engaged
 - Over \$2.3 million in additional revenue brought into NYS that goes directly to supporting employment for individuals with disabilities
 - 500 of these individuals are now earning above \$1,100 a month, and are moving toward higher earnings and financial independence
 - Enhanced services are being provided to individuals throughout NYS (Cap Region, NYC, Southern Tier, and Western NY)
 - Some providers have received over \$50,000 in additional resources to develop these supports (close to 50 providers in total)



Disability Resource Coordinators

- DRCs are specialists trained to assist individuals with disabilities who seek help at NYS career centers with finding employment
- All DRCs are certified in benefits advisement and work incentive counseling
- From 10/15/13 to 10/14/14 there were 22,816 individuals with disabilities receiving services from the NYS Career Center system
- As of 12/31/13 federal funding supported 26 DRCs throughout NYS
- As of 09/30/2014 federal funding supported 11 DRCs throughout the state
- In 2015 and beyond, additional DRCs will be hired for career centers through revenue generated from NYESS' AEN



Tax Incentives

- In 2013, 438 businesses applied for a tax credit under the Workers with Disabilities Tax Credit as a result of hiring individuals with disabilities
- In 2013, 2,301 businesses applied for a tax credit under the Work Opportunity Tax Credit as a result of hiring individuals with disabilities
- A new tax credit called Workers with Developmental Disabilities Tax Credit will go into effect for the calendar year 2015 and will permit businesses to obtain a tax credit as a result of hiring people with developmental disabilities



Transportation

- Mobility management practices increase the availability of transportation for people with disabilities
- Developing a pilot program to expand upon the existing Medicaid transportation management initiative to implement mobility management



Children's Managed Care Initiative

- Integrated care for children with disabilities
- Eligible children to include those who:
 - Have a psychiatric diagnosis, emotional disturbance, alcohol or drug disorders, developmental disorders or organic brain syndrome
 - Are medically fragile
 - Have experienced physical, emotional, or sexual abuse, neglect, or maltreatment and have extended impairment in functioning



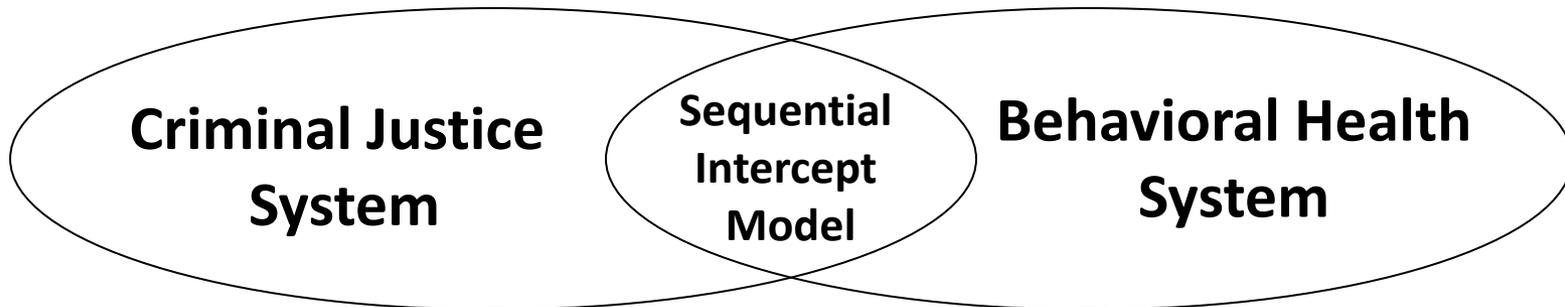
Next Steps

- Finalize Proposed Benefit Package
 - New State Plan and Waiver Services
- Network Standards and Performance Metrics
- Analysis of Potential Numbers of Children in Cohorts

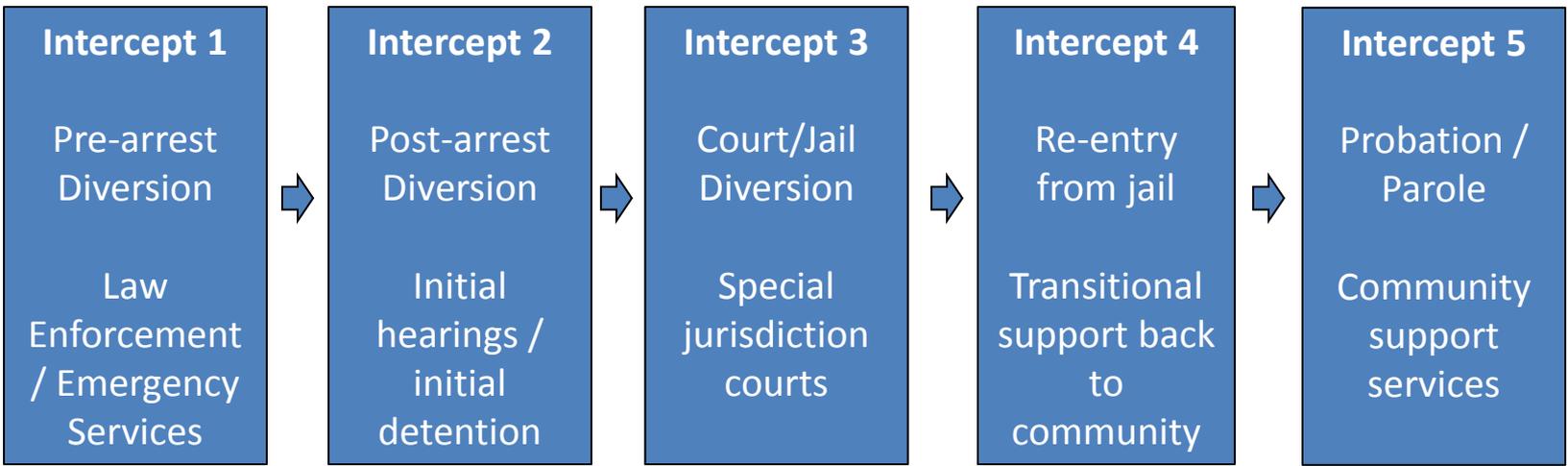


Criminal Justice and Mental Health

- DCJS Office of Probation and Correctional Alternatives received Justice and Mental Health Collaboration Program (JMHCP) grant from the US DOJ Bureau of Justice Assistance to work in up to 10 designated IMPACT counties in collaboration with NYS Office of Mental Health to reduce crime and improve outcomes for individuals with mental illness
- Justice Mental Health Collaboration Grant adopts Sequential Intercept Model developed by Policy Research Associates and the SAMHSA Gains Center



Criminal Justice System



Diversion of appropriate adults throughout CJ system

BH System

Community Services and Supports: crisis support, residential and vocational support, case management, outpatient



NYS DCJS JMHCP

Participating Counties

Phase I (began June 2013)

Monroe

Nassau

Rensselaer

Schenectady

Westchester

Phase II (began July 2014)

Albany

Erie

Monroe

Onondaga

Orange



Legal Reform

- Seek to expand authority of non-licensed personnel to provide health-related task assistance to persons residing in the community
- Seek reform of the law governing guardianship over people with intellectual and developmental disabilities to assure least restrictive option



Nurse Practice Act

- Nurse Practice Act exemption for persons with developmental disabilities passed in 2013-14 budget
- Negotiations to implement the exemption ongoing



Advanced Home Health Aide

- DOH workgroup to provide guidance on advanced tasks that could be performed safely by home health aides in home care and hospice settings with appropriate training and supervision, if authorized as an exemption to the Nurse Practice Act in the New York State Education Law
- The workgroup will provide guidance on identifying:
 - Tasks that could be performed safely by advanced home health aides, including administration of medication
 - The qualifications required for advanced home health aides, including minimum training and education standards
 - The level of supervision to be provided by registered nurses to advanced home health aides



Advanced Home Health Aide Workgroup

- Members include:
 - Academic institutions
 - Home care and hospice providers
 - Home health aides
 - Nurses and nurse educators
 - Pharmacists
 - Individuals who may be eligible to receive services performed by advanced home health aides
 - Other relevant stakeholders
- Guidance to be completed by December 2014