

APPENDIX D

Categories of Community Housing and Services Listing

This information has been prepared by the New York State Office of Mental Health (OMH) and the New York State Department of Health (DOH) to help Medicaid eligible New Yorkers with Serious Mental Illness to understand their options for living independently in the community. The information will help you and your family to identify the types of housing and services you may be able to receive to live more independently.

Housing

There are a number of housing options, some funded by OMH, some funded by other state agencies, and some on the open housing market. We will describe the OMH-funded housing in the most detail and will also highlight some of the options funded by other state agencies. You can also of course consider other community housing options including living with family or friends. For more information about applying for community-based housing, consult with your treatment team and facility discharge planner. You may also be eligible for OMH community services and other supportive services and benefits such as Food Stamps, Meals on Wheels, etc. Your facility discharge planner will be available to talk with you about supports in the community which would be helpful to you.

OMH-funded Housing and services provide a range of options, that can be combined to create a plan for more independent living in collaboration with you, your family, and current treatment team. OMH-funded Housing can provide the support and training you might need to learn skills to manage your finances, take care of your own living space, and ensure that you are getting the physical and mental health care services that you need. In OMH-funded Housing a portion of your monthly Social Security Income (SSI) check will cover your rent and utilities. The exact amount depends on the type of housing, but will be far less than the cost of an unsubsidized apartment.

There are three different types of OMH housing options:

- *Congregate Housing*
- *Apartment Housing*
- *Family Care*

As part of the housing referral process, you will be given an opportunity to meet with a housing provider and tour types of housing that meet your needs. Please keep in mind that these are examples, and that housing styles and designs will vary widely across each housing type.

Congregate Treatment

This type of housing is designed to be transitional and in most cases leads to even more independent types of housing like the kinds listed below. Three meals a day are provided and supportive staff is available 24 hours a day to help you learn skills for living more independently. You might have a private bedroom or you may share a bedroom with another person. Buildings with this kind of housing can serve up to 48 people, but many are smaller.

Community Residence/Single Room Occupancy (CR-SRO)

This type of housing is designed as extended-stay housing (2-5 years), and leads to more independent housing. There are staff at the residence 24 hours a day. In a CR-SRO you would live in either a studio apartment (one large room that includes a kitchenette, living space and sleeping area plus a private bathroom) or in a suite with shared living, kitchen, and bathroom areas, but single private bedrooms. Many CR-SROs offer a low-cost evening meal.

Supported/Single Room Occupancy (SP-SRO)

This type of housing is generally considered permanent. It is for people who can access the services they need in the community and don't need as much support at their place of residence. In an SP-SRO you would live in a studio apartment. Typically there are staff at the front desk/door 24 hours each day, and some support staff are stationed in the building. In newer SP-SROs some units may be reserved for non-disabled, low income individuals.

Apartment Treatment

Apartment Treatment provides a high level of support and skills training in apartment settings. This housing type, like the Congregate Treatment housing previously mentioned, is designed to be transitional. Most residents live in this type of housing for about 18 months and then may graduate into a Supported Apartment. In this housing you would share an apartment in the community with one or two roommates. Bedrooms may be shared but are usually private. Residents receive visits from support staff as needed, but there are no staff stationed in the apartment building.

Supported Apartments

Supported Apartments are considered permanent housing and are the most independent type of OMH-sponsored housing. Like Apartment Treatment housing, apartments are spread throughout various apartment buildings in the community. This housing option would allow you the highest degree of independence and privacy, and a minimum of staff support from the housing agency. In addition to the support provided by the housing agency, other supports from OMH and DOH can also be accessed if needed. In this housing you hold a lease or sublease. You would need to be able to manage your own money or have someone who assists you (representative payee). Thirty percent of your monthly SSI check would need to be contributed towards rent and utilities. Some Supported Apartments are shared and you would have an apartment mate, you can also choose to live alone or with your children and/or spouse. The rent calculation discussed previously would be modified if you decide to live with others.

Family Care

Family Care Homes provide 24-hour residential services in privately owned individual family homes that carefully match resident needs and provider skills. The average Family Care Home has three residents. The referral process includes interviews, physical and behavioral health screening, resident and provider preferences. Family Care Homes have people who are certified to deliver residential care in their own homes. They receive training, support, and financial reimbursement for providing this service.

Non-OMH Housing and Services

Senior Housing

Senior housing can be a single multi-unit building or multiple multi-unit apartment buildings, condominiums, or cooperatives, or a complex of single family homes, duplexes, or mobile homes, which are restricted to persons over a specified age (such as ages 55, 60, 62, or 65). Many senior housing units have supportive assistance, trained staff, and provide information about personal care and home health care services.

Many newly constructed or renovated senior housing developments incorporate physical design features to assist residents who have physical limitations. Some senior residences have resident advisors, which are specially trained managers or staff who maintain regular communication with community-based aging services organizations that can meet residents' needs. Monthly charges or rents do not include the costs of personal care assistance with Activities of Daily Living or health care services. Residents may make their own arrangements to receive these services from community-based organizations, which are often paid for by Medicaid. Senior housing is an option chosen by seniors (or their adult caregiver children) that need a supportive environment when their physical or mental condition limits their ability to continue living safely and successfully in their own homes. Subsidies are often available for senior housing, based on your income.

Enriched Housing Programs

Enriched housing programs provide long-term residential care including room, board, housekeeping services, personal care and supervision to people primarily 65 or older. This type of housing resembles independent housing units, generally grouped to serve five or more people. They can be operated by a number of different entities, including an individual, a partnership, a not-for-profit or public corporation, etc. and are regulated by the Department of Health.

OMH Community Services

In addition to housing, you may qualify for OMH mental health services in the community. Most OMH community services are covered by Medicaid or state funds. These services include:

- Personalized Recovery Oriented Services (**PROS**)
- Assertive Community Treatment (**ACT**)
- Targeted Case Management (**TCM**)
- Continuing Day Treatment (**CDT**)
- Mental Health Clinic Services

Personalized Recovery Oriented Services (PROS): PROS is a recovery program that is designed to meet all of your behavioral health service needs in one place, sometimes referred to as "one-stop-shop." PROS focuses on the strengths, interests, and goals of each individual, and helps people to create a plan that is specific to their own needs and challenges. It is considered a "comprehensive recovery-oriented program" and offers all of the services you need in an integrated way, and in one place. Participants use PROS to work on life goals that may include volunteer work, being reunited with family members, education and/or employment. PROS services have helped participants avoid emergency rooms and inpatient hospitalization.

Assertive Community Treatment (ACT) Teams: A mobile mental health treatment team that offer treatment, rehabilitation, crisis management, and support services to individuals in their homes, places of employment, or wherever the person needs services. ACT Teams use a person-centered and recovery-based approach and may include services such as: assertive outreach, mental health treatment, integrated dual disorder treatment, family education, wellness skills, community linkages, and peer support.

Targeted Case Management (TCM): Case management provides advocacy and linkage to necessary community services including financial entitlements. The frequency of visits from your case manager depends on your individual needs.

Continuing Day Treatment (CDT): These Day Programs offer mental health and related services in an outpatient program located in the community. Services may include: medication management, individual and group counseling, psychosocial rehabilitation, and problem solving. Individuals learn about their illness and ways to cope, while developing healthy living skills.

Clinic: A program located in the community that provides an array of treatment services for assessment and/or symptoms reduction or management. Services include individual and group therapy. The purpose of such services is to enhance the person's continuing functioning in the community.

Medicaid Home and Community Based Services

You may need Medicaid-covered home and community based services to live independently in the community. Below are some of the services that are available:

Adult Day Health Care

Adult Day Health Care provides medically supervised services for people with physical or mental impairments to enhance their ability to remain in the community. These services, which are mainly provided during the day in or near your community, includes: transportation, leisure activities, restorative and maintenance therapy services, nutrition services, social work services, rehabilitation and socialization, and coordination of referrals for outpatient health and dental services. Most Adult Day Health Care programs are operated by nursing homes, but are not necessarily located at the nursing home. Generally, the programs operate five days a week. Some programs also operate on weekends and during the evening hours.

Certified Home Health Agencies (CHHAs)

Certified Home Health Agencies (CHHAs) provide part-time, intermittent health care and support services at home to individuals who need skilled health care. A CHHA may provide long-term nursing and home health aide services, and can either provide or arrange for other services including physical, occupational, and speech therapy, medical supplies and equipment, and social work and nutrition services.

Personal Care Services Program (PCS)

The Personal Care Services (PCS) Program provides personal services such as housekeeping, meal preparation, bathing, toileting, and grooming. Local Department of Social Services (LDSS) usually contract with home-care agencies that hire aides to come to your home to provide these services.

Private Duty Nursing Services (PDN)

Private Duty Nursing (PDN) provides medically necessary skilled nursing services such as those of a Registered Nurse (RN) or Licensed Practical Nurse (LPN) in your home instead of in a nursing home or hospital.

Durable Medical Equipment

Durable medical equipment (DME) includes devices and equipment, other than prosthetic or orthotic appliances, ordered by a practitioner for the treatment of a specific medical condition. Examples include:

- Wheelchairs and walkers
- Shower chairs
- Respiratory care equipment

Consumer Directed Personal Assistance Program (CDPAP)

This Consumer Directed Personal Assistance Program provides services to chronically ill or physically disabled individuals who have a medical need for help with activities of daily living (ADLs) or skilled nursing services. Services can include any of the services provided by a personal care aide (home attendant), home health aide, or nurse. Recipients have flexibility and freedom in choosing their caregivers. You, or the person acting on your behalf, assume full responsibility for hiring, training, supervising, and, if need be, terminating the employment of persons providing the services.

Medicaid Home & Community Based Services Waiver Programs

Medicaid Home and Community Based Services (HCBS) waiver programs provide specialized services and supports necessary to allow participants to live in the community as opposed to a nursing home or other institution. A "waiver" is an exception to regular Medicaid rules that allows eligible persons to receive additional services and supports not otherwise covered by Medicaid. Your discharge planner can discuss with you whether you are eligible for any of the waiver programs.

You may participate in a HCBS Waiver Program, if you:

- Are Medicaid eligible
- Require nursing home level of care as determined by a medical assessment
- Wish to remain in the community as an alternative to living in a nursing home
- Have needs that can be met safely at home.

New York has four HCBS Waivers Programs for adults. They include:

- Long Term Home Health Care Program (LTHHCP)
- AIDS Home Care Program (AHCP),
- Nursing Home Transition and Diversion (NHTD) Program
- Traumatic Brain Injury (TBI) Program.

Long Term Home Health Care Program (LTHHCP) (also known as the *Lombardi Program*) and the **AIDS Home Care Program (AHCP)** serve individuals of all ages who have disabilities. To determine your eligibility, an assessment of your needs will be completed by a qualified professional. LTHHCP/AHCP offers both medical and nonmedical support services to assist an individual in improving or maintaining their health and daily functioning.

Nursing Home Transition and Diversion (NHTD) program serves eligible individuals eighteen (18) years or older who have a physical disability and seniors. This program serves people residing in nursing homes who would like to receive care in the community and those in the community who require additional services to remain in their home.

Traumatic Brain Injury (TBI) program provides specialized services for eligible individuals diagnosed with an acquired traumatic brain injury. These services allow those individuals with a TBI to live safely in the community with the appropriate supports.

Home and Community Based Service Programs may provide the following services in addition to those services covered by “regular” Medicaid:

- **Case/Service Coordination:** Provides ongoing assistance with development of an individual plan of care for appropriate and adequate services you may need to live successfully in the community.
- **Assistive Technology:** Equipment and supplies, not available through the Medicaid Durable Medical Equipment (DME) service, to help you to live in your home and increase your independence e.g. a Personal Emergency Response System
- **Community Transitional Services:** Assistance with one-time setup expenses for people moving from the nursing home to the community. Examples include moving costs, and purchase of furniture and appliances.
- **Congregate and Home Delivered Meals:** Provides meals, either home-delivered or in a group setting, for people who cannot get nutritionally adequate meals for themselves.
- **Environmental Modifications:** Internal or external adaptations to the home or vehicle. Examples include entrance ramps, bathroom modifications such as grab bars, and vehicle lift installation.
- **Home and Community Support Services** provides in home supervision and personal care. Examples include assistance with bathing, dressing and safety supervision.
- **Home Maintenance Services:** Provides major, non-housekeeping chores necessary to maintain a sanitary and safe home environment. Examples include snow removal, major cleaning, window washing, etc. (LTHHCP)
- **Home Visits by Medical Personnel:** Necessary medical care provided by a physician, nurse practitioner or physician’s assistant who visits you at home. (NHTD) (LTHHCP)
- **Medical Social Services Counseling:** Assists those experiencing emotional difficulties in adjusting to a disability, leaving a nursing home, and with on-going challenges to life in the community. (LTHHCP)
- **Moving Assistance:** Transport of the participant’s possessions and furnishings when moving from an inadequate or unsafe housing situation or to a location where more support may be available. (NHTD/LTHHCP/AHCP)
- **Nutritional Counseling/Education Services:** Assessment, planning, education and counseling for your nutritional needs. (NHTD)
- **Respiratory Therapy Services:** A respiratory therapist comes to the home to help with breathing difficulties. (LTHHCP, NHTD)
- **Respite:** Provides short term care at home or in other settings to allow a primary caregiver relief.
- **Social/Structured Day Care:** Provides social activities in a group setting in or near your community.

- **Transportation Services:** Transportation to certain pre-approved non-medical activities. (LTHHCP/TBI)

NHTD and TBI waiver participants may also be eligible for the following services:

- **Positive Behavioral Interventions and Supports:** Helps develop skills and strategies for improving behavioral difficulties that may jeopardize a person's ability to live in the community. (NHTD/TBI)
- **Independent Living Skills Training:** Aimed at improving person's ability to live independently in the community with step-by-step strategies.
- **Substance Abuse Programs:** Certified outpatient addiction programs with a TBI-specific curriculum. (TBI)
- **Community Integration Counseling** Advice and assistance to help individuals adjust to community life.
- **Peer Mentoring Education:** Information sharing and self-advocacy training by peers who have personal experience with the housing and services necessary to enable people with mental illness to live safely and successfully in the community. (NHTD)
- **Wellness Counseling:** Intermittent evaluation (RN) visits to your home to assist you in maintaining optimal health status. (NHTD)

NHTD and TBI Rental Subsidies

Rental housing subsidies are available through the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) Medicaid waiver programs. A waiver participant's contribution toward the cost of their rent is based on their financial resources. The remainder of an approved fair market rent may be supported by the subsidy programs. Subsidies are paid directly to participants' landlords.

Managed Long Term Care Plans

Managed long-term care plans are health plans for people who are chronically ill or need health and long-term care services, such as home care, to live in the community.

The MLTC plan arranges and pays for a health and social services covered by Medicaid. Each enrollee is assigned a care manager.

You may join a Managed Long Term Care Plan if you meet the eligibility criteria and reside in an area served by a Managed Long Term Care Plan. Once you are enrolled, you receive regular Medicaid services through your Managed Long Term Care Plan.