

COMMUNITY FIRST CHOICE OPTION GUIDELINES FOR AUTHORIZING ENVIRONMENTAL MODIFICATIONS

These guidelines outline the process for authorizing environmental modifications (E-Mods) under Community First Choice Option (CFCO) as a covered State Plan service. E-Mods are internal and external physical adaptations to the home, which are necessary to assure the health, welfare, and safety of the individual; enable the individual to function with greater independence in the home; and prevent institutionalization. E-Mods must be related to an assessed Activity of Daily Living (ADL), Instrumental Activities of Daily Living (IADL), or health-related need and be tied to a goal reflected in the individual's written person-centered Plan of Care (POC). E-Mods are intended to increase an individual's independence or substitute for human assistance to the extent that expenditures would otherwise be made for human assistance.

The scope of home accessibility modifications may include the performance of necessary assessments to determine the types of modifications that are necessary. Provider-owned or leased homes are not eligible for E-Mods.

Examples of E-Mods include, but are not limited to:

- Ramps
- Lifts that require modifications to the home: hydraulic, manual or electric
- Widened doorways and hallways
- Roll-in showers and/or accessible tubs
- Cabinet and shelving adaptations
- Installation of hand rails, grab bars
- Automatic or manual door openers and doorbells
- Water faucet controls
- Electrical and plumbing accommodations for new equipment

E-Mods may only be provided where the individual lives. E-Mods cannot cover home improvements such as air conditioning, new carpet, roof repair, etc. that are unrelated to the individual's POC.

Contracts for E-Mods may not exceed \$15,000 per year without prior approval from the New York State Department of Health. The Department of Health may delegate this responsibility to Medicaid managed care plans for their enrollees. The Local Departments of Social Services (LDSS) must contact the Department of Health to obtain this approval. In all cases, service limits are soft limits that may be exceeded due to medical necessity. If the individual's needs cannot be met within the established limits, an individual may request to exceed the limit by providing sufficient medical justification.

Providers of Environmental Modifications

All E-Mod providers must be a Medicaid enrolled provider, an approved 1915c waiver service provider or approved by Office for People with Developmental Disabilities (OPWDD), and have a contract with the Local District of Social Services (LDSS) or a Managed Care Organization (MCO). Providers of E-Mods must also adhere to any State and local safety standards pursuant to Article 18 of the New York State Uniform Fire Prevention and Build Code Act, as well as local building codes. Any not-for-profit or proprietary health and human services agency may provide E-Mods. In addition, an organization that has both the personnel and expertise to complete the E-Mods and is an approved Medicaid provider may also be approved by the Department to provide these services. Local Departments of Social Services (LDSS), State agencies and Managed Care Organizations (MCO) are encouraged to vet providers to ensure adequate capacity.

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Procedure for Authorizing Environmental Modifications

1. Through the person-centered planning process, during a POC meeting, the care/case manager, individual, and anyone involved in the development of the POC will determine if an E-Mod is necessary to assist and enhance the individual's independence in performing ADLs, IADLs, and/or health related tasks and/or will substitute for human assistance (to the extent that expenditures would otherwise be made for human assistance). The individual's residence must be identified, and residential information must also include the name of the home owner or landlord and their permission for the modifications/adaptations.
2. Once an E-Mod has been requested, the care/case manager on behalf of the individual seeks a clinical justification from the appropriate clinician (e.g., Occupational Therapist, Speech Language Pathologist, clinician from Article 16 or 28 clinic, Physical Therapist, or other licensed professional) and/or service specialist to assess the individual's need for the requested E-Mod.
3. The care/case manager and the individual will explore potential payment sources for the identified E-Mod including private insurance, community resources, and other Local/State/Federal programs before a request for payment under CFCO will be considered.
4. Following the completion of the clinical justification, the care/case manager must submit the *Community First Choice Option (CFCO) Environmental Modification and Vehicle Modification Description and Cost Projection Form* requesting the service or device to the MCO, LDSS, or DDRO for an authorization determination. In addition, the care/case manager will also submit a copy of the clinical justification and the individual's POC to the MCO, LDSS, or DDRO for review. The documentation submitted by the care/case manager must detail the need and intended purpose of the E-Mod to support the request.
5. The MCO, LDSS, or DDRO should notify the care/case manager and individual of its determination and begin the bid procurement and selection process.
6. Following the authorization determination, the MCO, LDSS, or DDRO (or designee) will initiate the bidding process. The MCO, LDSS, or DDRO is responsible for obtaining the number of required bids (depending on the needed E-Mod) and for selecting the vendor to provide the E-Mod based on the lowest bid that meets the assessed need. Items that cost up to \$1,000 require one bid; those over \$1,000 require three bids. Reasonable efforts must be made to obtain three bids. If not possible to obtain the three required bids without jeopardizing the individual's care, health and/or safety, the LDSS, MCO or DDRO may make the determination to proceed with fewer than three bids.
 - Payment for an assessment completed by the E-Mod provider, for helping select a specific modification, or for training in the use of any equipment, must be included in the cost of the E-Mod if the expertise needed for assessing, selecting and training is NOT available as part of a Medicaid State Plan service (e.g., clinic), or through other sources that are already involved with the individual (such as home health agencies, etc.).
7. The MCO, LDSS, or DDRO will notify the care/case manager, the individual, and the selected E-Mod provider of its determination. MCOs will follow notification requirements in the Managed Care model contracts. The DDRO or LDSS will issue a Notice of Decision (NOD) to the individual and care/case manager when they authorize a FFS individual for services.
8. The E-Mod provider will be responsible for coordination of the project, including:
 - provide a detailed description of the project including estimated material and labor costs;
 - secure and maintain necessary permits;
 - provide detailed expenditures/receipts;
 - comply with all state and local construction and building codes and ADA requirements;
 - ensure compliance with safety issues in Article 18 of the NY State Uniform Fire Prevention and Building Code;
 - complete necessary inspections;

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- maintain sufficient insurance and bond requirements;
 - secure licensed personnel to complete the required work;
 - determine the beginning and end dates of the project; and
 - ensure the satisfactory completion of the project.
9. Upon completion of the E-Mod, the E-Mod provider must submit a completed *Uniform Community First Choice Option (CFCO) Assistive Technology (AT), Environmental Modification (E-Mod), Vehicle Modification (V-Mod), and Community Transitional and Moving Services Final Cost Form* to the MCO, LDSS or DDRO including a description of the E-Mod purchased and the final cost.
 10. The MCO, LDSS, or DDRO will review the requested form and validate the completion of the specification of the bid/E-Mod service, and, if necessary, request more information. Once all requested information has been obtained, the MCO, LDSS, or DDRO will notify the E-Mod provider that they may submit a claim for payment.
 11. Upon completion of the E-Mod, the provider must submit a *Uniform Community First Choice Option (CFCO) Final Cost Form* to the LDSS or MCO that includes a description of the E-mod completed and the final cost.
 12. The LDSS or MCO will review the *Uniform Community First Choice Option (CFCO) Assistive Technology (AT), Environmental Modification (E-Mod), Vehicle Modification (V-Mod), and Community Transitional and Moving Services Final Cost Form* and notify the provider that they may submit a claim for payment.

Services and Supports Not Included Under Environmental Modification

CFCO will not fund services/items/devices that are not for an assessed need including, but not limited to the following:

- Adaptations or improvements to the home that are of general utility, and are not of direct medical or remedial benefit to the individual;
- Adaptations that exceed the necessity of the service (e.g. roll-in showers or accessible tubs will not be provided if a shower chair will do).
- Adaptations that add to the total square footage of the home.