



Department
of Health

NHTD & TBI Appendix K Implementation

August 2022

Agenda

- Across the board increase for NHTD & TBI waiver services
- Workforce Stability Stipend
- Training Stipend
- Process for Requesting Workforce Stability Stipend(s) and/or Training Stipend(s)
- HCSS Nursing Visit Rate, changed to hourly and included in TBI (new rate code)
- SDP Rate Increase to Accommodate Safe In-Person Services

August 2022

Across the Board Rate Increase

NYS recognizes the increase in provider costs for provision of Medicaid waiver services, and the compounding effect of the COVID-19 PHE on provider costs. The New York State budget for State Fiscal Year 2022-23 was adopted on April 9, 2022 effective April 1, 2022. The budget increases the Medicaid trend factor by 1% to recognize provider increases.

- 1% rate increase for all NHTD and TBI waiver services
- Will be an automatic process, retroactive amounts will show in upcoming provider Electronic Fund Transfers (EFTs)

Across the Board Rate Increase

Applicable Waiver Services:

- Service Coordination
- Community Integration Counseling (CIC)
- Congregate and Home Delivered Meals Services (NHTD only)
- Home and Community Support Services (HCSS)
- Home Visits by Medical Personnel (NHTD only)
- Independent Living Skills and Training Services (ILST)
- Nutritional Counseling/Educational Services (NHTD only)
- Peer Mentoring (NHTD only)
- Positive Behavioral Interventions and Support Services (ILST)
- Respiratory Therapy Services (NHTD only)
- Respite
- Structured Day Program Services (SDP)
- Substance Abuse Program Services (TBI only)
- Wellness Counseling Service (NHTD only)

August 2022

Workforce Stability Stipend

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Workforce Stability Stipend

Applies to direct service staff providing the following waiver services:

- CIC
- HCSS (Nurses and aides)
- ILST
- Peer Mentoring (NHTD only)
- PBIS
- Respite
- Service Coordination
- Structured Day Program
- Substance Abuse Program Services (TBI only)

Workforce Stability Stipend

- Stipend amounts:
 - \$2,500 for each direct service staff person hired on or after April 1, 2021 employed and providing direct services for 30 days or more throughout the PHE and/or Appendix K period.
 - \$3,000 for each direct service staff member hired prior to April 1, 2021, employed and providing direct services to waiver participants for 30 days or more during the period of the PHE and/or the Appendix K.
- Staff that qualify for either of the stipend categories above may also receive an additional \$500 if they are fully vaccinated ([CDC Fully Vaccinated](#)).
- Staff may only receive a stipend from one provider/employer.
- All funds must be disbursed directly to staff and cannot be used to cover administrative costs assumed by the provider.

Training Stipend

August 2022

Training Stipend

Providers may submit requests for a portion of training costs:

- Up to \$350 per trainee for each PCA direct care staff providing waiver services.
- \$100 for each staff person trained on NHTD and/or TBI waiver services and assigned a TBI and/or NHTD caseload.
 - \$100 for initial waiver staff training completed during the PHE
 - \$100 for any annual waiver service training completed during the PHE
- Staff must have been employed and trained during the PHE period beginning April 1, 2021 in order to qualify. A training certificate must be available upon request.

Process for Requesting Stipends

August 2022

Requesting Workforce Stability and/or Training Stipend(s)

Both are requested through the Workforce Stability & Training Stipend Request Form. Each stipend request will also require additional documentation. Requests may not include projected staff, only those currently or previously employed.

- A complete stipend request packet for the Workforce Stability Stipend must include:
 - A complete and signed Workforce Stability and Training Stipend Request Form
 - A completed Workforce Stability Stipend Attachment spreadsheet
 - One Workforce Stability Stipend Attachment spreadsheet must be completed for each waiver program under which you are requesting funds. I.E., one attachment for NHTD and one for TBI if your agency is approved for both. Staff members should not be duplicated across waiver programs.
 - A disbursement plan as outlined on the Workforce Stability and Training Stipend Request form.

Requesting Workforce Stability and/or Training Stipend(s)

- A complete stipend request packet for the Training Stipend must include:
 - A complete and signed Workforce Stability and Training Stipend Request Form
 - A completed Training Stipend Attachment spreadsheet
 - One Training Stipend Attachment spreadsheet must be completed for each waiver program under which you are requesting funds. I.E., one attachment for NHTD and one for TBI if your agency is approved for both. Staff members should not be duplicated across waiver programs.

Workforce Stability and Training Stipend Request Form – Workforce Stability Stipend

August 2022

Workforce Stability Stipend Attachment Spreadsheet

NHTD Workforce Stability Stipend Attachment

Agency Name:									
Provider ID:									
Agency Representative Name and Title:									
Agency Representative Contact Information (address, phone # and email):									
Waiver Program: NHTD (Note: only include NHTD staff on this spreadsheet, do not duplicate staff across waiver programs)									
RRDC Region:									
Date of Request:									
Total Stipend Amount Requested With This Submission (do not enter anything, this is auto-summed):								\$0.00	
Employee Information (Note: Employees listed must have provided at least 30 days of service during the Appendix K period, starting 3/1/2020)						Participant Information (List the associated information for 1 person on the employee's caseload)			
Employee Name	Date of Hire	Employment End Date (If currently employed, enter "N/A")	Waiver Service Provided	If Meets Vaccination Criteria, Enter \$500	Stipend Amount Sought (Auto-sum, do not enter any values here) (\$2,500 (hired on or after 4/1/21) or \$3,000 (hired before 4/1/21))	Participant Name	CIN	Waiver Program (Must be NHTD)	Total Stipend Requested for Employee (Auto-sum, do not enter any values here)
EXAMPLE LINE: Jane Doe	4/1/2020	N/A	HCSS	\$500.00	\$3,000	John Doe	AA12345B	NHTD	\$3,500
					\$0.00				\$0
					\$0.00				\$0
					\$0.00				\$0

Enter Agency Name:

August 2022

Workforce Stability Disbursement Plan

All requests must be accompanied by a plan detailing:

- How all funds will be distributed directly to staff
- Intended dates for disbursement

If the provider chooses to use an internal pool account, disbursement plan must also include:

- How the pool is to be maintained
- How the pool will be utilized
- How disbursement to employees will occur

Workforce Stability Disbursement Plan

- Unused pooled funds may be used to enhance payments to employees, but payments to employees cannot be less than the base stipend amount.
- If the provider is choosing to implement a “tiered payment plan” to staff, with all funds utilized solely for staff payments, this detailed “tiered payment plan” must be included in the disbursement plan.
- The provider will be responsible for quarterly reporting on any unused funds.

Workforce Stability and Training Stipend Request Form – Training Stipend

August 2022

Training Stipend Attachment Spreadsheet

NHTD Training Stipend Attachment

Agency Name:										
Provider ID:										
Agency Representative Name and Title:										
Agency Representative Contact Information (address, phone # and email):										
Waiver Program: NHTD <i>(Note: only include NHTD staff on this spreadsheet, do not duplicate staff across waiver programs)</i>										
RRDC Region:										
Date of Request:										
Total Stipend Amount Requested With This Submission <i>(do not enter anything, this is auto-</i>								\$0.00		
Employee Information <small>(Staff must have been employed during the PHE period beginning April 1, 2021. Training must be dated during the Appendix K period, starting 3/1/2020. Provider <u>must</u> have completed training certificate(s) available upon request.)</small>							Participant Information <small>(List the associated information for 1 person on employee's caseload)</small>			
Employee Name	Stipend Amount Sought for PCA/Alternate Competency Training (Max of \$350 reimburseme	Date of Completed PCA/Alternate Competency Training (If applicable)	Stipend Amount Sought for Initial Waiver Staff Training (Enter \$100 if seeking stipend)	Date of Intial Waiver Staff Training (If applicable)	Stipend Amount Sought for Annual Training (Enter \$100 for each annual training)	Date of Most Recent Annual Training (If applicabl e)	Participant Name	CIN	Waiver Program (Must be NHTD)	Total Stipend Requested for Employee (Auto-sum, do not enter any values here)
EXAMPLE LINE: Jane Doe	\$350.00	4/20/2021	\$100.00	4/21/2021	\$100.00	4/21/2022	John Doe	AA12345B	NHTD	\$550.00
										\$0.00
										\$0.00
										\$0.00
										\$0.00
										\$0.00
										\$0.00

Enter Agency Name:

Workforce Stability and Training Stipend Request Form – Attestation, Total Amount Requested & RRDC Approval

August 2022

Home and Community Support Services (HCSS) Nursing Visit Rate

August 2022

HCSS Nursing Visit Rate

- Effective April 1, 2021, until the expiration of the Appendix K period, the HCSS nursing visit rate for NHTD and TBI will be changed to a rate of \$61.80 *per hour*.
 - Note: the Appendix K expires 6 months following the end of the Federal Public Health Emergency (PHE).

HCSS Nursing Visit Rate

- For NHTD, providers will utilize the same rate code they did previously: 9799.
 - Previous claims submitted as per visit will need to be adjusted from one (1) unit to the actual number of hours/units that the nursing visit took place.
- For TBI, providers will bill under the new rate code: 9884.
 - Previous claims submitted under HCSS rate codes 9879 – 9883 will need to be adjusted to deduct the number of units and then re-bill under the new rate code the number of hours/units that the nursing visit took place.

Structured Day Program (SDP) Rate Increase for In-Person Services During the PHE

August 2022

SDP Rate Increase

- Effective April 1, 2021, until the expiration of the Appendix K, NHTD and TBI SDP providers will receive a supplemental rate increase of \$10/hr for any in-person services provided from April 1, 2021, forward until the end of the Appendix K period.
 - Note: the Appendix K will expire 6 months following the end of the Federal Public Health Emergency (PHE).

SDP Rate Increase

- NHTD providers will utilize the following new rate code: 9749
- TBI providers will utilize the following new rate code: 9885
- Previous claims submitted under NHTD rate code 9777 and TBI rate code 9870 will need to be adjusted down to the number of hours/units that SDP was only provided via alternative means. The new rate codes will then be billed for the number of hours/units that SDP was provided face-to-face. Records detailing face to face service provision must be available upon audit.

Next Steps

- Providers will receive a notice detailing when the new HCSS nursing visit and SDP in-person visit rates are available.
- Providers should start completing applicable Workforce Stability and Training Stipend requests and submitting those to their RRDCs.
 - Once RRDCs have approved stipend request packets, they will send them up to NYSDOH for final review and approval.
 - Payments will be made on a quarterly basis via lump sum.

Questions?

August 2022

Please make sure to refer all questions to your RRDC first.

NYSDOH Contact:

waivertransition@health.ny.gov