

7598

2015-2016 Regular Sessions

I N A S S E M B L Y

May 20, 2015

Introduced by M. of A. GOTTFRIED -- read once and referred to the
Committee on Health

AN ACT to amend the public health law, in relation to the transition of
traumatic brain injury waiver and nursing home transition and diver-
sion waiver program services to Medicaid managed care programs

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEM-
BLY, DO ENACT AS FOLLOWS:

1 Section 1. Paragraph (b) of subdivision 7 of section 4403-f of the
2 public health law is amended by adding a new subparagraph (v-a) to read
3 as follows:

4 (V-A) NOTWITHSTANDING SUBPARAGRAPH (V) OF THIS PARAGRAPH, NO PERSON
5 RECEIVING SERVICES UNDER THE TRAUMATIC BRAIN INJURY WAIVER OR NURSING
6 HOME TRANSITION AND DIVERSION WAIVER MAY BE REQUIRED TO ENROLL IN A
7 MANAGED CARE OR MANAGED LONG TERM CARE PROGRAM BEFORE APRIL FIRST, TWO
8 THOUSAND SEVENTEEN; AND PROVIDED FURTHER THAT THE COMMISSIONER SHALL
9 CONVENE A WORK GROUP TO DEVELOP RECOMMENDATIONS ON TRANSITION OF THESE
10 WAIVER SERVICES TO MANAGED CARE. MEMBERSHIP OF THE WORK GROUP SHALL
11 INCLUDE PAYERS, CONSUMER REPRESENTATIVES AND PROVIDERS OF SUCH SERVICES,
12 AND THE CHAIRS OF THE ASSEMBLY AND SENATE HEALTH COMMITTEES. IN DEVELOP-
13 ING RECOMMENDATIONS ON TRANSITIONING THESE POPULATIONS TO A MANAGED CARE
14 ENVIRONMENT, THE WORK GROUP SHALL CONSIDER:

15 (1) TRACKING OF LEGACY WAIVER POPULATIONS TO ENSURE CONTINUED ACCESS
16 TO COMMUNITY-BASED SERVICES AND IDENTIFY AGGREGATE COSTS OF CARE;

17 (2) ONGOING TRACKING AND IDENTIFICATION OF PEOPLE WITH A DIAGNOSIS OF
18 A BRAIN INJURY AND SIMILAR POPULATIONS TO ENSURE THAT NECESSARY COMMUNI-
19 TY-BASED SERVICES WILL BE PROVIDED TO THESE POPULATIONS AND IDENTIFY
20 AGGREGATE COSTS OF CARE;

21 (3) HOW CONTINUITY OF SERVICES WILL BE ACCOMPLISHED BEYOND AN INITIAL
22 TRANSITION PERIOD OF NINETY DAYS;

23 (4) ENSURING ACCESS TO A QUALIFIED WORKFORCE, EXPERIENCED WORKING WITH
24 THESE POPULATIONS;

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets
[] is old law to be omitted.

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1 (5) DEVELOPMENT OF ACTUARIALY SOUND CAPITATION REFLECTING THE HIGH
2 ACUITY OF THESE POPULATIONS; AND

3 (6) DEVELOPMENT OF ANNUAL REPORTING BY THE COMMISSIONER ON, AMONG
4 OTHER THINGS, AGGREGATE COSTS OF CARE FOR THESE POPULATIONS AND WHETHER
5 THE TRANSITION OF THESE POPULATIONS IN MANAGED CARE HAS INCREASED UTILI-
6 ZATION OF NURSING HOME OR OTHER INSTITUTIONALIZED CARE.

7 THE RECOMMENDATIONS OF SUCH WORK GROUP SHALL BE DUE TO THE COMMISSION-
8 ER AND THE LEGISLATURE ON OR BEFORE DECEMBER THIRTY-FIRST, TWO THOUSAND
9 SIXTEEN. TO THE EXTENT THE DEPARTMENT'S FINAL IMPLEMENTATION PLAN DOES
10 NOT REFLECT ONE OR MORE RECOMMENDATIONS OF THE WORK GROUP, THE COMMIS-
11 SIONER SHALL PROVIDE A WRITTEN EXPLANATION FOR SUCH OMISSION OR VARI-
12 ATION.

13 S 2. This act shall take effect immediately; provided however, that
14 the amendments to paragraph (b) of subdivision 7 of section 4403-f of
15 the public health law made by section one of this act shall not affect
16 the repeal of such section and shall be deemed repealed therewith.