



STATE OF NEW YORK DEPARTMENT OF HEALTH

Corning Tower The Governor Nelson A. Rockefeller Empire State Plaza Albany, New York 12237

Antonia C. Novello, M.D., M.P.H.
Commissioner

Dennis P. Whalen
Executive Deputy Commissioner

ADMINISTRATIVE DIRECTIVE

TRANSMITTAL: 00 OMM/ADM-4

TO: **Commissioners of
Social Services**

**Office of Medicaid Management
Department of Health**

DATE: May 22, 2000

SUBJECT: Care At Home Medicaid Waiver Home Adaptations and Vehicle Modifications

**SUGGESTED
DISTRIBUTION:**

Director of Medicaid
Director of Administrative Services/Accounting
Supervisors
Care At Home Coordinators
Staff Development Coordinators

**CONTACT
PERSON:**

Ronita Heller at (518)473-5642 (RSH01)

ATTACHMENTS:

Attachment A - Guidelines for Evaluation of Home Adaptations and Vehicle Modifications
Attachment B - Care At Home-Home Adaptation and Vehicle Modification Form (Revised 1/99)
Attachment C - Provider Agreement and Statement of Reassignment
Attachment D - Parent Agreement

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
86 ADM-4 90 LCM-57 94 LCM-97 96 LCM-73	93 ADM-18		SSL 366.6	Fiscal Ref. Manual Vol. 2, Chapter 3	

I. PURPOSE

The purpose of this Administrative Directive (ADM) is to update the policies and procedures set forth in 93ADM-18 regarding the approval and payment under Medicaid of home adaptations and vehicle modifications for the Care At Home (CAH) I and II Medicaid waiver programs. This ADM supersedes 93ADM-18. A separate letter will be sent to each approved Care At Home case management agency providing services to children in your county to insure familiarity with the procedures set forth in this directive.

II. BACKGROUND

The CAH Medicaid waivers permit certain children who are physically disabled to be cared for at home. Sometimes modifications are necessary to assure the child's safety, to permit the child to move within the home, or to provide the child access between the home and community. A child must be enrolled in the CAH Program in order to receive home adaptation and vehicle modification services.

Chapter 170 of the Laws of 1989 amended Section 366.6 of the Social Services Law to permit additional services, including home adaptations and vehicle modifications, to be provided to CAH I and II Medicaid waiver participants.

III. PROGRAM IMPLICATIONS

The Local Department of Social Services (LDSS) is responsible for the local share of all Medicaid costs for approved home adaptations and vehicle modifications for CAH I and II recipients. To ensure that all third party reimbursement is maximized, the LDSS CAH Coordinator must interact with the district's third party resources staff.

Examples of home adaptation and vehicle modification services that may be covered by Medicaid include, but are not limited to:

- o Purchase of backup generator for medical equipment.
 - o Installation of wheelchair ramps.
 - o Widening of doorways.
 - o Modifications to permit independent use of a bathroom or modifications to facilitate bathroom use with assistance.
 - o Stairglides.
 - o Modification to a parent-owned vehicle to accommodate the CAH child.
- Note:** The structure of the vehicle must be able to support the requested modification.

Home adaptation and vehicle modification services are NOT to be used to:

- o Build any portion of new housing construction.
- o Build room extensions or build additional rooms or spaces beyond the existing structure of a dwelling.

- o Renovate or build rooms for the use of physical therapy equipment.
- o Purchase equipment such as any therapeutic equipment or supplies, exercise equipment, televisions, video cassette recorders, personal computers, etc.
- o Purchase swimming pools, hot tubs, whirlpools, steam baths or saunas for either indoor or outdoor use.
- o Pave driveways
- o Purchase central air conditioning, freestanding air conditioners, or humidifiers.
- o Purchase and install elevators.
- o Purchase items that primarily benefit members of the household other than the CAH participant.
- o Purchase service or maintenance contracts.

The New York State Department of Health (NYS DOH) will NOT provide reimbursement for any adaptation or modification that has not followed the process outlined in this ADM or which commenced prior to receiving approval from the LDSS and the NYS DOH.

Prior to the request for approval for a home adaptation, confirmation that the house is intended to be the child's long-term residence should be obtained. If the family is intending to purchase a new home, and anticipates Medicaid funding for adaptations, the family must consult with the LDSS about any anticipated adaptation that might be required, immediately or in the future, PRIOR to closing on the property. This will avoid families going to contract on homes that are too expensive to adapt or are not suitable for adaptations. When looking for a new home, it is the family's responsibility to take the child's needs into account and choose a home that requires the least amount of modification. Whenever possible the child should be placed on the first floor with access to a bathroom and an exit. In cases of new construction, or where existing structures are gutted, adaptations may include the installation of ramps and grab bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems which are necessary to accommodate the medical equipment and supplies essential to the welfare of the child. Excluded are those adaptations or improvements to the home which are of general utility, and are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc. Adaptations that add to the total square footage of the home are also excluded. Any home adaptations must be approved by the county in which the home to be adapted is located.

Items purchased become the property of the homeowner and maintenance and repairs are the responsibility of the homeowner. Modifications made to vehicles become the responsibility of the owner to maintain and repair.

Home adaptation expenses should be based on contractor grade materials in all instances. Medicaid will not pay for add-ons or upgrades. Medicaid will only pay for work that is necessary to reasonably accommodate the medical needs of the recipient and to finish the alterations (e.g., molding, trim, primer, and finish coat of paint). When Medicaid pays for an item, Medicaid is considered payment in full. Additional items beyond those deemed necessary by the LDSS and NYS DOH are the responsibility of the family.

Home adaptations to accommodate the CAH child shall only be approved for the child's primary residence. Vehicle modifications to accommodate the CAH child shall only be approved for one parent-owned vehicle.

The Medicaid program will pay for the costs of the minimum adaptation necessary for the child in the CAH I or II Program to move within the home, to have access to and from the home and community, or to insure that movement can occur safely. The cost of any home adaptations must fit within the child's annual CAH budget but cannot exceed \$20,000 per child for the duration that the child is enrolled in the CAH Program, unless there is a significant change in the child's needs or capabilities. The cost of a vehicle modification must fit within the child's budget, but cannot exceed \$14,000 per child for the duration that the child is enrolled in the CAH Program, unless there is a significant change in the child's needs or capabilities.

IV. REQUIRED ACTION

The LDSS CAH Coordinator has the following responsibilities in providing home adaptation and vehicle modification services for CAH I and II participants. These activities may be delegated to the child's case manager. The decision to approve or deny a home adaptation or vehicle modification, however, is a joint process between the NYS DOH and the LDSS. The components of this process are as follows:

1. Physician Statement

Obtain a written statement from the physician that the home adaptation or vehicle modification is medically necessary. The LDSS must retain a copy of the physician's written statement for its files.

2. Plan of Care

Include the need for the home adaptation or vehicle modification in the child's plan of care.

3. Permission of Building Owner

Obtain written permission of the building owner when the adaptation is planned for rental property. The LDSS must retain a copy of the written permission in its files.

4. Evaluation

a. A mandatory written evaluation is necessary to determine the need for the requested home adaptation or vehicle modification, the safety of the proposed home adaptation or vehicle modification, its expected benefit to the child, and the most cost effective approach in fulfilling the need. It is important to remember that some homes and vehicles are not suitable for certain adaptations, e.g. not enough property to build a wheelchair ramp, the vehicle may not be structurally

sound to withstand installation and operation of the modification. The evaluation must, therefore, confirm that the home and/or vehicle can accommodate the modification. The evaluation must explain what alternatives were considered and why these were not chosen. When arranging for the evaluation, negotiations must also include a post evaluation. The evaluation is mandatory; it will assist in making sure that Medicaid dollars are spent in the most beneficial and cost effective manner. The home adaptation evaluation should be performed by a rehabilitative evaluation agency, such as United Cerebral Palsy or Independent Living Centers, or it may be performed by an independent building contractor. The CAH Program will pay for the cost of the required evaluation. The cost of the evaluation should be negotiated between the LDSS and the evaluating agency or contractor. The cost should be claimed on Schedule E (DSS-157). (See Attachment A for Guidelines for Evaluations of Home Adaptations and Vehicle Modifications.)

- b. In regard to vehicle modifications, families are expected to assume the cost of the basic vehicle and equipment available from the dealer through factory installation. Families should contact the vehicle manufacturer and/or dealer for information on the potential for rebates on factory installed adaptive equipment and warranty information on installed adaptive equipment. The family must assume the cost of accessories and equipment readily available from the dealer through factory installation, i.e. air conditioning, sound systems.

Note: Families buying a vehicle should look for a vehicle that is suitable for modification. When the family expresses its intent to purchase a vehicle, the LDSS and/or Case Manager should refer the family to an evaluator to determine the most appropriate vehicle to meet the child's needs. The vehicle should not be purchased prior to the evaluation.

Evaluations for vehicle modifications must be completed by an evaluator approved by the office of Vocational and Educational Services for Individuals with Disabilities (VESID) to provide vehicle modification recommendations. The evaluation must specify the most cost effective and least complicated vehicle modification that insures safe transportation, and exit from and entrance into the vehicle for the CAH child. The evaluation must then be submitted to the LDSS. The LDSS must share the evaluation with the NYS DOH either verbally or in writing prior to proceeding with the bidding process. The request should then proceed through the approval process as outlined in this ADM. Once approval is obtained, the family may purchase the vehicle. A bill of sale must then be submitted to the LDSS. The vehicle should not be purchased prior to approval of the modification request.

5. Used Vehicles

The Care at Home Program may cover the modification of used vehicles or the cost of used modifications in a used vehicle only if the vehicle meets the following additional criteria:

- o The vehicle must pass New York State inspection.
- o The vehicle must be structurally sound and not in need of mechanical repairs.
- o The vehicle must not have any rust or deficiencies in the areas to be modified or in the areas already modified.
- o The vehicle must be less than five years old or register less than 50,000 miles.
- o The vehicle must be covered by insurance.

6. Used Adaptive Equipment

Used adaptive equipment and modification devices are sometimes available for purchase. To ensure the greatest safety and performance, the NYS DOH will only approve used equipment purchased from businesses dealing in the sale of vehicles or adaptive equipment. The equipment must be able to safely meet the child's needs as determined by an evaluation completed by a VESID-approved evaluator, and be in good working condition as determined by the vehicle modifier. We will not contribute to the purchase of equipment previously purchased by the NYS DOH.

7. Assessing the Value of Previously Modified Vehicles

To assess the value of a used modification:

- o Determine the value of the used vehicle from the Blue Book. Subtract this figure from the asking price of the previously modified vehicle. The difference will be the asking price of the modification.
- o To determine the current value of the modification, ascertain the original cost of the modification from the dealer. Adaptive equipment depreciates 10% each year. Calculate the current value of the modification based on the 10% depreciation. This figure is the current value of the modification. This is the amount that Medicaid may cover provided it fits within the child's budget and does not exceed the vehicle modification limits specified in this ADM.

8. Consultation with Family and NYS DOH

Evaluations must be submitted to the LDSS for review and approval before bids are obtained. The LDSS should forward a copy of the evaluation to the NYS DOH and then consult with the NYS DOH before continuing with the bidding process.

After the evaluation is completed and approved, the family should be informed by the LDSS and/or the case manager of the following: the recommended plan for the adaptation, and their responsibility regarding maintenance and repair of the adaptations and equipment. The family is responsible for all repairs and maintenance of the approved equipment. The family must sign the Parent Agreement indicating that they understand their responsibilities. (See Attachment D.)

9. Bids

The bids should be based on the specifications that are delineated in the evaluation. If the cost of the project is under \$1,000, the LDSS may select a contractor (taking steps necessary to ensure reasonable pricing) and obtain a written bid from the selected contractor, which includes all terms and conditions of the project.

If the cost of the project is \$1,000 or above, a minimum of three written bids must be obtained. The LDSS may waive this requirement at its discretion, e.g., geographic limitations, documenting the reasons in the case record.

Bids over \$10,000 require architectural or engineering certification that ensures the adaptation or construction meets the NYS Fire and Building Codes.

Medicaid costs for home adaptations cannot exceed \$20,000 per child for the duration that the child is enrolled in the CAH Program, unless there is a significant change in the child's needs or capabilities. For a vehicle modification the total cost cannot exceed \$14,000 per child for the duration that the child is enrolled in the CAH Program, unless there is a significant change in the child's needs or capabilities.

a. Home Adaptations

For home adaptations the contractor must adhere to the following requirements when preparing a bid: base the bid on contractor grade materials; stipulate that all work will comply with applicable building and zoning codes; obtain the local municipality's permit to perform the adaptation; provide verification that the work has been inspected by the local municipal branch of government that issued the initial permit before final payment is made; submit verification that appropriate and adequate insurance coverage is maintained. All estimates should identify the costs of each component; i.e. each part of the proposed adaptation must be listed separately. For example, if the requested adaptation calls for modifications to the bathroom and construction of an exterior platform and ramp, the bids should list separately the costs involved with modifying the bathroom from the costs associated with constructing the platform and ramp.

b. Vehicle Modifications

Modifications may only be done on vehicles that pass NYS inspection. In the case of used vehicles, the cost of the proposed modifications must not exceed the Blue Book or current market value of the vehicle at the time bids are requested. If a new vehicle has been purchased, a bill of sale should be included with the bids.

10. CAH Child Budget Requirement

To ascertain whether the cost of the home adaptation or vehicle modification can be accommodated by the child's CAH budget, the case manager should divide the total cost of the adaptation by 12, add the amount to the CAH child's monthly budget and demonstrate that the total amount is within the allowable CAH level cap.

When a family requests more than one adaptation, the LDSS can prioritize which one will be completed first, completing one adaptation and holding over the other for the following year. The family, together with the LDSS and case manager, will decide which adaptation is most important to the current needs of the child. It is imperative that any adaptation fit into the child's monthly budget cap. The cost of the evaluation should be included on the budget with the cost of the adaptation. As stated previously, Medicaid costs for home adaptations cannot exceed \$20,000 per child for the duration that the child is enrolled in the CAH Program, unless there is a significant change in the child's needs or capabilities. For a vehicle modification the total cost cannot exceed \$14,000 per child for the duration that the child is enrolled in the CAH Program, unless there is a significant change in the child's needs or capabilities.

An adaptation cannot be approved for a child ready to age out of the program if the cost of the home adaptation or vehicle modification (divided by the number of months of eligibility remaining) is over the allowable cap. For example, a CAH I child, age 17 years and 6 months, has a current monthly budget of \$7,500. The requested adaptation is estimated at \$12,000. Dividing the cost of the adaptation (\$12,000) by the number of months of remaining eligibility for the CAH Program (6 months), the monthly cost of the adaptation would be \$2,000. Adding the monthly cost of the adaptation to the child's current budget (\$2,000 + \$7,500) the result is \$9,500 which exceeds the \$9,000 monthly expenditure cap for a child in the CAH I Program. The adaptation would be denied.

11. Reviewing the Bids and Selecting a Contractor

- a. Bids under \$10,000 require the approval of the NYS DOH.
- b. Bids of \$10,000 or more require the approval of the NYS DOH AND must also follow standard contract processing procedures. These contracts are subject to the statutory limitation of \$10,000 beyond which advertisement for bids by the county is required. Any local laws and procurement policies and procedures must also be complied with. These contracts may be fully executed only upon approval by the Office of the State Comptroller.

12. Claiming Costs by LDSS

The LDSS claims these costs on the standard Schedule E for reimbursement from the State in the following manner: expenditures for participants in the CAH Program are claimed on line 20 of the Schedule E. These expenditures should be authorized in WMS with a pay type of P9 and special claiming categories of V for federally participating (column 7, All Other), R for federally non-participating (column 11, All Other), and N for Non-Reimbursable (column 12).

13. Home Adaptation Form

The Care At Home Coordinator must complete the CAH Home Adaptation and Vehicle Modification Form (Rev. 1/99) for any home adaptation or vehicle modification request. (See Attachment B.) This form replaces the DSS-4400. This form should be duplicated for use by the LDSS. The form must include the rationale as to why the bid was selected, e.g. cost or prior experience with the contractor in performing the particular adaptation, or the LDSS' reason for denial of the request. The form must then be submitted to the NYS DOH for its determination as to whether the request is approved or denied. The LDSS should send the CAH Home Adaptation and Vehicle Modification Form to:

Care At Home Program
Office of Medicaid Management
New York State Department of Health
One Commerce Plaza
Suite 727
Albany, New York 12260-118

14. Review of Requests for Home Adaptations and Vehicle Modifications

NYS DOH staff will review the request and notify the LDSS of the decision. If the request is approved by NYS DOH, the CAH Coordinator notifies the family and case manager of the Department's approval. Note: Bids over \$10,000 must also follow standard contract processing procedures and be approved by the Office of the State Comptroller prior to the start of the project.

If the request is denied by the NYS DOH, the CAH Coordinator will notify the family and case manager of the denial using the LDSS fair hearing process as described below.

Upon receipt of the required approvals, work on the home adaptation or vehicle modification can commence.

15. Fair Hearing Rights

If the home adaptation or vehicle modification is denied in whole or in part by the LDSS and the NYS DOH, the CAH Coordinator will notify the family of the denial or partial denial of the modification request by:

- a. adapting the LDSS-3622 (Notice of Decision On Your Medical Assistance Application) by writing in the home adaptation denial with the fair hearing notice on the back, or
- b. writing a home adaptation denial letter and attaching the back of the LDSS-3622 form which explains the right to a fair hearing.

16. Provider Agreement

As instructed in 94 LCM-97, a Provider Agreement and Statement of Reassignment between the LDSS and the provider of home adaptation or vehicle modification services must be completed and attached to each home adaptation or vehicle modification request. The Provider Agreement and Statement of Reassignment can be found in Attachment C. The contractor needs only to have one agreement on file with each LDSS. Photocopies of the original agreement may be attached to the home adaptation or vehicle modification request submitted to the NYS DOH.

17. Post Evaluation

a. Home adaptations

When the adaptation is completed, the original evaluating agency must complete an assessment of the finished modification to ensure that it has been satisfactorily completed and that it meets safety and code standards, prior to payment. The LDSS should maintain this document in the child's case file.

b. Vehicle modifications

Adaptations made to a vehicle must be completed by a VESID-approved dealer. The LDSS should assure that the vehicle is insured and passes NYS inspection standards following the modification, prior to payment for the service.

Upon completion of the inspection, the dealer should sign a statement indicating that the vehicle was modified appropriately and that a family member has been instructed in the correct use of the equipment. The family member should sign a statement to the effect that warranty information has been provided and she/he will assume responsibility for maintenance and repair of this equipment. (See Attachment D.)

18. Statement of Final Cost

The following pertains to both home adaptations and vehicle modifications: upon final payment of the provider by the LDSS, the LDSS should complete page 3 of the CAH HOME ADAPTATION AND VEHICLE MODIFICATION FORM indicating the final cost of the project upon its completion, and send a copy to the NYS DOH Care at Home Program. Payment to the provider should be in accordance with local district procedures. For example, a LDSS may choose to pay a provider 1/3 at the start of the project, 1/3 at midpoint and the remainder at completion, or ½ at the start of the project and the remainder when the project is completed. A LDSS may specify that payment at the start of the project will cover cost of materials and that the cost of the labor will be reimbursed at the conclusion of the project.

V. ADDITIONAL INFORMATION

REPAIRS AND MAINTENANCE

Medicaid will NOT pay for repairs or maintenance. The family must sign the agreement form stating that they understand their responsibilities with respect to repairs and maintenance of the adaptation (See Attachment D). The family should be informed about the maintenance/repair requirements of different alternatives since it might be an important cost factor in the choice they make regarding the adaptation. It is extremely important for the case manager to discuss with the parents their role in maintaining the equipment by making sure it is only used by or for the CAH child and not by or for other members of the family. Families must assure proper insurance coverage on their property and/or modified vehicle.

The LDSS and NYS DOH will NOT be responsible for any vehicle repair or maintenance.

Returning property to its original state is NOT the responsibility of the LDSS or the NYS DOH.

VI. SYSTEMS IMPLICATIONS

None

VII. EFFECTIVE DATE

The provisions of this Administrative Directive are effective on the date of issuance. If you have any questions, please contact Care At Home staff at (518) 473-5642.

Kathryn Kuhmerker, Deputy Commissioner
Office of Medicaid Management

Attachment A

Guidelines for Evaluation of Home Adaptations and Vehicle Modifications

BACKGROUND

The Medicaid program will pay for the costs of the minimum adaptation necessary for the child in the Care at Home I or II Program to move within the home, to have access to and from the home and community, or to insure that movement can occur safely. The cost of the evaluation together with the cost of any home adaptation or vehicle modification must fit within the child's Care at Home budget.

Purpose of Evaluation

The evaluation should determine the need for the requested home adaptation or vehicle modification, the safety of the proposed home adaptation or vehicle modification, its expected benefit to the child, and the most cost effective approach in fulfilling the need. It is important to remember that some homes and vehicles are not suitable for adaptations, e.g. not enough property to build a wheelchair ramp, the vehicle may not be structurally sound to withstand installation and operation of the modification. The evaluation must, therefore, confirm that the home and/or vehicle can accommodate the modification. The evaluation must explain what alternatives were considered and why these were not chosen. When arranging for the evaluation, negotiations must also include a post evaluation. The evaluation is mandatory; it will assist in making sure that Medicaid dollars are spent in the most beneficial and cost effective manner, creating optimal benefit for the child. The evaluation should be performed by a rehabilitative evaluation agency, such as United Cerebral Palsy or Independent Living Centers, or it may be performed by an independent building contractor. The Care at Home Program will pay for the cost of the required evaluation. The cost of the evaluation should be negotiated between the Local Department of Social Services (LDSS) and the evaluating agency or contractor.

Regarding vehicle modifications, families are expected to assume the cost of the basic vehicle and equipment available from the dealer through factory installation. Evaluations for vehicle modifications must be completed by an evaluator approved by the office of Vocational and Educational Services for Individuals with Disabilities (VESID) to provide vehicle modification recommendations. The evaluation must specify the most cost effective and least complicated vehicle modification that insures safe transportation and exit from and entrance into the vehicle for the Care at Home child.

I. Qualifications of Evaluator

- A. Must be familiar with the home adaptation and vehicle modification policies permitted in the NYS DOH Care At Home Program as described in this ADM; the LDSS should supply the evaluator with a copy of this ADM prior to initiation of the evaluation.
- B. Must be able to communicate well with all parties involved with the development of home adaptations and vehicle modifications, e.g. consumers, contractors, and local government officials.
- C. Must be able to clearly describe in writing, and by design, the proposed home adaptation and vehicle modification.
- D. Must know and be able to apply the New York State Building Code, Current Accessibility Standards, and the Federal Accessibility Guidelines found in the Fair Housing Amendment Act.
- E. Must have knowledge of assistive technology and specific adaptive equipment appropriate for the child's needs.
- F. Must have skill in design/drafting in order to clearly describe the proposed modification.
- G. Must be able to complete all components of an On-Site Evaluation as described in Part II below.

II. Components of On-Site Evaluation

- A. Reimbursement for the evaluation must be negotiated between the evaluator and LDSS.
- B. Complete identifying information regarding the child (name, address, etc.) must be provided.
- C. The specified home adaptation and vehicle modification requested and who requested the evaluation must be identified.
- D. The needs of the child and the purpose of the proposed adaptation should be discussed.
- E. The home adaptation and vehicle modification proposal must be in accordance with the requirements of the NYS DOH Care At Home Program. The evaluator may need to consult an engineer to determine if the proposed adaptation to the home is within the load limit of the structure. The Medicaid Program does not reimburse the cost of the consultation. The evaluator's fee should include the cost of any consultations.
- F. Describe, in detail, the recommended modification. Include drawing plans and written specifications. All components of the adaptation must be identified. Explain what alternatives were considered and why these were not chosen.
Note: Medicaid will pay for the minimum adaptation necessary for the child to move within the home, to have access to and from the home and community, or to insure that movement can occur safely. The cost of all adaptations must fit within the child's Care At Home budget.

- G. When an approved home adaptation or vehicle modification is completed, a post evaluation must be conducted to ensure that the job was done in accordance with the specifications, and that the adaptation meets the building and fire codes of the local municipality. If the home adaptation or vehicle modification is approved, these recommendations will be used in preparation for the bidding of the home adaptation or vehicle modification.
- H. The completed evaluations must be submitted to the LDSS Care At Home Coordinator for review and approval. The LDSS should submit this evaluation to the NYS DOH for their approval before beginning the bidding process. The post evaluation must be forwarded to the NYS DOH on completion of the project.

III. Contractor performing any adaptation for a child in the Care At Home Program is required to:

- A. be bonded;
- B. maintain adequate and appropriate insurance;
- C. obtain any and all permits required by state and local municipality codes for the modification; and
- D. agree that before final payment is made the contractor must show that the local municipal branch of government that issued the initial permit has inspected the work.

IV. Components of contractors bid for an adaptation.

- A. include contractor grade materials;
- B. ensure that the construction meets all State and local municipality codes; and
- C. include an itemized price list of all adaptive equipment and labor costs.

Attachment B

CARE AT HOME - HOME ADAPTATION AND VEHICLE MODIFICATION FORM
New York State Department of Health

Care At Home Child's Name: _____ CIN#: _____

Date of Birth: _____ CAH Program: _____

Address: _____

County: _____

Telephone: _____

Has a physician's statement attesting that the home adaptation or vehicle modification is medically necessary been obtained? [] Yes [] No

NOTE: A copy of the physician's statement must be retained by the LDSS and submitted with this form.

Property to be adapted is: [] Owned [] Rented by the parents.

If the property is rented, identify the property owner:

Name: _____

Telephone: _____

Written Permission Received: [] Yes [] No

NOTE: If the property is rented, there must be written permission by the property owner to allow for renovations on the rental property. A copy of the written authorization must be retained by the LDSS and submitted with this form.

Evaluation: Was one completed? [] Yes [] No

When? _____

Who completed the evaluation? _____

Cost? _____

Description of Adaptation:

Amount of Selected Bid: \$ _____

Bids were obtained from the following contractors:

- | | | |
|----|-------|----------|
| 1. | _____ | \$ _____ |
| 2. | _____ | \$ _____ |
| 3. | _____ | \$ _____ |

Case Manager:

Has the estimated cost been divided into the next twelve months of the child's budget?

Is the child's total budget, including the cost of the home adaptation or vehicle modification, within the cap for the appropriate waiver?

Does the proposed home adaptation or vehicle modification fit the standards allowed by the NYS DOH on home adaptations and vehicle modifications?

_____	_____	_____
Signature of Case Manager	Agency	Date

LDSS Care At Home Coordinator:

Approved Denied

Reason:

_____	_____	_____
LDSS CAH Coordinator Signature	Title	Date

NYS Department of Health:

Approved Denied

Reason:

NYS Department of Health

Title

Date

Final Cost Upon Completion \$ _____

Signature of CAH Coordinator

Title

Date

Submit Form to: Care At Home Program
Office of Medicaid Management
NYS Department of Health
One Commerce Plaza
Suite #727
Albany, New York 12260-118

(1/99)

**PROVIDER AGREEMENT
BETWEEN THE NEW YORK STATE DEPARTMENT OF HEALTH
AND
STATEMENT OF REASSIGNMENT
BETWEEN THE LOCAL SOCIAL SERVICES DISTRICT
AND
PROVIDERS OF HOME ADAPTATION SERVICES**

The below-named Provider of home adaptation or vehicle modification services agrees to:

- (1) Bill only the local social services district for the home adaptation service(s) specified in the child's approved plan and provided according to this agreement and reassignment.
- (2) Accept as payment in full the agreed to amount for the home adaptation service(s).
- (3) Acknowledge that the local social services district can bill Medicaid on behalf of the home adaptation provider and retain any reimbursement obtained for these services.
- (4) Abide by all applicable local building and zoning codes, be bonded, and maintain appropriate and adequate insurance coverage.
- (5) Keep records necessary to disclose the extent of home adaptation services furnished to Medicaid recipients for a minimum of 6 years.
- (6) On request, furnish to the New York State Department of Health, or its designee, or the United States Department of Health and Human Services, any information maintained under paragraph (1) ownership and control information, and information regarding any Medicaid claims reassigned by the Provider to the local social services district.
- (7) Comply with federal and State statutory nondiscrimination provisions which prohibit discrimination on the basis of race, color, national origin, handicap, age, sex, religion and marital status.

Adaptation Provider

Authorized Signature DATE
Home Adaptation Provider

Address of Provider

Attachment D

**Care at Home I and II Home Adaptations and Vehicle Modifications
Parent Agreement**

I agree to the proposed home adaptation or vehicle modification plans provided to me in writing by the contractor and the Local Department of Social Services.

I have received and read a copy of the ADM on home adaptations and vehicle modifications.

I understand that I am responsible for the maintenance of and repairs to the home adaptation or vehicle modification.

I understand that I must retain a copy of any warranties and be familiar with their content.

I understand that I am responsible for upgrading my homeowner's and/or car owner's insurance to include the modification.

I understand that neither the New York State Department of Health nor the Local Department of Social Services is (financially) responsible for contractor failure.

I understand that it is my responsibility to resolve any problems that might arise directly with the contractor.

Signature of Parent

Date

Signature of Parent

Date

I agree that the work has been satisfactorily completed.

Signature of Homeowner

Date