



Alliance for the Betterment of
Citizens with Disabilities

Empowering People: Providers Shaping Policies

The Opportunity to Age in Place

Access to Habilitative Therapies Must be Ensured.

The overarching goal of the Medicaid Home and Community Based Services Waivers (HCBS) is to prevent unnecessary long-term care placement and premature death by providing direct services and supports to assist individuals in maintaining independence in the home and community while aging in place. As New Jersey continues to deal with an increasing population of aging adults, with and without disabilities, the HCBS waiver option will continue to be an important component of the state's service system.

Though their lifespan remains considerably shorter than members of the general population,¹ due to increased access to adequate healthcare and social support services, people with intellectual and developmental disabilities (IDD) are living longer than ever. As older adults, individuals with IDD are living with aging family members, living independently or in supported living/group home settings.

For aging adults enrolled in HCBS in New Jersey in addition to a certain degree of flexibility and flow between waivers, most services available under the Managed Long-Term Services and Supports (MLTSS) option mirror those provided to individuals with IDD under the Support Program (SP) and Community Care Program (CCP) options with few exceptions.

- Assisted Living and Nursing Home Care are included in MLTSS, but not in SP and CCP. In the event an adult enrolled in either SP or CCP needs and chooses to receive continuous nursing care and health care under medical supervision, they will be transitioned into MLTSS for nursing home or assisted living care. What's more, individuals with IDD living in an Assisted Living facility can choose to receive in-home supports from DDD providers.
- Private Duty Nursing (PDN) is included in MLTSS, but not in SP and CCP.² However, an adult in SP who meets the level of care need for a PDN will be transitioned to SPPDN or "SP Plus," to receive PDN from a Medicaid Managed Care Organization (MMCO) in combination with services and supports provided by the SP. Because it is deemed cost prohibitive and an inefficient use of state/federal resources, PDN cannot be combined

¹ Sullivan, WF. *Aging that Includes an Intellectual and Developmental Disability*. 2019. National Library of Medicine. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6501708/>

² Individuals enrolled in SP live in their own home, in CCP live in licensed homes.

with CCP. In the event the IDD group home cannot provide enough nursing and medical support and services, the CCP enrollee will be transitioned into MLTSS to receive nursing home care.

- Habilitative PT/OT/ST³ are services in both MLTSS and SP/CCP. MLTSS is administered by MMCOs and has extensive provider networks. SP and CCP are administered by three entities with segregated duties; Medicaid,⁴ DDD,⁵ and community agencies.⁶ Many adults with IDD have complex and multiple body system impairments and limitations. Access to physical, occupational and speech, language and hearing habilitative therapies as they age helps to attain, preserve, and improve skills and functioning for daily living and full community participation. Regrettably, because the SP/CCP reimbursement rates for these services which are set by Medicaid is not competitive with market rates, most agencies are unable to hire and create a network of these licensed professionals, effectively making the provision of habilitative services to the aging IDD population prohibitive. The upshot is that unlike MLTSS with its extensive provider networks, eligibility under SP and CCP does not ensure service.

DHS is to be commended for adopting a policy in the HCBS waiver that recognizes people with IDD as citizens, possessing an equal right to health care and related services and supports to enable them to age in place. Unfortunately, the rates in SP and CCP for habilitative therapies inadvertently perpetuate IDD's marginalization in direct contrast to the policy goal of DHS. It is therefore imperative that the rights of adults with IDD be extended to include actual access to habilitative PT/OT and ST in the community. This can be achieved through an increase to the current rates, totaling less than \$2.1 million in state dollars which will be matched by federal funds.⁷

April 26, 2024

³ Under MLTSS the individuals must have a TBI or ABI. Under CCP/SP the individual must meet the functional criteria of having a developmental disability.

⁴ Medicaid provides the fee for service claims payment.

⁵ DDD provides agency onboarding, regulatory oversight, and quality assurance.

⁶ Agencies employ and oversee appropriate staff.

⁷ ABCD FY2025 Budget Testimonial to the NJ Legislature. March 2024. <https://www.abcdnj.org/wp-content/uploads/2024/03/FY25-Budget-Speech-ABCD-News.pdf>