



Position Statement

ENHANCE ACCESS TO COST-SAVING HOME AND COMMUNITY-BASED SERVICES

Existing Connecticut home and community-based care options for older individuals and those with disabilities yield substantial cost savings in Medicaid expenditures on long-term care. Such supports also meaningfully fulfill consumers' preference to remain independent and to avoid premature institutionalization. Meeting these needs is, however, becoming increasingly challenging. Current reimbursement levels do not adequately compensate home and community-based providers. Further, providers do not have adequate workforce to meet care needs.



Elena Carabetta, Connecticut Home Care Program client, (left) with her daughter Mary Ridente (middle) and Rachel Stollman, Care Manager (right). "The Home Care Program provides very important services; without the help, I would not be able to do it," said Mary.

WHAT CAN LEGISLATORS AND EXECUTIVE BRANCH OFFICIALS DO?

Support

- continued funding for the Connecticut Home Care Program for Elders (CHCPE)
- renewal of funding for the Connecticut Home Care Program for Disabled Adults Pilot for individuals age 18-64
- workforce initiatives designed to train and support additional direct care staff
- an increase in the rates paid to providers

THE RESULT:

- Medicaid cost-savings and increased access to home care

CT ASSOCIATION OF AREA AGENCIES ON AGING

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SWCAA

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NCAAA

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SENIOR RESOURCES

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BACKGROUND - HOME AND COMMUNITY-BASED SERVICES

Diverse groups including the State of Connecticut Long-Term Care Planning Committee, the Nursing Home Transitions Work Group, and research institutions have emphasized the significant cost savings and psychosocial benefits of community-based care. Ongoing efforts to shift both state policy priority and expenditure of Medicaid dollars to care at home reflect these commitments. Ironically, however, promotion of these services to meet growing levels of need has strained the capacity of the home care industry in Connecticut.



Featured at the left is Connecticut Home Care Program for Disabled Adults client Brenda Curran. "My quality of life now is tremendous," said Brenda. "This is such a wonderful program; it has changed my life."

Enhance Access to Cost-Saving Services

- **Connecticut Home Care Program for Elders:**

In 2008, the Connecticut Home Care Program for Elders (CHCPE) has an active client population of over 15,000 individuals, more than 10,000 of whom received services through the Medicaid Waiver. In the CHCPE Annual Report to the Legislature for SFY 2007, the Department of Social Services documented **cost savings to the State in that program year of \$91,510,543**. Breaking out this figure, average monthly costs per client in 2007 were as follows: Waiver clients: \$1,572; State-funded clients: \$909. In 2007, this compared with an average monthly Medicaid nursing home cost of \$5,338. State support has ensured that eligible individuals can access the CHCPE on a rolling basis and that there is no wait list.

- **Connecticut Home Care Program for Disabled Adults:**

The Connecticut Home Care Program for Disabled (CHCPDA), a state-funded pilot program, provides services based upon the Connecticut Home Care Program model to up to 50 individuals, age 18-64, who have been diagnosed with a neurodegenerative disease. This is currently the only initiative in Connecticut that provides such services to individuals under the age of 65, and is a significant factor in preventing unnecessary institutionalization. Without renewal of funding, this program will not be able to continue.

- **Medicaid Income Eligibility:**

Income eligibility standards for community Medicaid in Connecticut should be increased to permit greater access to covered services and to enhance the state's ability to gain federal match dollars.



Promote Workforce Initiatives

The Connecticut Long-Term Care Needs Assessment illustrates that Connecticut is facing serious challenges in personing long-term care staffing needs. Providing care in the community is physically demanding, poorly compensated and presents few opportunities for advancement. Turnover rates among agencies are extremely high, compromising ability to maintain consistency in provision of care. Furthermore, few direct care workers receive fringe benefits such as health care coverage or paid sick and vacation leave. Finally, inadequate reimbursement rates have made it extremely difficult for agencies to maintain effective training and oversight programs in support of direct care staff. A global approach that takes into account the educational, training, wage, benefits and support needs of nurses, home health aides, homemakers and personal care assistants is needed.



Increase Reimbursement Rates to Providers



Data from professional groups including the Connecticut Home Care Association and the Connecticut Association for Adult Day Care indicate that Medicaid reimbursement rates to providers of home and community-based services have not kept pace with increased costs of doing business (e.g. staff recruitment and retention, insurance and quality assurance/regulatory compliance efforts). Inadequacy of reimbursement has directly contributed to closure of home care agencies and adult day

care centers over the last five years, just when expansion of the available service array is most needed by both older adults and individuals with disabilities. Further, reimbursement rates for self-directed options including personal care assistants do not adequately compensate for physically taxing, critically-needed work.