

Capacity Changes for ERC / ACCS Services

Prepared By Vermont Health Care Association, 2.17.23

Assistive Community Care Services (ACCS) and Enhanced Residential Care (ERC) services are provided in long term care facilities, specifically Residential Care Homes (RCH) and Assisted Living Residences (ALR). ACCS services are covered by Community Medicaid, and includes a basic bundle of services. ERC services are covered under the Choices for Care program, which pays for residents with needs that are considered nursing home level of care. Skilled Nursing Facilities (which are paid under a different system) serve the most complex patients, as well as providing short-term and rehabilitation services.

When tracking bed capacity in the ACCS and ERC programs, basic factors to consider include:

- **Payer** - not all facilities accept Medicaid dollars, and Medicare does not cover these long-term care services.
- **Acuity Levels** - ACCS covers a basic bundle of services, while ERC offers payment levels representing progressively more complex needs beyond the ACCS baseline.
- **Location of Providers** - Lack of local bed availability takes older Vermonters away from their community, social, and family structures.
- **Workforce** - By definition, these are all beds + services, including services that require a licensed nurse. Workforce shortages are our biggest challenge. The ERC / ACCS rate methodology incorporates the labor required to deliver services.

By reviewing RHC / AL licenses since 2020, we can see the impact of changing market dynamics. When comparing changes to the factors listed above, the data show:

- **An overall loss of beds for people who use Medicaid to support their care.** While total available beds remained roughly the same, we have lost 81 ERC / ACCS beds, replaced by private payer beds.
- **A loss in options for people at higher acuity levels of care.** Since 2020, 9 RCH providers have closed representing a loss of 155 beds in the ACCS/ERC programs. While four new RCH and one new ALR providers have added 75 ACCS beds back into the system, no ERC beds have been added to replace those lost for higher acuity needs.
- **A shift in the locations of available beds.** Of the new bed availability built in recent years, half were in Chittenden County and did not accept ERC / ACCS payment. The Northeast Kingdom region lost 45 available beds and Southern Vermont lost 51 beds, making these the areas with the greatest drop in availability.

The charts on the following page provide more details.

	Facilities			Beds			
Residential Care	98		ACCS	1805			
Assisted Living	18		ERC	1466			

Closures - 2020 to 2023

County	Facilities	Beds	ACCS / ERC	Changes in Beds #'s - By County		
Addison	1	9	Both	Addison	-9	
Bennington	1	16	Both	Bennington	-16	
Franklin	1	42	Both	Caledonia	5	
Orange	1	15	Both	Chittenden	84	
Orleans	1	8	ACCS	Franklin	-42	
Rutland	2	20	Both	Orange	-4	
Washington	1	10	ACCS	Orleans	-8	
Windham	1	35	Both	Rutland	-15	
Two floating license facilities converted to all Independent Living				Washington	44	
				Windham	-35	

Openings - 2020 to 2023

County	Facilities	Beds	ACCS / ERC
Caledonia	1	5	ACCS
Chittenden	2	84	--
Orange	1	11	ACCS
Rutland	1	5	ACCS
Washington	1	54	ACCS