

Vermont Association of Adult Day Services

c/o CarePartners Adult Day Center

34 Franklin Park West

St. Albans, VT 05478

802-527-0548

Memorandum

To: Health Care Oversight Committee
From: Sue Chase, Vermont Association of Adult Day Services
RE: CFC Feedback
Date: September 10, 2013

Recently, Jennifer Carbee requested feedback from Vermont's adult day providers on the following:

"...your (or your clients') experience with wait lists for home- and community-based services. How long do clients spend on them? What services are they able or unable to receive while waiting? What else would you like the Committee to know about wait lists or about Choices for Care generally?"

Moderate Needs Group (MNG) Wait List

Over the past eight years, most if not all adult day providers have had people on the MNG wait list at one time or another. Currently, seven adult days have 56 people on their MNG wait list. This number could even be higher because some centers do not even bother putting someone on their wait list when there is no hope that they will be able to serve them on MNG.

It is difficult to answer how long these 56 people will stay on the MNG wait list. When a center puts someone on their MNG wait list, they must wait for an existing participant to either move to the CFC high/highest need group or leave their program, due to death or going to a nursing home/assisted living. For example, last year an adult day believed that they would use up their allocation with the existing participants, but then five participants left MNG for some of the reasons described above. Now, the adult day was able to take people off their wait list. Often when you lose so many people off of MNG, the provider may not have a wait list for the remainder of the fiscal year. Other providers with an MNG wait list have no movement and must keep adding people to the wait list with little hope of getting off.

The range of time a person may be on the wait list could be a month to a year. In terms of what services a person on the wait list could receive, or not, varies depending on the situation. Some adult days may have a little extra MNG funds that they can use to serve someone for 1-2 days rather than the 3-5 days the individual may want to attend. If there are no MNG funds, the person could attend the adult day on a sliding fee scale basis. Some people on the MNG wait list do this, while others feel that they cannot afford the service even though it has been offered at a

reduced cost. The latter people receive no adult day services. Some of them may end up prematurely requiring nursing or assisted living care.

General Comments about MNG and CFC

The MNG program is very difficult to manage. Adult Days spend many hours trying to make sure they serve as many people as possible without going over their allocation. Vermont's 14 adult day providers receive approximately \$1.6 million dollars in MNG funds. That money is allocated to the 14 Adult Day programs by a formula developed by DAIL. Current allocations range from \$27,000 to \$266,000. The formula has not been changed in several years. DAIL has promised to work with the adult days to make revisions to the formula but that has not happened as of yet. The current MNG allocation formula is not working. Several adult days consistently have large waiting lists. While a redistribution of MNG funds last fiscal year helped, it occurred late in the fiscal year making the impact very limited.

This past legislative session the VAADS asked the legislature to increase the MNG allocation for four adult day programs that receive less than \$47,000 a year. This minimum allocation would have enabled those programs to serve at least two participants for a year on MNG. The cost to the state would have been \$37,500 GF. The legislature did ask DAIL to use \$18,000 of the reinvestment money toward this request. While this increase helps, the full \$37,000 would have really made a difference for these four providers. Currently, three of these providers have an MNG wait list. The fourth provider receives just over \$10,000 in MNG funds making it very challenging for them to put even one person on to MNG. Their allocation will allow them to serve only one person two days a week for a year. For many adult day participants this level of service will not meet their need for adult day services.

While transportation is covered for both the high and highest needs groups of CFC, it is not a covered service under MNG. Consequently, adult days must make sure their Elderly & Disabled (E&D) allocation can also cover transportation costs for non-Medicaid people who attend under the MNG program. To compound matters, some adult days have found it challenging to use their MNG allocation because they do not have access to sufficient E&D funds to cover transportation costs for people on the MNG program. Having transportation costs covered by MNG would help tremendously, but the overall funds need to be increased to cover this additional expense.

Reinvestment of CFC Savings

Recently, VAADS polled its members regarding the reinvestment of CFC savings and we would like to see an increase in MNG funds for adult day and an increase in Medicaid reimbursement rates. As stated before several adult days have MNG wait lists. Several providers who do not currently have a wait list could also use an increase in MNG funds. Their current allocations hinder their ability to put people on the MNG program. Over the past eight years, several times DAIL has added funds to the statewide MNG allocation. There has been no such increase since SFY 2009. VAADS believes it is time to add more funds to the MNG program.

Secondly, VAADS would like CFC savings to be used to increase the Medicaid reimbursement rate for all CFC programs and the Day Health Rehabilitation Services (DHRS) program. The current reimbursement rate of \$15.00 an hour does not cover the cost of adult day services. Adult Day Services provide some of the most cost-efficient, patient-centered, long-term care in

the State. RNs, LPNs, LNAs and other direct care workers provide a wide range of services to meet program participants' functional, personal and health care needs, including stimulating, therapeutic activities which help program participants remain healthy and engaged in their lives, as well as physical and other therapies, showers, monitoring of medications, diet and vital signs. By keeping a watchful eye on our participants, their families and caregivers can go to work and take care of their own daily needs. Raising our reimbursement rate to \$16.00 an hour will cost approximately \$164,835 in GF based on SFY 2012 data.

In closing, Vermont's adult day providers are pleased to be one of the services facilitating people's efforts to "age in place." We along with the AAAs and Home Health Agencies provide critical services helping some of Vermont's frailest people achieve this goal. Eight years ago Vermont did the right thing in creating the Choices for Care program. Together we have helped shift the balance. Please help make sure the long term care services that share in this goal have adequate funding. Thank you for this opportunity.