

Testimony for Health Care Oversight Committee
Choices for Care
Commissioner Wehry
Department of Disabilities, Aging and Independent Living
September 12, 2013

Choices for Care

- \$6.0M available in CFC reinvestment savings; Act 50 directs DAIL to present a reinvestment plan during BAA.
 - Work to date on the plan has included input from the DAIL Advisory Board, Home Health, AAAs, Adult Days, COVE and AARP. The DAIL Advisory Board has recommended that we prioritize
 - Caregiver supports
 - Identifying and filling gaps in service and transportation and meeting unmet needs, particularly in areas of mental health, dementia
 - One-time funding to address partners who have been hit hard with sequestration and funding cuts.
 - Other stakeholders (most notably COVE, AARP and Home Health) have focused on the need to address the moderate needs group (MNG) waiting list. The MNG is also a DAIL priority. DAIL
 - Convened an MNG work group to work with the AAAs to consider how to make funds and services more flexible and more accessible to seniors. We are pleased to add Home Health Agencies to the work group.
 - Engaged the services of our UMass evaluation team to help improve MNG flexibility, access and quality (See attached PowerPoint)
 - Meets regularly with both Home Health and the Adult Days to refine data collection, discuss rates and work on refinements to the allocation process;
 - Cautions the committee against overreliance on the waitlist as best measure of need or how to address it. High numbers may mean pre-enrollment; low numbers may indicate failure to identify need or insufficient funding. (See Supplemental sheets)
 - Act 50 sect. 308.1 also created the opportunity to present needs for accelerated reinvestment of CFC savings
 - DAIL received input from the Health Care Oversight Committee as well as from lobbyists, providers and other stakeholders suggesting that the current waitlist for services in the moderate needs group constitutes an urgent need for accelerated spending. In a written communication, the Joint Fiscal Committee advised DAIL that whereas the waitlist has been a chronic problem and that individuals by definition do not have high needs, they would not authorize accelerated reinvestment.
 - DAIL did request and receive spending authority in the amount of \$210,000 to address urgent senior food insecurity and nutrition needs. This amount offsets the difference between the FFY12 and FFY13 awards for congregate meals (Title IIIC1: \$113,668) and home delivered meals (Title IIIC2: \$56,135) and provides funding (40K) for targeted intervention(s) aimed at those at highest nutritional risk.
- Specifically, these funds will be used to
- Provide home delivered and congregate meals to at risk older adults; restore 35,000 supper meals; provide support to community meal providers to better meet specific dietary needs of at risk older adults; target nutrition interventions for older adults at highest nutrition and social risk who receive

home delivered meals. High risk older adults will receive referral, follow up, nutrition counseling and nutrition education.

Other CFC update

- Launched Adult Family Care, a new Home and Community Based Service option for Vermont's Long-Term Care Medicaid Choices for Care (CFC) Program. AFC homes are available to individuals in the Highest and High needs groups and provide 24 hour care and support, with a tier rate payment. (See Supplemental information or visit our website

(<http://www.ddas.vermont.gov/ddas-programs/programs-cfc/programs-cfc-addl-webpages/adult-family-care-homes>)