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## MEMORANDUM TO HOUSE HUMAN SERVICES COMMITTEE ON H.730

Rep. Ann Pugh, Chair House Committee on Human Services

## **Re: H.730, An act relating to Medicaid Rates for home-and community-based services and home-delivered meals as a reimbursable covered service**

Dear Rep. Pugh and Members of the Committee,

We are writing to follow up on the Committee deliberations on H.730. Thank you and the committee members for your generous attention to this bill and for receiving important testimony and other information relevant to the importance of its passage and the core policy considerations that are directed to assuring that individuals enrolled in the Choices for Care (CFC) Medicaid waiver receive the services they need and Vermont keeps its commitment to a balanced long term care system.

We appreciate the committee's decision to prioritize the home delivered meals provisions of H.730 for reporting out by the cross over date. You have heard compelling testimony about the importance of adequate nutrition to the ability of nursing home eligible Vermonters to remain in their homes and communities. We will not repeat them here, except to say that the experience of the Area Agencies on Aging has been a powerful reminder of how this works on the ground. We are pleased that the Department of Disabilities, Aging and Independent Living and the Department of Vermont Health Access both agree that the policy imperatives in this bill are very important and that they support them, yet they raise a common question as to how much it will cost.

We believe these positions need to be put into proper perspective. Following are some essential principles at stake here:

- Commissioner Hutt, in her budget testimony both in this Committee and the Appropriations Committee characterized adequate nutrition as a "non-negotiable" necessity.
- DAIL, as per the testimony of David Yacovone, Director of Older American Act programs confirms that dozens of states include home delivered meals in their home and community based waiver plans, at an average cost to the state of \$6.00 per meal.
- Presently, in CFC, if a participant chooses a home delivered meal, he or she will receive less personal care time. Director Yacovone testified that DAIL does not support reducing care time and wants having a nutritious meal be a positive social experience.
- Including home delivered meals as reimbursable waiver services should not "break the bank," so to speak. Approximately 10%-12% of CFC participants (25% of whom are under the poverty level) already receive such meals, paid for by the AAA programs with funds available under the Older Americans Act. The OAA funds do not meet the need and the AAA organizations are on the brink of establishing overall waiting lists. Older American Act funds are flat funded; Vermont has a small state minimum and will not receive any where near



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adequate resources to continue covering the demand for home delivered meals over all, not just in the CFC waiver. <u>*Yet the OAA meals program is expected to subsidize the CFC program.*</u>

- DAIL and DVHA must make annual budget projections and requests for appropriations. They do this each year for Choices for Care based upon policy decisions that drive the budgets, remembering that the CFC expenses must demonstrate that the overall balance between institutional care and home and community based services is maintained. For example, the FY 17 CFC budget request of \$187,293,862 includes, inter alia, annualizing the increased services to the moderate needs group approved last year, building in caseload increases for high and highest needs individuals and paying for the inflationary rate increase for nursing homes.
- The expectation, according to DAIL is that of the participants in CFC, approximately 20% would elect to participate in home delivered meals if offered under an amendment to the CFC waiver. Applying this estimate to the figures supplied by the Joint Fiscal Office, approximately 300 individuals would receive meals. The total cost would be \$378,480 annually. <u>Applying the federal match rate to this amount would make the cost to the state</u> <u>\$174,100, or about .02% of the CFC Budget for FY 17.</u> Given our experience with CFC participants and the meal program, the AAA's do not believe there would be quick growth in utilization rates for home delivered meals under CFC. DAIL agrees.
- Seeking an amendment to the CFC waiver should not jeopardize the negotiations for an extension of the combined Global Commitment Waiver. The coverage for home delivered meals would be restricted to CFC participants who choose to receive them as an element of their plans of care. While the service can be crucial to homebound elders to enable them to remain healthy and stay at home, including the benefit in the waiver is a minor amendment. This is a standard, non-controversial HCBS waiver service that will not be seen by CMS as a substantial change.
- The waiver amendment would add a key element in the optional services selected by Vermont that would reasonably be expected to help restrain increases in more expensive medical and institutional care and not threaten the "cost neutrality" at the core of the 1115 waiver.

In conclusion, V4A respectfully requests that the Committee direct the Agency of Human Services, within 30 days of the effective date of Section 2 of H.730, to request an amendment to the combined Global Commitment waiver that includes home delivered meals as a reimbursable Choices for Care service. Thank you for your consideration of this request and do not hesitate to reach out to us with further questions.

Sincerely,

Angela Smith-Dieng Executive Director