

HOME CARE AND HOSPICE

Presentation to the House Committee on Health Care



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Introduction

What is Home Health and Hospice Care? Health care and related services provided in the home.

There are 11 Medicare-certified home care agencies in Vermont - 10 are not-for-profit agencies and one is a for-profit agency.

Home health care services are provided by Medicare-certified Home Health Agencies.

Home care is patient-centered and evidence-based.

Home health services are essential to a truly integrated health care system.

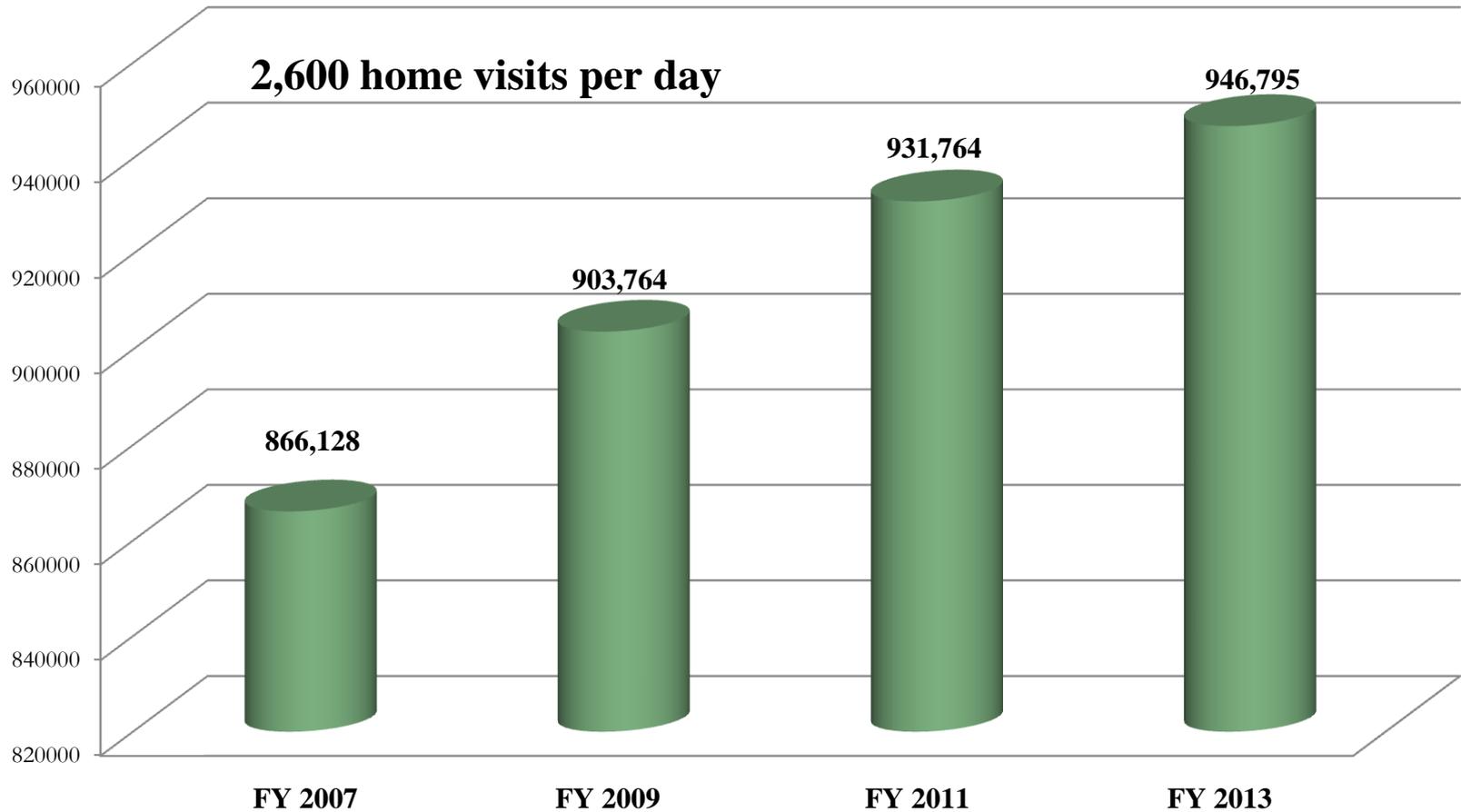
Vermont Home Care Facts

3

- Home care represents 2% to 3% of Vermont's health care costs.
- Without home care many patients would be in nursing home, rehabilitation centers or hospitals.
- VNAVt members serve all 251 of Vermont's towns.
- Universal access to medically necessary home care and hospice services is assured for every resident in every community in Vermont.
- No financial barriers to medically necessary care.
- Service provided 24-hours, 7days a week, 365 days/year.

947,795 Home Visits

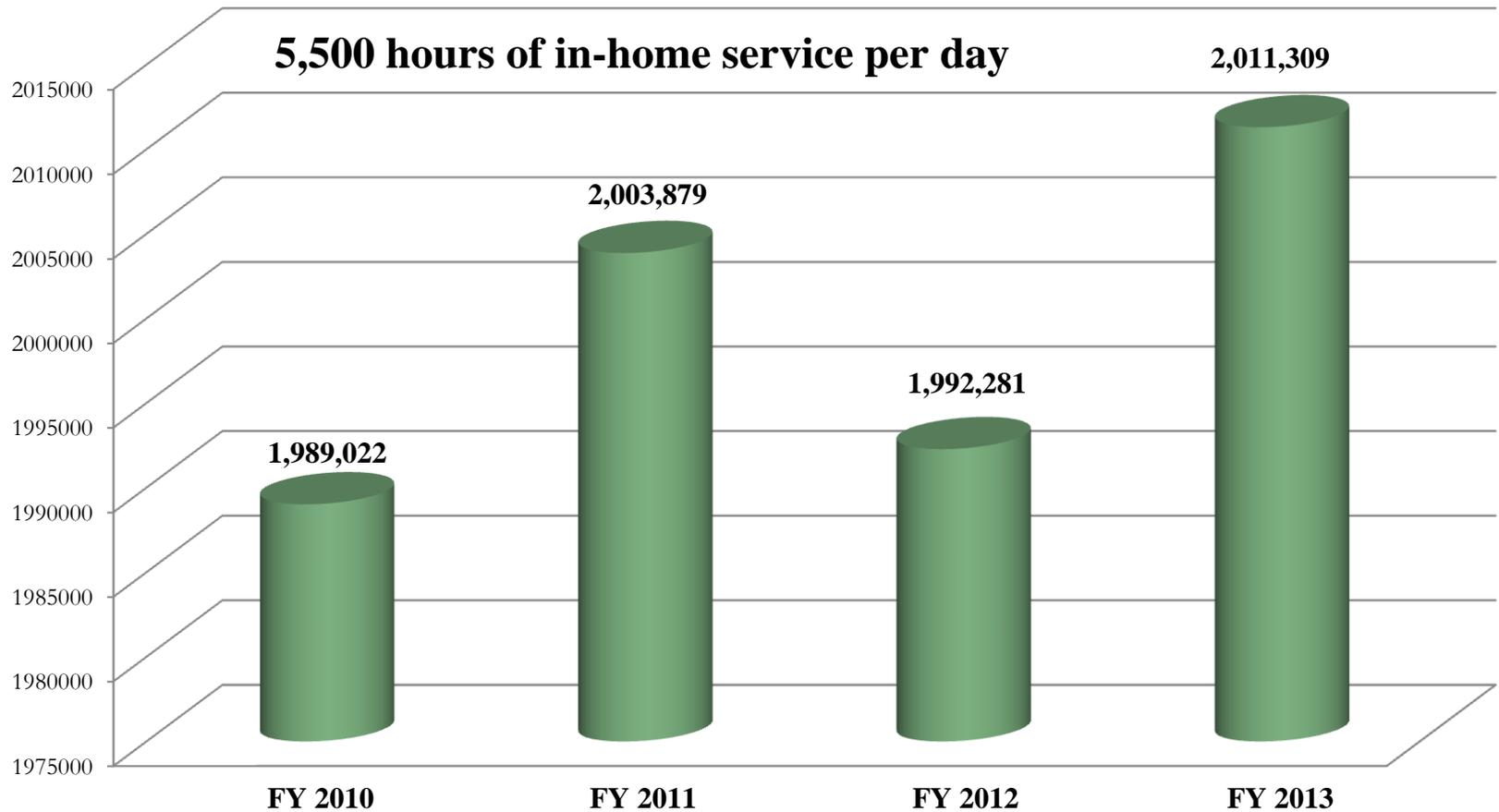
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Source: DAIL Reports

Two Million In-Home Hours

5



Source: DAIL Reports

Care to Entire Family

6



VNAs of Vermont provide care to the whole family.

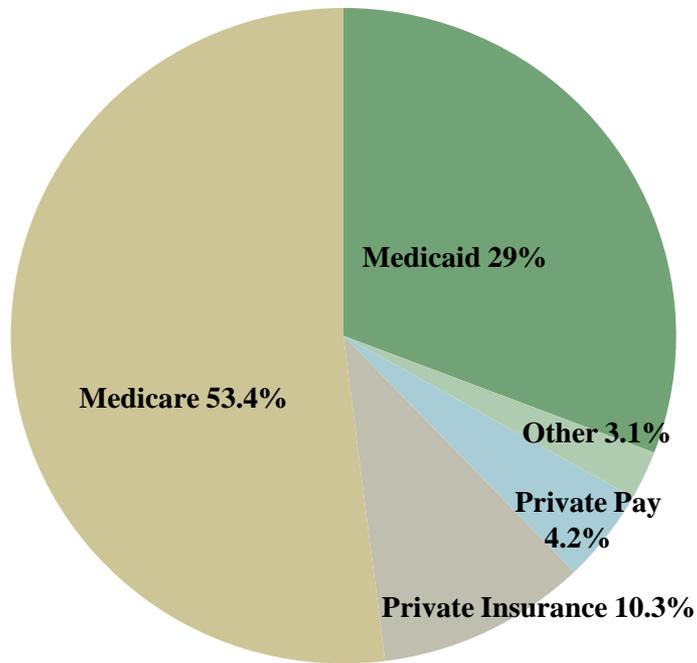
- Our care spans a lifetime.
- Care for patients includes support to family and caregivers (by teaching techniques that ensure continuity of care.)
- Caring for the whole person means healthier families and stronger communities.

What are Relationships?



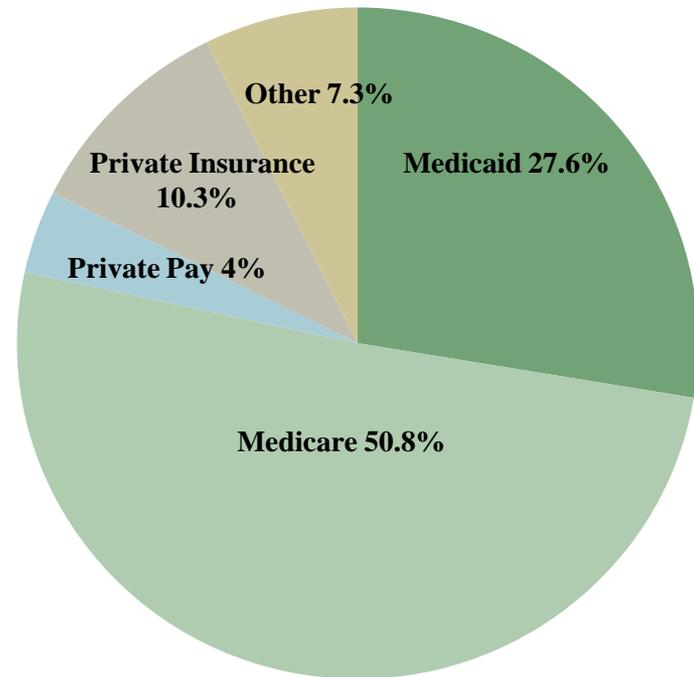
Who Pays for Home Health

Operating Revenues FY 2013



\$117,643,835

Total Revenues FY 2013



\$123,524,908

Home Health Services

8

Traditional Home Care

Health care and related services provided in the home. These services involve patients and their families and include a comprehensive plan of treatment and rehabilitation made in collaboration with the patient's physician.

Services include:

Nursing

Home Health Aide

Speech Therapy

Physical Therapy

Occupational Therapy

Medical Social Work

Personal Care Attendant

Respite

Homemaker

Hospice and Palliative Care

9

Hospice Services

- A specially coordinated home-based program that helps children and adults with a terminal illness, along with their families, cope with death by living life to the fullest. The interdisciplinary team emphasizes care directed toward expert pain and symptom control, maximizing independence and socialization and providing support.

Palliative Care

- Palliative Care services are offered by the VNAs of Vermont to help those who have a life-threatening or life-limiting illness maintain the highest quality of life possible



Maternal Child Health

10

- **Maternal Child Health**
- Comprehensive home and center-based prevention/early intervention services to provide medical educational and psychosocial support for families.
- Skilled Nursing
- Assessment, education & medical nursing intervention for pregnant and postpartum women
- Assessment, education & medical nursing interventions for children with chronic or acute illness, developmental delays, failure to thrive or injury
- Maternal-infant early discharge support
- Parenting skills education
- Licensed Nursing Assistants
- Family Educators
- Social Workers
- Physical & Occupational Therapy Services

Telemonitoring

11

- Telemonitoring is the use of telecommunication devices, placed in the patient's home, that take vital signs and relay the information back to the home health agency.
- When readings are outside the parameters set by the physician, an immediate home intervention takes place to address the patient's needs.



Care Management

12

- Care management is a collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet an individual's and family's comprehensive health needs through communication and available resources to promote quality, cost-effective outcomes.
- Patient-centered - Patients and their family members are directly involved in the home healthcare process on a day-to-day basis.



Home Care Across Care Continuum

13

Prevention and Wellness	Acute Care	Chronic and Long-Term Care	End-of-Life Care
Immunizations & Vaccinations	Nursing and Therapy	Nursing and Therapy	Palliative Care
Health Screening	Personal Care	Personal Care & Homemaking	Hospice Care
Wellness Nursing in Senior Housing	Care Management	Care Management	Bereavement Services
Support for At-risk Families	Referrals to Community Resources	Referrals to Community Resources	Respite House
Parenting Education & Support	Social & Emotional Support	Social & Emotional Support	
Family Caregiver Support	Telemonitoring	Telemonitoring	
	Pre- and Post-natal	High Tech Care	
	Wound Care	Traumatic Brain Injury Care	

Triple Aim of Health Care Reform

14

- Higher Quality Health Care
- Lower Costs
- Higher Patient Satisfaction

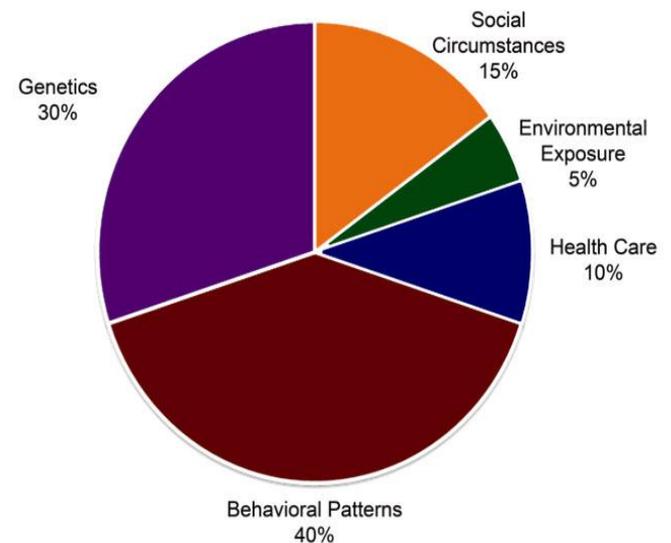
Triple Aim of Health Care Reform

15

What are social determinants of health?

Social determinants of health are economic and social conditions that influence the health of people and communities. Social determinants of health affect factors that are related to health outcomes. Factors related to health outcomes include:

- How a person develops during the first few years of life (early childhood development)
- How much education a persons obtains
- Being able to get and keep a job
- What kind of work a person does
- Having food or being able to get food (food security)
- Having access to health services and the quality of those services
- Housing status
- How much money a person earns
- Discrimination and social support



Triple Aim of Health Reform

16

For many reasons, home health agencies in Vermont are absolutely key to real and effective health care reform. Home care:

- Integrates clinical care with the patient's environment and support systems.
- Embodies effective, person-centered end-of-life care.
- Are experts in the Management of Chronic care
- Experts in preventive care
- Provide education, support and other tools such as telemonitoring to help support the patient's self care.
- Have close working relationships with other providers including physicians, hospitals, nursing homes, rehab. facilities, behavioral health providers and federally qualified health centers as well as Area Agencies on Aging, SASH and others.
- Facilitate transitions from hospital to home and nursing home to home.

Home Care and Health Reform

17

Chronic Care Management

- More upfront visits
- Health coaching
- Patient-directed goals

Better Breathing

Telemonitoring

ED-U-Turn

- Reducing use of emergency rooms



Health Care Reform

When appropriate, home health care is the least costly and most preferred care setting.

vnas
of Vermont
Your Nonprofit
Home Health & Hospice Agencies

What is Independence?

78%
of persons 65+ strongly agree:

“What I’d really like to do is stay in my current residence for as long as possible.”

VNAs of Vermont allow Vermonters to stay in their own homes.

- Providing comfort and privacy.
- Surrounded by family, friends, and pets.
- Having control of their care and their health.

SOURCE:
Home and Community Preferences of the 45+ Population.
Teresa A. Keenan, Ph.D., AARP, November 2010.

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What is Affordability?

 5 DAYS in the HOSPITAL buys	 39 DAYS in a NURSING HOME or	 138 DAYS of HOME HEALTH CARE
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SOURCE:
2013, according to Kaiser-Permanente, in terms of average cost per day in each listed above
(presented to CVHHH by the Accounting Firm of Brad Borbidge)

Challenges

19

- **Demand** - The number of people 65 years old or older is the fastest growing segment of the population. In addition, the incidence of chronic disease is also on the rise.
- **Poverty and Aging** - Many Vermonters face poverty for the first time after they retire. Poverty rates are high during older age partly because of substantial reductions in income and also because of the likelihood of major expenditures for health care.
- **Transportation** - Transportation to medical appointments but also for simple tasks such as grocery shopping can be a significant problem for many home care patients.

Challenges

20

- **Staffing Shortage** - There is a shortage of nurses, home health aides, licensed nursing assistants, homemakers, respite workers, therapists, and personal care attendants, especially for the direct care workers who provide help with personal care, physical therapy and speech therapy
- **Medicaid** - Medicaid losses are becoming unsustainable and threaten the financial existence of Vermont agencies
- **Medicare** - Medicare reimbursement rates have been cut over 8% in the past 3 year Medicare is planning to cut payments by 14% (3.5% per year) over the next 4 years.

State Programs

Traditional Home Care - Traditional Medicaid (Funded and administered by the Department of Vermont Health Access - DVHA). Vermont Medicaid funds the same home care services as Medicare including hospice.

Choices for Care Waiver (Funded through DVHA, administered by the Department of Disabilities, Aging and Independent Living – DAIL)

The Choices for Care program provides nursing-home level care in the home, in an enhanced residential care setting, and in a nursing home. Home care CFC services are:

Case Management: Case managers make home visits, and assist with assessment and care planning needs.

Personal Care Attendant: Clients who are eligible for the Medicaid Waiver Program can receive extended hours of home care attendant services to help with simple personal care, housekeeping, and meal preparation.

Homemaker Services: Trained homemakers offer light housekeeping, grocery shopping, errands, laundry, and simple personal care.

Respite/Companion: This service provides respite care to family caregivers.

State Programs

Maternal Child Health (Funded through DVHA, administered by the Department of Children and Families – DCF)

This program provides comprehensive prevention/early intervention services as well as medical, educational, and psychosocial support for families.

- **Healthy Babies, Kids and Families and Family and Infant & Toddler Program.** Healthy Babies Kids & Families is a benefit of Medicaid and Dr. Dynasaur health insurance programs. Nurses and family support workers provide education and help to connect parents with high quality health care and support services in the community.
- **The Family, Infant & Toddler Program** provides early intervention services to children aged birth to three who have developmental delays or who have conditions that may lead to developmental delays. Services include specialty clinics, care coordination services, family supports and limited financial assistance for authorized medical services.
- **Medical Home Visits**
- **Prenatal and Postnatal Care**

State Programs

High Tech (Funded through DVHA administered by DAIL)

The High Technology Home Care Program is an intensive home care program administered by the Department of Disability, Aging & Independent Living. The program coordinates medical supplies, and sophisticated medical equipment, and provides skilled nursing care for technology-dependent beneficiaries. The goal is to support the transition from hospital or other institutional care to the home or to prevent institutional placement. This program provides home care service to technology-dependent children and adults. High tech services include pulmonary care and infusion therapy (parenteral and enteral feeding, IV chemotherapy, and IV antibiotics).

Services include:

Nursing

High Tech Aide

Agency Directors

24

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Questions

25

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