## CHOICES FOR CARE (CFC) SFY13 REINVESTMENT PROPOSAL for SFY14

## A Focus on the Moderate Needs Group (MNG)

DAIL proposes to reinvest \$3,000,000 of Choices for Care FY13 savings over 18 months to achieve 2 outcomes:

# Decrease or eliminate the current MNG Wait List Increase MNG flexibility

The outcome of this proposed reinvestment will be to serve more people, create more personcentered flexibility for the people using services, improve quality and satisfaction, and improve access to services including maximizing the use of available funding.

The Choices for Care MNG program currently provides limited case management, homemaker and adult day services to individuals in the Moderate Needs Group (MNG). Individuals who are identified as Moderate Needs are below the level of care that would require nursing facility placement and are not subject to the financial eligibility criteria for Medicaid long-term support services. The proposal builds on our experience in the existing 'Flexible Choices' option, which is currently available only to people in the Highest/High Needs Groups.

Proposed allocation of the funding over two years was determined with input from the Moderate Needs Work Group. Factors considered included:

- Ability of providers to move current individuals off of the existing waitlist
- Base amount needed by AAAs to launch a flex pilot
- Historic utilization

Rationale

The proposed reinvestment is supported by current utilization, provider feedback, the results of the CFC Consumer Satisfaction Survey, and the independent evaluation by the University of Massachusetts Medical School (UMMS) and the clear directive of the Health Care Oversight Committee to address the current waitlist.

The DAIL Advisory Board unanimously endorsed the proposal.

Testimony Department of Disabilities, Aging and Independent Living FY14 Budget Adjustment Request House Human Services Committee January 14, 2014

#### Sample Flex Services Items

UMMS survey respondents suggested goods and services that might be useful We compared these to goods and services purchased by participants in Cash and Counseling Programs and Vermont's Flexible Choices. An assessment of New Jersey's Cash and Counseling Program examined 500 records of individual who stayed in the program almost fifteen months. Records showed that "46% of individuals purchased **transportation**; 37% purchased **laundry service** and 36% purchased **insurance to protect against liability for inhome workers**; although in some cases, it may have been insuring automobiles or computers" (Simon-Rusinowitz, Loughlin, & Mahoney, 2011). In Vermont's Flexible Choices, **personal care assistance** is the largest and most common purchase. Other goods and services include **assistive technology, equipment, and social/education/therapeutic lessons** (UMMS).

#### Background

The Choices for Care Moderate Needs program began with a total budget of \$4,058,198. Within this budget \$2,410,557 was allocated to certified Home Health Agencies (HHA) for homemaker services and \$1,647,641 was allocated to certified Adult Day providers (AD).

In the spring of 2011, the Moderate Needs program "unfroze" the program budget, allowing providers to begin enrolling new people from their wait lists. Though the program showed slow continuous growth throughout the year, at the end of SFY12 in June 2012 providers still reported approximately 291 people waiting for homemaker services and 6 people waiting for adult day services statewide.

## Eligibility criteria

A. General Eligibility

The person must:

• Be a Vermont resident aged 18 or older who meets both clinical and financial eligibility criteria;

Have a functional limitation associated with aging or resulting from a physical condition
 II. Clinical Eligibility Criteria (Case managers complete screening)

• Require supervision or any physical assistance three (3) or more times in seven (7) days with any single ADL or IADL, or any combination of ADLs and IADLs.

Have impaired judgment or decision-making skills that require daily general supervision
Require at least monthly monitoring for a chronic health condition.

• Health condition shall worsen if services are not provided or if services are discontinued.

III. Financial Eligibility

• Income

o Countable Income is all sources of income, including Social Security, SSI, retirement, pension, interest, VA benefits, wages, salaries, earnings and rental income, whether earned, unearned.

o Income Eligibility Standard: The income standard for the Moderate Needs group is met if the adjusted monthly income of the individual (and spouse, if any) is less than 300% of the supplemental security income (SSI) payment standard for one person (or couple) in the community after deducting recurring monthly medical expenses

Resources

o Countable Resources: Countable resources includes cash, savings, checking, certificates of deposit, money markets, stocks, bonds, trusts or other liquid assets, excluding primary residence or one car, that an individual (or couple) owns and could easily convert to cash to be used for his or her support and maintenance, even if the conversion results in the resource having a discounted value.

• A \$10,000 disregard is applied as an adjustment to resource limits.

Source: <u>http://www.ddas.vermont.gov/ddas-policies/policies-cfc/policies-cfc-moderate/po</u>