



**Stakeholders Meeting  
October 25, 2006  
CT Department of Social Services'  
Money Follows the Person Proposal**

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*Advocating for present and future population of elders*

I'd like to start by expressing gratitude for the people of the state who raised public awareness regarding the importance of the Money Follows the Person concept, the State Legislature for passing supportive legislation this last session, and the Department of Social Services for pursuing this opportunity with conviction and zeal.

**LTC Plan Balancing the System: *Working Toward Real Choice for Long-Term Care in Connecticut*** Every three years, the Long-Term Care Planning Committee (comprised of state agencies and legislators) develops a LTC Plan. They do so in collaboration with the LTC Advisory Council (comprised of advocates, consumers, and providers). The purpose of the plan is to educate and provide recommendations to policy makers regarding what steps CT should initiate and continue to meet the LTC challenges of the next several decades.

The new plan, to be released in January 2007, will continue to address the development and maintenance of a consumer-driven system of long-term services and support across the lifespan and across all disabilities. Choice, the least restrictive setting and community inclusion will continue to be the focus.

A great deal of effort and expertise goes into the development of CT Long-term Care Plan. So, my hope is that Department of Social Services is working closely with David Gutchen and with Barbara Parks-Wolf at the Office of Policy and Management as they are the primary architects of Connecticut's Plan.

**LTC Needs Assessment/ Public Act 06-188, Section 38:** Another important resource to you will be the information gathered via the LTC Needs Assessment presently underway per request of and funding provided by Connecticut's Legislature and with broad support of stakeholders. The UConn Health Center, Center on Aging of whom the Legislature, in consultation with the Commission on Aging, the LTC Advisory Council, and the LTC Planning Committee, has contracted with is presently conducting a comprehensive needs assessment of the unmet long-term care needs in the state and projections of future demand for services. They are surveying close to 30,000 residents and stakeholders. Preliminary results are due in December.

**Guiding Policy Statement / Public Act 05-14:** The Commission would also like to remind you to incorporate the proposal that Connecticut’s legislators codified into law in 2005 a broad philosophical statement to guide future policy and budget decisions. Public Act 05-14 provides that individuals with long term care needs have the option to choose and receiving long-term care and support in the least restrict, appropriate setting”.

Though I haven’t had the opportunity to review Connecticut’s draft MFP Proposal, I do however, **have great confidence in and respect for the team assembled at the Department of Social Services to produce the proposal as well as with the Nursing Facility Transition Steering Committee.**

**LTC Website:** The RFP stipulates that one of the elements is that the services and supports must be “easily recognized and accessible”. In addition to eventually establishing Aging and Disability Resource Centers for “One-Stop” approach, we as that you utilize and work with us to enhance the LTC Website. This website was recently launched and represents 3 years of work with the OPM, CoA, and the LTCAC and utilized Info-line’s extensive database. It is geared toward consumers.

**Number of people who will be transitioning:** The Legislature has established the number of individuals, 100 a year, who will be transitioned. I imagine that toward the middle of the life of the grant perhaps there is a graduated schedule. As Connecticut needs to be competitive with other states vying for this opportunity, it is my hope that the legislation providing for up to 100 people each year is not limiting. I’m wondering if there is a way in the initial proposal allow for the possibility of more folks to be transitioned out. If that number could be flexible, from the federal government’s perspective, it would give the legislature and the administration time to consider possible expansion perhaps over the one year period following.

**REBALANCING: Building a Strong Home and Community Based Infrastructure:**

We have an amazing opportunity before us in countless ways. It is imperative that we leverage all of these savings, or at least a significant percentage of these savings, to go back into the home and community based infrastructure. The home and community based structure is already fragile. This would be the year to establish this funding protocol as we have learned from past experiences, that once the money is considered a general fund revenue the opportunity is lost as it will be soon be spent on competing needs and areas of focus. Connecticut’s LTC expenditures equal approximately 14% of the state budget.

Of course, the two areas which are perhaps the most critical to the success of any rebalancing efforts are affordable, accessible housing and transportation.

- We must increase the capacity of and access to affordable housing. Increase utilization of section 8 vouchers, establish more resident service coordinators – right now there is one in every three facility. Rebuild and restock existing structures. In terms of affordability, in 2004, the average national rent for a one bedroom housing unit was greater than the amount of income received by people with disabilities from SSI. IN CT , where the average monthly payment was 747. In 2004, people paid on average 102.5 of their monthly SSI check for one bedroom units at fair market rent... (Technical Assistance Collaborative, Inc.)

- Transportation: Expand upon the innovative ITN model – volunteer based transportation as well as provide continue funding for the Municipal Matching Grant program (which distributes up to 5 million annually to towns to deliver additional transportation services to

older adults and persons with disabilities. Since last year, 133 towns and cities were awarded grants.

**Covered Services:** Clearly, the services which will be needed must provide choice and be FLEXIBLE as people age. Ideally, there will be an expansive menu or portfolio of options for people to consider which are without barriers.

- **Prevention:** I'm not certain if prevention is an area that is included in your proposal, but I would request that it be. Often times health or functional status can be maintained if problems are identified early. The prevalence of falls in older adults comes to mind. 30 %– 40 % of persons 65 years of age and older fall each year, which can in turn lead to a hospitalization, and at times death. As a matter of fact over 60% of the falls that lead to hospitalization occur in the home. Prevention is key.

Reduce the incidence of disabilities in newborns awareness of mercury poisoning and Fetal Alcohol Syndrome.

- Strong respite component and other means to support the very backbone of the long-term system – informal caregivers.

#### **Collaboration with Institutional Providers:**

The time is ripe change – with changing demographics, greater emphasis on quality of care, aging building structures, changing demands from a new generation of elders. Before us is an opportunity to create incentives for under-utilized institutions to convert to adult day care, residential care homes, respite care or other models of services. Such conversions could help mitigate the large capital expense of building and help institution operators remain in the field and utilize their staff as providers in the community. Such incentives could include low cost financing for conversions and tax credits.

The reality is though this grant will help hundred of people transition, thousands of others will remain in institutions. In illustration, presently there are 20,433 people in 2006 on Medicaid in institutional settings.

Therefore it is imperative that we maximize this opportunity and reach out to institutions for a culture change. Take the Green House Concept for example. The Green House is a small intentional community for a group of elders and staff. A radical departure from traditional skilled nursing homes and assisted living facilities, Green House alters facility size, interior design, staffing patterns, and methods of delivering skilled professional services. Its primary purpose is to serve as a place where older adults can receive assistance and support with activities of daily living and clinical care, without the assistance and care becoming the focus of their existence. Change within nursing facilities, the Green House is intended to de-institutionalize long-term care by eliminating large nursing facilities and creating habilitative, social settings.

- Green House transforms the nursing home from a single large building to multiple small, self-contained residences for 10 or fewer elders, who have private rooms and full bathrooms, and share communal space, including hearth, dining area, and full kitchen. Multiple Green Houses comprise a nursing home, meeting all NH regulations and working within state reimbursement levels.

**Diversion / Education Complement:** As either a part of this proposal if allowed or as complementary legislation, Connecticut should expand its present commitment to

prescreening all applicants to nursing facilities age 65 and older, regardless of their payer status, to include nursing facility applicants, regardless of their age or payer source. The goal would be not to prohibit or deny people the right to nursing home care if that is indeed their choice, but rather to assure that people have knowledge about available options in the community.

As part of the prescreening efforts, the state should enhance their existing educational efforts to hospitals, physicians, nursing facilities, senior centers, and others about options.

Entering a nursing home is a major life event. More likely to have kept their homes, have a viable informal support network, transfer – trauma associated with such a major life event.

In closing: I thank you for providing this opportunity for feedback as well as other opportunities along the way and wish you much success in this effort.