



**Testimony of the
Connecticut Association of Not-for-profit Providers For the Aging
Presented to the Human Services Committee**

March 11, 2008

Regarding

Senate Bill 662, An Act Concerning Medicaid Eligibility and Reimbursement

And in Support of

Senate Bill 665, An Act Concerning Continuing Care Facilities and Continuing Care at Home

CANPFA members serve thousands of people every day through mission-driven, not-for-profit organizations dedicated to providing the services people need, when they need them, in the place they call home. Our members offer the continuum of aging services: assisted living residences, continuing care retirement communities, residential care homes, nursing homes, home and community-based services, and senior housing.

Good morning Senator Harris, Representative Villano, and members of the Committee. My name is David Bordonaro and I am the President and CEO of McLean. McLean is a non-profit, charitable trust offering a unique continuum of care located in Simsbury, Connecticut. I am also the Chair of the Connecticut Association of Not-for-profit Providers for the Aging (CANPFA), an organization of over 130 non-profit providers of aging services. I am joined today by Mag Morelli, the President of CANPFA.

I am pleased to be here today to speak on **Senate Bill 662, An Act Concerning Medicaid Eligibility and Reimbursement** and in support of **Senate Bill 665, An Act Concerning Continuing Care Facilities and Continuing Care at Home**. CANPFA has submitted testimony that I will be summarizing.

Regarding Senate Bill 662:

Section 16

As an organization representing the full continuum of care, CANPFA has always believed that people should be able to receive care in the most appropriate setting. We have supported the current *Money Follows the Person Project* and its goal of moving residents from nursing homes back into the community, but we also believe it is just as important to help people remain in the community for as long as possible prior to entering a nursing facility. Therefore, we are supportive of the additional "Money Follows the Person" demonstration pilot proposed in Section 16 of the bill which would not require a prerequisite six-month nursing facility stay.

Section 4

The success of any type of *Money Follows the Person* program will be dependent upon the availability of home and community-based services. Therefore the state must commit to providing a stronger community-based network of care. An important part of that commitment is adequate provider reimbursement because a strong financial investment will promote quality, attract new providers and encourage innovation. The state needs to make this investment now and institute an annual indexing of rates for the full continuum of community-based providers to ensure that the reimbursement rates keep up with the rising costs of providing quality care.

Section 6

CANPFA supports the two-year pilot program proposed in Section 6 which would increase the use of telemonitoring to manage and treat up to one hundred and fifty Medicaid patients in the community with specific chronic conditions. It is a national priority of our affiliate organization, the American Association of Homes and Services for the Aging (AAHSA) and their Center for Aging Services Technologies (CAST), to develop and deploy technologies that can improve the aging experience in America. This includes technologies to manage health care information as well as technologies to improve the management of personal health care needs.

New technology solutions offer great promise to improve the quality of care while reducing healthcare costs. Technology already has transformed our lives – from email to handhelds and from electronic commerce to cell phones. It is time now for technology to transform the experience of aging. And equally as important, technological solutions need to be integrated into people's daily lives. As important as high-tech hospitals, we need technology in the home that allows citizens to confer with their medical professional or voluntarily share data on a real-time, continuous basis, rather than once every six months at an office visit.

Our current system is designed for treatment rather than prevention. Current healthcare policy – perhaps understandably – has been about *case-by-case problem solving* – dealing with limited resources and diverse and competing interest groups. The 21st century goal for senior healthcare should be about *solution seeking* – empowering consumers, lowering fixed costs and bringing together *all* healthcare actors into a consensus-reaching process on the future of healthcare policy. This is why passage of this type of forward thinking legislation is so important.

Section 8

CANPFA supports the modifications to the fair rent calculation proposed in Section 8. These modifications to the current skilled nursing home rate-setting system recognize the need to encourage capital improvements in older facilities. This language would mandate that the Department of Social Services truly recognize capital improvements within the nursing facilities calculated rate over the useful life of the improvement. The proposal would also raise the minimum fair rent for facilities once their initial fair rent calculation for their basic building expires. This modification is needed to avoid a dramatic reduction in the rate that would endanger their ability to obtain financing for capital improvement when they become necessary.

Section 9

CANPFA supports the proposed modifications to the bed-hold provisions contained in Section 9 which would continue to recognize the need to cover the costs incurred when a resident temporarily leaves the nursing home for a brief period and is expected to return to the room and bed that they are currently considering home.

Section 10

We have no objection to Section 10 of the bill which would be helpful to a CANPFA member that has been serving one of our larger cities for many years and wishes to continue to serve that community.

Senate Bill 665, An Act Concerning Continuing Care Facilities and Continuing Care at Home

CANPFA is pleased to support **Senate Bill 665, An Act Concerning Continuing Care Facilities and Continuing Care at Home**. Continuing care retirement communities (CCRCs) currently offer an innovative and independent lifestyle that is different from other housing and care options for older people. Through long-term contracts that provide for housing, services and nursing care, usually in one location, the CCRC continues to meet residents' needs in a familiar setting as they grow older.

Senate Bill 665 would allow the expansion of this long-term contract model to reach older adults who are planning for their current and future long-term care needs, but who would prefer to remain in their own homes. A continuing care at home model would allow individuals to enter into a contract for a complete and coordinated system of long term care while remaining at home. This option would encourage older adults to plan ahead and take advantage of a retirement community contract sooner, allowing them the opportunity to access wellness programs, coordinated systems of monitoring and managing any chronic conditions, and any needed home health care services. Assisted living and skilled nursing care would be available when and if needed, and in the setting preferred by the senior.

Our state long term care plan emphasizes personal choice and a balanced system of care and making available the forward-thinking option of continuing care at home fits perfectly within that plan.

Thank you for allowing me the opportunity to comment on these bills and I would be happy to answer any questions.

Respectfully submitted,

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