MICHAEL P. STARKOWSKI
Commissioner

STATE OF CONNECTICUT

DEPARTMENT OF SOCIAL SERVICES

OFFICE OF THE COMMISSIONER

TELEPHONE
(860) 424-5053

TDD/TTY
1-800-842-4524

FAX
(860) 424-5057

EMAIL
commis.dss@ct.gov

To: The Hon. Toni N. Harp, Senate Chair
The Hon. John C. Geragosian, House Chair
The Hon. Dan Debicella, Senate Ranking Member
The Hon. Craig A. Miner, House Ranking Member
Members of the Appropriations Committee

The Hon. Paul R. Doyle, Senate Chair
The Hon. Toni E. Walker, House Chair
The Hon. Rob Kane, Senate Ranking Member
The Hon. Lile R. Gibbons, House Ranking Member
Members of the Human Services Committee

From: Michael P. Starkowski, Commissioner

Date: May 25, 2010

Re: **Home- and Community-Based Services Medicaid Waiver ('Elder Care Waiver')**

As the Department of Social Services submits for your review Connecticut's renewal application for the Home- and Community-Based (Elder Care) Medicaid Waiver, I also want to follow up with additional information from our recent briefing on the Personal Care Assistance amendment.

The amendment adds PCA as a Medicaid waiver service for individuals aged 65 and older in the Connecticut Home Care Program for Elders, pursuant to Connecticut Public Act 09-64. PCA services were formerly available to Elder Care clients on a limited basis (200 slots) through the "Personal Care Assistance Pilot." By formally amending the waiver to include PCA services, such services will be available to all Elder Care clients and funding for such services will be eligible for federal financial participation.

The amendment was submitted to the federal Centers for Medicare and Medicaid Services on April 5, 2010, and a positive response is anticipated shortly.

At the briefing, Committee members asked several questions about DSS expenditures on existing services. I hope the following information will be helpful.

Access Agencies: Connecticut Home Care Program for Elders for clients 65 years of age and older

The Access Agencies provide comprehensive assessment and care plan development services. They are also responsible for ongoing monitoring of the clients needs and the effectiveness of the service plan in meeting those identified needs. The attached spread sheet illustrates DSS expenditures for each Access Agency during calendar 2009. Total expenditures for program services provided by the Access Agencies were $26,981,536. This figure includes nearly 15,000 Elder Care clients. This figure does not include the PCA services provided to 200 Elder Care clients under the PCA Pilot.

The three Access Agencies are:

- Connecticut Community Care Inc., covering greater Hartford and the eastern and western portions of the state;

- Agency on Aging of South Central Connecticut, covering the greater New Haven area and much of the shoreline; and

- Southwest Connecticut Agency on Aging, covering the greater Bridgeport area and lower Fairfield County.

The DSS-covered services provided by the Access Agencies, identified as "procedure codes" in the first column of the spreadsheet, and the rates paid by DSS for those services, are as follows:

- **1286Z - Case Management**
  - Rate $4.92 per day, as long as the person is in the community, not if they go to a hospital or nursing home. This is an optional service that the client may choose.

- **1288Z - Initial Assessment**
  - Rate $281.73 for one initial assessment when the client comes onto the program.

- **1291Z - Status Review**
  - Rate $93.19 for each review. Status reviews are done only when the client has not elected to receive case management services. Status reviews are allowed, for example, if an assessment is done and the client does not come onto the home care program and then reapplies four months later. The Access Agency goes back out to the home but gets paid only for a status review, not for another full assessment.

- **1292Z - Status Review – Hospital**
  - Rate $93.19 for one-time review during a hospital stay. Any additional reviews require prior authorization. Note: there were no claims for hospital status reviews in calendar 2009.

- **1293Z - Status Review – Nursing Facility**
  - Rate $93.19 for one-time review during the first 45 days of a nursing home stay. A second review would require prior authorization.

- **1295Z - Claims Processing Fee**
  - Rate $29.99 per month. For self-directed clients (clients who do not receive care management services), the Access Agency processes the claims from the providers, bills DSS through our claims contractor, and pays the providers.

Allied Community Resources: serving PCA clients under age 65

The above information does not include the approximately 750 clients in the under-65 PCA waiver program. These clients are not in the Connecticut Home Care Program for Elders and, consequently, are not served by the Access Agencies.

Allied Community Resources Inc. of East Windsor is the state's fiscal intermediary for the under-65 PCA waiver program. Allied enrolls personal care assistants as providers, maintains a list of approved of PCAs, processes timesheets and issues payments to providers. Allied also pays all of the payroll taxes on behalf of the employer and assists them in obtaining their Federal Employer Identification Number. It also provides participants with training on recruiting, hiring, training and supervising personal care assistants. The current PCA waiver projects expenditures to be approximately $ 22 million in FFY 2009. Administrative costs for administering the under 65 PCA Waiver program total $758,384 per year. Administrative costs for the Elder Pilot program are $339,971 per year. The total cost for the Elder PCA Pilot program is $7.2 million, which includes both administrative and direct service costs.

I look forward to presenting the Department's application for full renewal of the Home- and Community-Based (Elder Care) Medicaid Waiver on behalf of our elder population. Thank you and regards.

cc: Claudette Beaulieu, Deputy Commissioner
Mark Schaefer, Director, DSS Medical Care Administration
Kathy Bruni, Manager, DSS Alternate Care Unit

Elder Waiver Expenditures for Calendar Year 2009

Procedure Code	Connecticut Community Care - Hartford	Connecticut Community Care - Waterbury	Connecticut Community Care - Norwich	SW CT Area Agency on Aging	Agency on Aging of So. Central CT	TOTAL by code
1286Z - Case Management	$7,954,733.95	$5,425,273.32	$2,070,987.67	$3,601,689.58	$6,123,264.65	**$25,175,949.17**
1288Z - Initial Assessment	$507,030.18	$316,572.16	$149,441.23	$200,018.83	$388,064.18	**$1,561,126.58**
1291Z - Status Review	$8,116.47	$4,566.31	$3,258.94	$11,196.16	$8,681.00	**$35,818.88**
Review Nursing Facility	$46,944.71	$50,975.93	$12,111.99	$279.57	$19,849.47	**$130,161.67**
1295Z - Claims Processing Fee	$18,263.91	$4,798.40	$4,618.46	$21,799.25	$29,000.33	**$78,480.35**
TOTAL by Agency	**$8,535,089.22**	**$5,802,186.12**	**$2,240,418.29**	**$3,834,983.39**	**$6,568,859.63**	**$26,981,536.65**