

## CT Home Care Waiver Renewal Presentation before the Appropriations and Human Services Committees

Michael P. Starkowski,  
Commissioner  
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### **PA 09-64**

- Adds PCA as a service under Connecticut Homecare Program for Elders (CHCPE) provided:
  - Services not available under state plan
  - Services are cost effective on an individual basis
  - Services approved by federal government
  - Effective date 4/1/10 but can be requested retroactive to the start of the waiver year
  - CHCPE waiver amendment submitted on April 5, 2010 for the current waiver year
  - PCA added as a waiver service in the renewal for the next five years

## Goals For Waiver Renewal

- Decrease the percentage of clients discharged to nursing homes
- Increase flexibility
- Increase consumer direction
- Increase consumer choice

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## Current CHCPE Waiver Covered Services

- Chore
- Respite
- Companion
- Homemaker
- Transportation
- Assisted Living
- Adult Day Health
- Adult Foster Care
- Care Management
- Home Delivered Meals
- Mental Health Counseling
- Environmental Accessibility Adaptations
- Personal Emergency Response Systems

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## Service Changes In The Renewal

### Added Services

- Personal Care Assistant (PCA)
- Assistive Technology

### Removed Service

- Adult Foster Care

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## PCA Services

- One or more persons assisting an elder with tasks that the individual would typically do for him/herself in the absence of a disability. Such tasks may be performed at home or in the community. Such services may include physical or verbal assistance to the consumer in accomplishing any Activity of Daily Living (ADL), or Instrumental Activities of Daily Living (IADL). ADL's include bathing, dressing, toileting, transferring, and feeding. IADLs include such things as meal prep, med admin, housekeeping, laundry, shopping and transportation.
- Training for agency-based PCAs is provided by the agency. Training for self-directed hires is done by the consumer with support from the Care Manager and the Fiscal Intermediary (Allied).

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## PCA Services

- PCA will be available at 3 different rates:
  - Hourly, overnight(12 hour), per diem.
- Both for private individuals and for agencies
- Agency providers can be Homemaker/Companion Agencies or Homemaker/Home Health Agencies
- Overnight and Per Diem services require prior approval by DSS Utilization Review Staff
- Research done by UConn Center on Aging identified the need for both a flexible agency based home care provider as well as a self directed model

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## PCA Rates

	Individual	Agency
Per Hour	\$13.80	\$18.88
Overnight	\$110	\$132
Per Diem	\$150	\$180

*Individual providers – Allied, the program's fiscal intermediary, is responsible for calculating and deducting both employer and employee payroll deductions (e.g., federal and state taxes, Social Security, etc.).*

*Agency providers - Each agency is responsible for calculating and deducting both the employer and the employee payroll deductions (e.g., federal and state taxes, Social Security, etc.).*

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## **Assistive Technology**

- An item, piece of equipment, or product system, that is used to increase, maintain, monitor or improve functional capabilities of participants to perform Activity of Daily Living (ADL), or Instrumental Activities of Daily Living. (IADL)
- When an assistive technology device is identified that will support the waiver participant's independent functioning, the services will be reduced commensurate with the cost of the service it replaces
- Example might be a med dispensing machine
- Subject to an annual cap of \$1,000

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## **Quality Assurance/Improvement Requirements in a Waiver**

CMS has established six waiver assurances that states must comply with when administering a waiver:

1. Level of Care
2. Service Plan
3. Health and Welfare
4. Provider Qualifications
5. Fiscal Accountability
6. Administrative Authority

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## **Future Considerations**

- Issuance of RFP for fiduciary and ancillary services January, 2011 and beyond
- Potential to add services later to address needs of elders with mental health and/or substance abuse issues
- Continue to work with DMHAS on training and resource development for Care Managers
- Work with Adult Day Care Association to discuss potential enhancements and expansions of their services
- Examine opportunity to cover Telemonitoring as Assistive Technology