

February 14, 2007

Health and Human Services Appropriations Subcommittee

Thank you for allowing me the opportunity to speak with you about Home and Community Based Services and Case Management for Seniors.

The Iowa Legislature has recognized that Iowans, regardless of age or disability, want to remain as independent as possible for as long as possible and has worked with both the Department of Human Services and Department of Elder Affairs to encourage the use of home and community based services that help seniors to remain in their own homes. Recently the Legislature has supported home and community based provider rate increases and has approved Case Management as a service to be reimbursed by the Medicaid Elderly Waiver program.

These are significant steps to helping our older adults to remain independent and can be the most cost effective use of state and local resources for many seniors and their families.

Many older adults require a variety of home and community based services to remain in their own homes that can include:

Meals on Wheels	Transportation
Home Repair	Emergency Response
Adult Day Care	Respite
Home Health and Homemaker	Nursing Care
Mental Health Outreach	Assistive Devices
CDAC	Home and Vehicle Modifications
Nutritional Counseling	

The monthly cap for these services cannot go over \$1,084.

In addition, effective October 1, 2006 Case Management became a Medicaid Elderly Waiver Service. The current monthly reimbursement cannot exceed \$70 per client.

In order to be eligible for any of these Elderly Waiver services a person must:

- Be age 65 or older
- Meet the Nursing Facility Level of Care requirements
- Meet Medicaid financial guidelines
- Choose home and community based services rather than nursing facility placement

The Case Management Program for Frail Elders is a coordinated and comprehensive system that strives to provide Iowa's older adults the opportunity to make their own choices regarding long term care services. The program coordinates the delivery and payment for needed services, as each consumer is assisted by a trained Case Manager.

Case management is a proven and cost effective way to identify and meet our senior's needs. The Case manager makes a comprehensive in home assessment of the senior's needs, develops a plan with the senior and the family to implement services that will help the older adult to remain in his/her home, and coordinates and monitors the delivery of these services. This may require multiple visits and contacts with the older adult and the family monthly as well as multiple contacts with the consumer's physician and service providers.

With the addition of EW Medicaid funding for Case Management come additional oversight, documentation, statistical reporting, and quality assurance requirements. These are not bad things, however they increase the time required to serve any single case, thereby increasing the costs of the service itself.

While we are still experiencing some growing pains since the addition of Case Management as a Medicaid service, we believe it is still the most effective use of state and local resources in the delivery of services to our seniors. We would like to work with the Legislature, DHS, and DEA to work through these issues.

We believe that a continued investment in Home and Community Based Services:

- Is what Iowa's seniors and their families want
- Can help slow the growth of Medicaid expenditures for long term care
- Supports the state's efforts at re-balancing long term care
- Supports the Olmstead Decision
- And supports our family caregiver system

We respectfully ask that the Legislature to:

- Continue and expand the state's efforts to support home and community based services for seniors
- Consider an annual review of the \$70 maximum Medicaid reimbursement for Case Management to allow a reimbursement rate that reflects the actual cost of providing the service. (Possibly through a cost reporting system similar to targeted Case Management programs for Mentally Retarded and Mentally Ill. (We estimate the \$70 is approximately 70% of our actual cost at this time.)
- Consider an annual review, and re-basing of home and community based service provider rates to better reflect actual cost of service delivery

Thank you for your time today, I would be happy to try to answer any questions you may have.